

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5 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 CITY STATE ZIP CODE C C00053553 3. IS THIS REPORT NEW (N) OR AMENDED (A) x

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year, Termination Report (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31 (c) 12-Day PRE-Election Report for the: Primary, General, Runoff, Convention, Special (d) 30-Day POST-Election Report for the: General, Runoff, Special

5. Covering Period 10 / 01 / 2017 through 10 / 31 / 2017

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Adkins, Mary Rose, , , Type or Print Name of Treasurer

Signature of Treasurer Adkins, Mary Rose, , , [Electronically Filed] Date 01 / 26 / 2018

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

National Rifle Association of America Political Victory Fund

Report Covering the Period: From:  /  /  To:  /  /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2017"/>		1467286.60
(b) Cash on Hand at Beginning of Reporting Period.....	4205641.44	
(c) Total Receipts (from Line 19) .....	645587.46	5801370.51
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	4851228.90	7268657.11
7. Total Disbursements (from Line 31).....	2469771.89	4887200.10
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	2381457.01	2381457.01
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

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

**For further information contact:**  
  
Federal Election Commission  
999 E Street, NW  
Washington, DC 20463  
  
Toll Free 800-424-9530  
Local 202-694-1100

**DETAILED SUMMARY PAGE**  
of Receipts

Write or Type Committee Name

**National Rifle Association of America Political Victory Fund**

Report Covering the Period: From:  /  /  To:  /  /

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	82407.28	551059.17
(ii) Unitemized .....	355135.31	5030364.32
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	437542.59	5581423.49
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	2000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	437542.59	5583423.49
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).....	208044.82	217946.52
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.05	0.50
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 Transfers (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)).....▶	645587.46	5801370.51
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	645587.46	5801370.51

**DETAILED SUMMARY PAGE**  
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated 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 .....	6433.70	65610.81
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	6433.70	65610.81
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	29000.00	215650.00
24. Independent Expenditures (use Schedule E) .....	0.00	1516108.88
25. Coordinated Party Expenditures (52 U.S.C. § 30116(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	250.00
(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	250.00
29. Other Disbursements (Including Non-Federal Donations).....	2434338.19	3089580.41
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated 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)) ..	2469771.89	4887200.10
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	2469771.89	4887200.10

**DETAILED SUMMARY PAGE**  
of Disbursements

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Page 5

<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) .....	437542.59	5583423.49
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	250.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	437542.59	5583173.49
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	6433.70	65610.81
37. Offsets to Operating Expenditures (from Line 15, page 3).....	208044.82	217946.52
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	- 201611.12	- 152335.71

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: F3XA

Transaction ID :

This amendment updates any employment information for Line 11, Schedule A, as well as any full names that have been received since the original filing.

Form/Schedule:

Transaction ID:

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 485
	<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**

**A. MANGRUM, MICHAEL, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1132 RIVERWOOD DR

City NASHVILLE	State TN	Zip Code 37216-2228
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED	Occupation (for Individual)
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Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
234.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		02		2017

**Transaction ID : 76744657**

Amount of Each Receipt this Period  
37.00

Memo Item

**B. SMITH, JOHN R., , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 581

City BOLIVAR	State MO	Zip Code 65613-0581
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
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Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
260.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		10		2017

**Transaction ID : 76744678**

Amount of Each Receipt this Period  
55.00

Memo Item

**C. HITNER, JOHN M., , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 584 W MILBRAE DR

City ORO VALLEY	State AZ	Zip Code 85755-1760
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) US NAVY	Occupation (for Individual) ENGINEER
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Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
345.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		30		2017

**Transaction ID : 76744685**

Amount of Each Receipt this Period  
40.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	132.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 485
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

**A. BORNE, SIDNEY J, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6000 RANDOLPH BLVD APT 1207

City SAN ANTONIO	State TX	Zip Code 78233-5758
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) PHOENIX COMM-TEL, INC.	Occupation (for Individual) DETAIL ENGINEER
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Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
240.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 10 / 2017  
**Transaction ID : 76744687**

Amount of Each Receipt this Period  
 25.00

Memo Item

**B. BALDWIN, JOHN S, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7275 SW 136TH AVE

City BEAVERTON	State OR	Zip Code 97008-6217
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) Retired
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Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
276.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 20 / 2017  
**Transaction ID : 76744691**

Amount of Each Receipt this Period  
 25.00

Memo Item

**C. BUTLER, STUART, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 929 N MAIN ST

City HOMER	State LA	Zip Code 71040-3845
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) ATTY
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Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
550.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 03 / 2017  
**Transaction ID : 76744696**

Amount of Each Receipt this Period  
 100.00

Memo Item

<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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 485
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<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. LONGCOR, JODY, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8970 STONE OAK DR  
 City MONTGOMERY State TX Zip Code 77316-6920  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) DELTA AIRLINES, INC. Occupation (for Individual) CUSTOMER SERVICE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 503.00

Date of Receipt 10 / 21 / 2017  
**Transaction ID : 76744698**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**B. HRUPCHO, DAVID L, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1108 TUCKER RD  
 City FREMONT State OH Zip Code 43420-3173  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) JEB MODERN MACHINES, LTD Occupation (for Individual) MACHINIST  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 440.00

Date of Receipt 10 / 11 / 2017  
**Transaction ID : 76744713**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**C. CARROLL, MICHAEL W, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 205 FLORIDA ST  
 City DELHI State LA Zip Code 71232-3123  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 04 / 2017  
**Transaction ID : 76744718**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	175.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 10 OF 485 (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 of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. WALLIS, BERT, , ,</b>			Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 10 / 2017		
Mailing Address 2540 PRAIRIE RD			<b>Transaction ID : 76744722</b>		
City MONTICELLO	State AR	Zip Code 71655-8659	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item		
Name of Employer (for Individual)		Occupation (for Individual)			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 304.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. SURDI, DAVID J, , MR,</b>			Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 02 / 2017		
Mailing Address 16349 LYNCH RD			<b>Transaction ID : 76744728</b>		
City HOLLEY	State NY	Zip Code 14470-9397	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item		
Name of Employer (for Individual) KODAK		Occupation (for Individual) MACHINIST			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 328.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. GUTIERREZ, RAFAEL, , MR,</b>			Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 11 / 2017		
Mailing Address 5306 DENTON PL			<b>Transaction ID : 76744731</b>		
City MADISON	State WI	Zip Code 53711-4325	Amount of Each Receipt this Period 70.00		
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item		
Name of Employer (for Individual) SELF EMPLOYED		Occupation (for Individual) ATTORNEY			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 220.00			

<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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 485
	<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. GARR, LARRY N, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3600 BUNKER HILL DR

City NORTH LITTLE ROCK	State AR	Zip Code 72116-6976
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GMAC	Occupation (for Individual) DEALER RELATIONS MGR
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Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		30		2017

**Transaction ID : 76744734**

Amount of Each Receipt this Period  
50.00

Memo Item

**B. STROH, DAVID L, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 15126 UNA ST

City CALDWELL	State ID	Zip Code 83607-7888
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Self Employed	Occupation (for Individual) Insurance Agencies and Services
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Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2017

**Transaction ID : 76744754**

Amount of Each Receipt this Period  
100.00

Memo Item

**C. STONE, RICHARD, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6873 CHRISTENSEN RD

City CHEYENNE	State WY	Zip Code 82009-9541
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
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Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
230.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		10		2017

**Transaction ID : 76744781**

Amount of Each Receipt this Period  
50.00

Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 485
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

**A. HACKBARTH, WARREN A, A, MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 882 HAGADORN RD  
 City MASON State MI Zip Code 48854-9310  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) G.M. MOTORS CORP Occupation (for Individual) AUTO ASSEMBLER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 18 / 2017  
**Transaction ID : 76744813**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**B. DZIADYK, WALTER, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO BOX 1054  
 City ROCHESTER State WA Zip Code 98579-1054  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) OLYMPIC ARMS, INC Occupation (for Individual) CNC OPERATOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 03 / 2017  
**Transaction ID : 76744822**  
 Amount of Each Receipt this Period 30.00  
 Memo Item

**C. CRIMMNGS, DAVID C, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 41 GORHAM ST  
 City ARLINGTON State MA Zip Code 02474-1452  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired-Electrician  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 221.00

Date of Receipt 10 / 23 / 2017  
**Transaction ID : 76744825**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	105.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 485
	<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. STREI, EUGENE J, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1356 350TH ST

City BELLINGHAM	State MN	Zip Code 56212-2040
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
345.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		23		2017

**Transaction ID : 76744828**

Amount of Each Receipt this Period  
37.00

Memo Item

**B. COX, KIM V, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 32348 HIGHLAND RD

City RAINIER	State OR	Zip Code 97048-4702
-----------------	-------------	------------------------

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

Name of Employer (for Individual) CITY OF PORTLAND	Occupation (for Individual)
---	-----------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
205.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		16		2017

**Transaction ID : 76744841**

Amount of Each Receipt this Period  
50.00

Memo Item

**C. KENNEDY, GERALD F, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 18301 NE 184TH ST

City BRUSH PRAIRIE	State WA	Zip Code 98606-8609
-----------------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		30		2017

**Transaction ID : 76744846**

Amount of Each Receipt this Period  
300.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	387.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 485
	<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**

**A. STONE, ROBERT W, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 27679 HAGAR DR

City FOREST CITY	State MO	Zip Code 64451-9116
---------------------	-------------	------------------------

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

Name of Employer (for Individual) Retired	Occupation (for Individual) Retired
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
675.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		03		2017

**Transaction ID : 76744848**

Amount of Each Receipt this Period  
50.00

Memo Item

**B. COFFIN, WILLIAM H, , MR, III**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address N96W15418 COUNTY LINE RD

City GERMANTOWN	State WI	Zip Code 53022-5245
--------------------	-------------	------------------------

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

Name of Employer (for Individual) AMERICAN STATE EQUIPMENT CO	Occupation (for Individual) MECHANIC
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
547.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		16		2017

**Transaction ID : 76744852**

Amount of Each Receipt this Period  
37.00

Memo Item

**C. OGATA, MORRIS S, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2365 PALOLO AVE

City HONOLULU	State HI	Zip Code 96816-3144
------------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
338.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		20		2017

**Transaction ID : 76744861**

Amount of Each Receipt this Period  
25.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	112.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 485
	<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. HART, HIRAM, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3976 STATE HIGHWAY 69 S

City GREENVILLE	State TX	Zip Code 75402-9066
--------------------	-------------	------------------------

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

Name of Employer (for Individual) PIZZA HUT	Occupation (for Individual) DELIVERY DRIVER
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
310.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		10		2017

**Transaction ID : 76744864**

Amount of Each Receipt this Period  
40.00

Memo Item

**B. ARMSTRONG, EDWARD, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 319 STUART DR

City PETALUMA	State CA	Zip Code 94954-3440
------------------	-------------	------------------------

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

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
274.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		10		2017

**Transaction ID : 76744868**

Amount of Each Receipt this Period  
200.00

Memo Item

**C. FITZGERALD, KEVIN B, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10841 S KOLMAR AVE

City OAK LAWN	State IL	Zip Code 60453-5627
------------------	-------------	------------------------

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

Name of Employer (for Individual) CONTINENTAL ELECTRIC	Occupation (for Individual) ELECTRICIAN
---	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
255.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		11		2017

**Transaction ID : 76744870**

Amount of Each Receipt this Period  
55.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	295.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 485
	<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. DUPREE, CHARLES J, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 304

City MINA	State NV	Zip Code 89422-0304
--------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
275.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		06		2017

**Transaction ID : 76744874**

Amount of Each Receipt this Period  
25.00

Memo Item

**B. HOOD, BARBARA M, , MS,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6 WILD ROSE LOOP

City PHILIPSBURG	State MT	Zip Code 59858-9773
---------------------	-------------	------------------------

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

Name of Employer (for Individual) Retired	Occupation (for Individual) Retired
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2017

**Transaction ID : 76744898**

Amount of Each Receipt this Period  
50.00

Memo Item

**C. MIKESKA, JAMES L, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 16211 DOWNEY AVE UNIT 66

City PARAMOUNT	State CA	Zip Code 90723-5579
-------------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		17		2017

**Transaction ID : 76744899**

Amount of Each Receipt this Period  
25.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	100.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 485
	<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. MOWER, FERRELL R, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2409 N AVE

City NATIONAL CITY	State CA	Zip Code 91950-6017
-----------------------	-------------	------------------------

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

Name of Employer (for Individual) US NAVY	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
427.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		16		2017

**Transaction ID : 76744913**

Amount of Each Receipt this Period  
50.00

Memo Item

**B. BOYKIN, GABRIEL, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 17425 DEVINE RD

City LOXLEY	State AL	Zip Code 36551-7627
----------------	-------------	------------------------

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

Name of Employer (for Individual) Sirmon Farms	Occupation (for Individual) Farmer
---	---------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
334.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		06		2017

**Transaction ID : 76744915**

Amount of Each Receipt this Period  
37.00

Memo Item

**C. WHITHEAD, ROBERT M, , MR, II**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 223 LEGACY DR

City BRANDON	State MS	Zip Code 39042-4418
-----------------	-------------	------------------------

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

Name of Employer (for Individual) R W DISTRIBUTORS, INC.	Occupation (for Individual) COMPROLLER
---	---

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
431.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		11		2017

**Transaction ID : 76744922**

Amount of Each Receipt this Period  
55.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	142.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 485
	<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. OSTE, MATT, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1447 PIPER CT

City CONCORD	State NC	Zip Code 28025-9121
-----------------	-------------	------------------------

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

Name of Employer (for Individual) AGV PRODUCTS	Occupation (for Individual) CSM
---	------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
454.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		06		2017

**Transaction ID : 76744924**

Amount of Each Receipt this Period  
30.00

Memo Item

**B. DELANOY, KENNETH, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 21007 W BEECHWOOD RD

City ESPANOLA	State WA	Zip Code 99022-9634
------------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
275.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2017

**Transaction ID : 76744942**

Amount of Each Receipt this Period  
50.00

Memo Item

**C. BOGARD, RICHARD L, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11762 DE PALMA RD # 1-C

City CORONA	State CA	Zip Code 92883-4010
----------------	-------------	------------------------

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

Name of Employer (for Individual) Retired	Occupation (for Individual) Retired
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
550.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		17		2017

**Transaction ID : 76744943**

Amount of Each Receipt this Period  
100.00

Memo Item

<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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 485
	<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. CROUCH, DONALD L, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2107 FORT HALIFAX ST

City HENDERSON	State NV	Zip Code 89052-8551
-------------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
565.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		10		2017

**Transaction ID : 76744951**

Amount of Each Receipt this Period  
200.00

Memo Item

**B. AYERS, ROYAL B, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 54 FRANCIS AVE

City HAMDEN	State CT	Zip Code 06517-2706
----------------	-------------	------------------------

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

Name of Employer (for Individual) CAMEROTA TRUCK PARTS, INC	Occupation (for Individual) DRIVER
--	---------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
213.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		16		2017

**Transaction ID : 76744979**

Amount of Each Receipt this Period  
25.00

Memo Item

**C. HAAS, BERNARD J, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 616

City EAGLE POINT	State OR	Zip Code 97524-0616
---------------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
231.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		10		2017

**Transaction ID : 76744984**

Amount of Each Receipt this Period  
55.00

Memo Item

<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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 485
	<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. WHITEHEAD, WAYNE, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 14285 WHIPPOORWILL VIS

City CHOCTAW	State OK	Zip Code 73020-7969
-----------------	-------------	------------------------

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

Name of Employer (for Individual) MIDWEST COATINGS, INC.	Occupation (for Individual) PRESIDENT / OWNER
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
210.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		03		2017

**Transaction ID : 76744992**

Amount of Each Receipt this Period  
30.00

Memo Item

**B. DYKEMA, JACK, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3540 NEW HOLLAND ST

City HUDSONVILLE	State MI	Zip Code 49426-1644
---------------------	-------------	------------------------

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

Name of Employer (for Individual) Retired	Occupation (for Individual) Retired
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
213.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		12		2017

**Transaction ID : 76745042**

Amount of Each Receipt this Period  
37.00

Memo Item

**C. DYKEMA, JACK, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3540 NEW HOLLAND ST

City HUDSONVILLE	State MI	Zip Code 49426-1644
---------------------	-------------	------------------------

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

Name of Employer (for Individual) Retired	Occupation (for Individual) Retired
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
237.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2017

**Transaction ID : 76745043**

Amount of Each Receipt this Period  
24.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	91.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 485
	<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. KULP, ALAN R, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 699 W BROOKDALE ST

City ALLENTOWN	State PA	Zip Code 18103-4841
-------------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
223.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		13		2017

**Transaction ID : 76745055**

Amount of Each Receipt this Period  
25.00

Memo Item

**B. RYAN, RICHARD G, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 815

City WINTERS	State TX	Zip Code 79567-0815
-----------------	-------------	------------------------

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

Name of Employer (for Individual) Retired	Occupation (for Individual) Retired
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
341.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		10		2017

**Transaction ID : 76745077**

Amount of Each Receipt this Period  
25.00

Memo Item

**C. TITLEY, SPENCER R, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6920 E TAOS PL

City TUCSON	State AZ	Zip Code 85715-3343
----------------	-------------	------------------------

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

Name of Employer (for Individual) UNIVERSITY OF ARIZONA	Occupation (for Individual) RETIRED - PROFESSOR
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		04		2017

**Transaction ID : 76745082**

Amount of Each Receipt this Period  
50.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	100.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 485
	<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**

**A. MINER, EVAN, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 88

City MILTON	State VT	Zip Code 05468-0088
----------------	-------------	------------------------

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

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) SCALE SALES & SERV
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
292.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		06		2017

**Transaction ID : 76745084**

Amount of Each Receipt this Period  
37.00

Memo Item

**B. HEPPLER, GEORGE, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1824 VAN CT SW

City ALBUQUERQUE	State NM	Zip Code 87105-6160
---------------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
273.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		02		2017

**Transaction ID : 76745089**

Amount of Each Receipt this Period  
25.00

Memo Item

**C. REED, DONALD V, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9241 E AVENUE T4

City LITTLE ROCK	State CA	Zip Code 93543-2717
---------------------	-------------	------------------------

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

Name of Employer (for Individual) Retired	Occupation (for Individual) Retired
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
274.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		06		2017

**Transaction ID : 76745105**

Amount of Each Receipt this Period  
25.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	87.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 485
	<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	<input type="checkbox"/> 17

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

**A. HINNERGARDT, KEN D, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1805 FAIRWAY DR

City DODGE CITY	State KS	Zip Code 67801-2904
--------------------	-------------	------------------------

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

Name of Employer (for Individual) FEIST A YELLOW BOOK CO	Occupation (for Individual) SALES
---	--------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
283.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		16		2017

**Transaction ID : 76745107**

Amount of Each Receipt this Period  
55.00

Memo Item

**B. RICKARD, STAN, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 507 WATER ST S

City HART	State MI	Zip Code 49420-1246
--------------	-------------	------------------------

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

Name of Employer (for Individual) City of Hart	Occupation (for Individual) Manager
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
322.60

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		17		2017

**Transaction ID : 76745134**

Amount of Each Receipt this Period  
26.26

Memo Item

**C. BERGMANN, DAN, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 86 PLAIN ST

City EASTHAMPTON	State MA	Zip Code 01027-2548
---------------------	-------------	------------------------

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

Name of Employer (for Individual) CYALUME TECHNOLOGIES	Occupation (for Individual) MACHINE OPERATOR
---	---

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
375.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		16		2017

**Transaction ID : 76745167**

Amount of Each Receipt this Period  
25.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	106.26
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 24 OF 485
<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. VAN SOMEREN, FLOYD, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10335 S GRASS VALLEY RD

City WINNEMUCCA	State NV	Zip Code 89445-8740
--------------------	-------------	------------------------

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

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
320.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	17	/	2017

**Transaction ID : 76745233**

Amount of Each Receipt this Period  
55.00

Memo Item

**B. SMITH, MICHAEL, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 24631 COATS RD

City MAYSVILLE	State AR	Zip Code 72747-8816
-------------------	-------------	------------------------

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

Name of Employer (for Individual) SELF EMPLOYED/SEMI-RETIRED	Occupation (for Individual) PART TIME FARMER
---	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
205.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	24	/	2017

**Transaction ID : 76745234**

Amount of Each Receipt this Period  
150.00

Memo Item

**C. HOGAN, TED, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5 POPLAR ST

City WOBURN	State MA	Zip Code 01801-1607
----------------	-------------	------------------------

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

Name of Employer (for Individual) Insultab, Inc.	Occupation (for Individual) Supervisor
---	---

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
298.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	10	/	2017

**Transaction ID : 76745242**

Amount of Each Receipt this Period  
25.00

Memo Item

<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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 485
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

**A. BIELEC, BERNARD, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 428 FLOWERDALE ST  
 City FERNDALE State MI Zip Code 48220-1876  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 16 / 2017  
**Transaction ID : 76745251**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**B. ENGELKING, BEN R, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO BOX 150  
 City MOUNTLAKE TERRACE State WA Zip Code 98043-0150  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) B. R. ENGELKING COMPANY, INC. Occupation (for Individual) HVAC TRAINING SCHOOL  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 10 / 11 / 2017  
**Transaction ID : 76745276**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**C. NELSON, LUCINDA, , MS,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 21949 LAKE HOOK RD  
 City HUTCHINSON State MN Zip Code 55350-5630  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt 10 / 02 / 2017  
**Transaction ID : 76745282**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

<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) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 26 OF 485
<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. BUMBAUGH, HARRY E, , MR, JR**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 30 W MAXWELL ST

City MOUNT UNION	State PA	Zip Code 17066-1549
---------------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
272.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	03	/	2017

**Transaction ID : 76745295**

Amount of Each Receipt this Period  
25.00

Memo Item

**B. SELVY, GEORGE T, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 17108 SPRUCE WAY

City LYNNWOOD	State WA	Zip Code 98037-6923
------------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
261.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	11	/	2017

**Transaction ID : 76745303**

Amount of Each Receipt this Period  
25.00

Memo Item

**C. KEZAR, WILLIAM K, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11942 OTTAWA PL

City CHINO	State CA	Zip Code 91710-6410
---------------	-------------	------------------------

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

Name of Employer (for Individual) STATE OF CALIFORNIA	Occupation (for Individual) CORRECTIONS OFFICER
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
235.49

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	23	/	2017

**Transaction ID : 76745326**

Amount of Each Receipt this Period  
23.99

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	73.99
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 485
	<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. JOHNSTON, JAMES L, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5729 PARKSIDE DR

City CHEYENNE	State WY	Zip Code 82001-6547
------------------	-------------	------------------------

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

Name of Employer (for Individual) WYOMING DEPT. OF TRANSPORTATIO	Occupation (for Individual) DISPATCHER
---	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
210.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		10		2017

**Transaction ID : 76745331**

Amount of Each Receipt this Period  
30.00

Memo Item

**B. KUHN, LEN, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4651 HICKORY TREE RD

City SAINT CLOUD	State FL	Zip Code 34772-9003
---------------------	-------------	------------------------

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

Name of Employer (for Individual) EMBARQ	Occupation (for Individual) SERVICE TECHNICIAN
---	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
224.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		06		2017

**Transaction ID : 76745341**

Amount of Each Receipt this Period  
25.00

Memo Item

**C. BELL, CHARLES, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 15 FRAME AVE

City BEAUFORT	State SC	Zip Code 29906-7828
------------------	-------------	------------------------

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

Name of Employer (for Individual) PORT ROYAL GUN AND PAWN	Occupation (for Individual) OWNER
--	--------------------------------------

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		02		2017

**Transaction ID : 76745348**

Amount of Each Receipt this Period  
50.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	105.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 28 OF 485
	(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. MITCHELL, BARRY F, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 229 NW 93RD LN

City BRANFORD	State FL	Zip Code 32008-7234
------------------	-------------	------------------------

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

Name of Employer (for Individual) DRAVEN-THOMPSON & ASSOC	Occupation (for Individual) LAND SURVEYOR
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
279.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		10		2017

**Transaction ID : 76745369**

Amount of Each Receipt this Period  
25.00

Memo Item

**B. RAYNIAK, FRANK J, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 39809 N BECK RD

City LAKE VILLA	State IL	Zip Code 60046-7414
--------------------	-------------	------------------------

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

Name of Employer (for Individual) ILLINOIS TOOL MAKER - PASLODE	Occupation (for Individual) MODEL MAKER
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
256.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		10		2017

**Transaction ID : 76745370**

Amount of Each Receipt this Period  
37.00

Memo Item

**C. VOGELHUT, FARREL, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 39 BRAINARD RD

City WEST HARTFORD	State CT	Zip Code 06117-2203
-----------------------	-------------	------------------------

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

Name of Employer (for Individual) Retired	Occupation (for Individual) Retired
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
248.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		03		2017

**Transaction ID : 76745383**

Amount of Each Receipt this Period  
50.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	112.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 485
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

**A. ROHRER, FRED C, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3132 FOLSAM RD NW  
 City CARROLLTON State OH Zip Code 44615-8201  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Carrollton Village Schools Occupation (for Individual) Teacher  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 403.00

Date of Receipt 10 / 12 / 2017  
**Transaction ID : 76745387**  
 Amount of Each Receipt this Period 30.00  
 Memo Item

**B. RETTAMMEL, ELLSWORTH, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 303 HOMEGATE CIR  
 City APEX State NC Zip Code 27502-3987  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 221.00

Date of Receipt 10 / 18 / 2017  
**Transaction ID : 76745397**  
 Amount of Each Receipt this Period 37.00  
 Memo Item

**C. TROYER, JOHN M, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5089 DOGLEG RD  
 City URBANA State OH Zip Code 43078-9504  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt 10 / 11 / 2017  
**Transaction ID : 76745398**  
 Amount of Each Receipt this Period 24.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	91.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 485
	<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. HOPE, GEORGE J, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 289 BOWMAN RD

City HAMILTON	State MT	Zip Code 59840-9609
------------------	-------------	------------------------

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

Name of Employer (for Individual) Self Employed	Occupation (for Individual) Welder
--	---------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
320.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		11		2017

**Transaction ID : 76745400**

Amount of Each Receipt this Period  
37.00

Memo Item

**B. MUSCARNERA, JOSEPH J, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2614 185TH AVE E

City LAKE TAPPS	State WA	Zip Code 98391-9456
--------------------	-------------	------------------------

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

Name of Employer (for Individual) Retired	Occupation (for Individual) Retired
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
474.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		10		2017

**Transaction ID : 76745407**

Amount of Each Receipt this Period  
37.00

Memo Item

**C. PRATT, PETER E, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 35982 W COUNTY LINE RD

City KIRKLAND	State IL	Zip Code 60146-8224
------------------	-------------	------------------------

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

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) REAL ESTATE BROKER
--	---

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		18		2017

**Transaction ID : 76745414**

Amount of Each Receipt this Period  
50.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	124.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 485
	<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. KICHLINE, HARVEY P, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2663 OAKHURST DR  
 City CENTER VALLEY State PA Zip Code 18034-9481  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SOUTHERN LIEHIGH SCHOOL DIST Occupation (for Individual) CUSTODIAN  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 345.00

Date of Receipt 10 / 03 / 2017  
**Transaction ID : 76745441**  
 Amount of Each Receipt this Period 55.00  
 Memo Item

**B. BECHTEL, LARY, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1146 HICKORY AVE  
 City FAIRFIELD State CA Zip Code 94533-7094  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 10 / 11 / 2017  
**Transaction ID : 76745452**  
 Amount of Each Receipt this Period 37.00  
 Memo Item

**C. HOYT, LARRY P, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 421 YORK ST  
 City PINE RIVER State MN Zip Code 56474-5113  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 459.00

Date of Receipt 10 / 03 / 2017  
**Transaction ID : 76745470**  
 Amount of Each Receipt this Period 37.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	129.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 485
	<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. GEER, GREG, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 21517 LITTLE COOLEY RD

City CENTERVILLE	State PA	Zip Code 16404-1635
---------------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
307.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		13		2017

**Transaction ID : 76745471**

Amount of Each Receipt this Period  
25.00

Memo Item

**B. BOCKHORN, DAVID W, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8105 MULEY DR

City AUSTIN	State TX	Zip Code 78759-6941
----------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		11		2017

**Transaction ID : 76745484**

Amount of Each Receipt this Period  
150.00

Memo Item

**C. SCHOBECK, WILLIAM E, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 585

City BEMUS POINT	State NY	Zip Code 14712-0585
---------------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
420.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		06		2017

**Transaction ID : 76745494**

Amount of Each Receipt this Period  
100.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	275.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 485
	<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. WOOTER, GEORGE W, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6425 SHORTLINE HWY

City PORTERS FALLS	State WV	Zip Code 26162-8415
-----------------------	-------------	------------------------

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

Name of Employer (for Individual) AXIAL CORP	Occupation (for Individual) RETIRED
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
249.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		11		2017

**Transaction ID : 76745497**

Amount of Each Receipt this Period  
25.00

Memo Item

**B. FAUGHN, MARK, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 58023

City FAIRBANKS	State AK	Zip Code 99711-0023
-------------------	-------------	------------------------

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

Name of Employer (for Individual) Bureau of Land Management	Occupation (for Individual) Forester/GIS Specialist
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
310.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2017

**Transaction ID : 76745507**

Amount of Each Receipt this Period  
55.00

Memo Item

**C. TURK, LAWRENCE V, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 37 PINEDALE AVE

City FARMINGVILLE	State NY	Zip Code 11738-2625
----------------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
375.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		04		2017

**Transaction ID : 76745513**

Amount of Each Receipt this Period  
100.00

Memo Item

<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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 485
	<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. BROWN, FOSTER E, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 902 ARLINGTON CTR # 121

City ADA	State OK	Zip Code 74820-2883
-------------	-------------	------------------------

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

Name of Employer (for Individual) Main Street Appliance Etc	Occupation (for Individual) Owner
--	--------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
222.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		04		2017

**Transaction ID : 76745524**

Amount of Each Receipt this Period  
25.00

Memo Item

**B. CHURCHILL, GREGORY, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 467 RYALL ST

City MARSEILLES	State IL	Zip Code 61341-1427
--------------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
650.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		03		2017

**Transaction ID : 76745529**

Amount of Each Receipt this Period  
50.00

Memo Item

**C. SWENSON, ERNEST P, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1106 KASMIR AVE

City CORNWELLS HEIGHTS	State PA	Zip Code 19020-4539
---------------------------	-------------	------------------------

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

Name of Employer (for Individual) LAVELL AIRCRAFT CO	Occupation (for Individual) INDUST ELECTRICIAN
---	---

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
758.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		02		2017

**Transaction ID : 76745539**

Amount of Each Receipt this Period  
55.00

Memo Item

<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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 485
	<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. PARKER, GEORGE, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 39266 JOHN WILD RD

City PONCHATOULA	State LA	Zip Code 70454-6864
---------------------	-------------	------------------------

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

Name of Employer (for Individual) INSURANCE ADJUSTER	Occupation (for Individual) SELF EMPLOYED
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
425.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		03		2017

**Transaction ID : 76745548**

Amount of Each Receipt this Period  
50.00

Memo Item

**B. MCCRABB, STEVE, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1552 180TH AVE

City MANCHESTER	State IA	Zip Code 52057-8851
--------------------	-------------	------------------------

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

Name of Employer (for Individual)	Occupation (for Individual)
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Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
206.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		03		2017

**Transaction ID : 76745549**

Amount of Each Receipt this Period  
25.00

Memo Item

**C. KERR, LEONARD E, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 171

City GANSEVOORT	State NY	Zip Code 12831-0171
--------------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
286.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		10		2017

**Transaction ID : 76745552**

Amount of Each Receipt this Period  
37.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	112.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 485
	<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. BURNHAM, STEVE, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 632 SONYA DR

City BOONVILLE	State MO	Zip Code 65233-1862
-------------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
550.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		03		2017

**Transaction ID : 76745573**

Amount of Each Receipt this Period  
50.00

Memo Item

**B. BROWN, MARION C, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 504 CRESTWOOD ST

City SPRINGDALE	State AR	Zip Code 72762-5055
--------------------	-------------	------------------------

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

Name of Employer (for Individual) TRUCKS & PARTS, INC.	Occupation (for Individual) SALES / OWNER
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
600.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		02		2017

**Transaction ID : 76745577**

Amount of Each Receipt this Period  
100.00

Memo Item

**C. DANGELO, JOHN, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 19 THOMPSON AVE

City CROTON ON HUDSON	State NY	Zip Code 10520-2726
--------------------------	-------------	------------------------

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

Name of Employer (for Individual) AT&T	Occupation (for Individual) Retired
---	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		03		2017

**Transaction ID : 76745582**

Amount of Each Receipt this Period  
150.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	300.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 485
	<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. FRY, LEONARD, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 640796

City EL PASO	State TX	Zip Code 79904-0796
-----------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		06		2017

**Transaction ID : 76745592**

Amount of Each Receipt this Period  
100.00

Memo Item

**B. MUNSON, RICHARD S, , MR, JR**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 206 QUANOPAUG TRL

City WOODBURY	State CT	Zip Code 06798-2100
------------------	-------------	------------------------

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

Name of Employer (for Individual) SEVILLE MATERIAL TRANSFER	Occupation (for Individual) TRUCK MECHANIC
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
270.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		06		2017

**Transaction ID : 76745593**

Amount of Each Receipt this Period  
30.00

Memo Item

**C. HUNEKE, TIM, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 304 CHESTER AVE

City BELLECHESTER	State MN	Zip Code 55027-8900
----------------------	-------------	------------------------

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

Name of Employer (for Individual) BOR-SON CONST	Occupation (for Individual) BRICK TENDER
--	---

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
372.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		03		2017

**Transaction ID : 76745598**

Amount of Each Receipt this Period  
25.00

Memo Item

<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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 485
	<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. LISSY, GARY E, , MR, JR**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2165 S CARBON HILL RD

City BRACEVILLE	State IL	Zip Code 60407-9022
--------------------	-------------	------------------------

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

Name of Employer (for Individual) CABOT MICRO ELECTRONICS	Occupation (for Individual) MAINTENANCE MECHANIC
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
273.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		16		2017

**Transaction ID : 76745614**

Amount of Each Receipt this Period  
25.00

Memo Item

**B. CARSON, EDWARD, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 580 W ROY RD APT 1

City WASILLA	State AK	Zip Code 99654-3258
-----------------	-------------	------------------------

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

Name of Employer (for Individual) CH2MHILL	Occupation (for Individual) QUALITY MANAGER
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
255.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2017

**Transaction ID : 76745626**

Amount of Each Receipt this Period  
55.00

Memo Item

**C. SCHAEFER, EVAN L, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11994 E COUNTY ROAD 1615 N

City SAINT MEINRAD	State IN	Zip Code 47577-9650
-----------------------	-------------	------------------------

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

Name of Employer (for Individual) AUTOMATED ROUTING INC	Occupation (for Individual) MANAGEMENT
--	---

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		20		2017

**Transaction ID : 76745631**

Amount of Each Receipt this Period  
100.00

Memo Item

<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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 485
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<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. SCHWOCHOW, GARY, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 537 N COUNTY ROAD 220

City FREMONT	State OH	Zip Code 43420-9216
-----------------	-------------	------------------------

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

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) FARM
--	-------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
238.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 23 / 2017

**Transaction ID : 76745632**

Amount of Each Receipt this Period  
55.00

Memo Item

**B. MCCARTHY, JOHN D, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 185 LINDEN AVE

City GUSTINE	State CA	Zip Code 95322-1038
-----------------	-------------	------------------------

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

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
283.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 10 / 2017

**Transaction ID : 76745679**

Amount of Each Receipt this Period  
55.00

Memo Item

**C. YOUNG, ARTHUR J, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 180 BRIGHTON RD

City COLUMBUS	State OH	Zip Code 43202-1022
------------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
350.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 23 / 2017

**Transaction ID : 76745700**

Amount of Each Receipt this Period  
150.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	260.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 40 OF 485 (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"/>	<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. MCCARTHY, PHIL, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1001 PINE BROOK DR

City PEABODY	State MA	Zip Code 01960-3771
-----------------	-------------	------------------------

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

Name of Employer (for Individual) TOWN OF READING, MA	Occupation (for Individual) WATER TREATMENT OPER.
--	--

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
206.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		23		2017

**Transaction ID : 76745712**

Amount of Each Receipt this Period  
25.00

Memo Item

**B. SHULAR, KENNETH L, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6960 DOVEFIELD LN

City MEMPHIS	State TN	Zip Code 38135-3015
-----------------	-------------	------------------------

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

Name of Employer (for Individual) AT&T	Occupation (for Individual) PROJECT MANAGER
---	--

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
347.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		11		2017

**Transaction ID : 76745722**

Amount of Each Receipt this Period  
40.00

Memo Item

**C. DOCU, THEPDORE, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 506 FORT WASHINGTON AVE APT 1G

City NEW YORK	State NY	Zip Code 10033-2081
------------------	-------------	------------------------

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

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) MEDICAL DOCTOR
--	---

Receipt For:  
 Primary     General  
 Other (specify)

Aggregate Year-to-Date ▼  
375.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		05		2017

**Transaction ID : 76745749**

Amount of Each Receipt this Period  
150.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	215.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 485
	<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. STRONG, GREGORY L, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9610 SW 36TH ST

City MIAMI	State FL	Zip Code 33165-4048
---------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
258.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		07		2017

**Transaction ID : 76745762**

Amount of Each Receipt this Period  

30.00
-------

 Memo Item

**B. BOGAL, MICHAEL, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 467 25TH ST

City NIAGARA FALLS	State NY	Zip Code 14303-1947
-----------------------	-------------	------------------------

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

Name of Employer (for Individual) Water Board of Niagara Falls, NY	Occupation (for Individual) Retired
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
289.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		02		2017

**Transaction ID : 76745796**

Amount of Each Receipt this Period  

20.00
-------

 Memo Item

**C. FRICKE, HAROLD E, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 301

City KIMBALL	State NE	Zip Code 69145-0301
-----------------	-------------	------------------------

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

Name of Employer (for Individual) MAIN STREET MARKET	Occupation (for Individual) MEAT CUTTER
---	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
476.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		16		2017

**Transaction ID : 76745816**

Amount of Each Receipt this Period  

37.00
-------

 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	87.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 OF 485
	<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. COX, GARY, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 45 VENANGO ST

City FRANKLIN	State PA	Zip Code 16323-2651
------------------	-------------	------------------------

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

Name of Employer (for Individual) JOY MINING MACHINERY	Occupation (for Individual) FINAL ASSEMBLY WELDER
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
585.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	05	/	2017

**Transaction ID : 76745818**

Amount of Each Receipt this Period  
50.00

Memo Item

**B. BURNWORTH, SAMMY L, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1100 LEWIS ST

City BROWNSVILLE	State PA	Zip Code 15417-2240
---------------------	-------------	------------------------

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

Name of Employer (for Individual) Sonrise Security & Patrol, Inc.	Occupation (for Individual) Security Guard
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
226.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	03	/	2017

**Transaction ID : 76745820**

Amount of Each Receipt this Period  
25.00

Memo Item

**C. HELLWIG, JAMES, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2357 E BRIGANTINE DR

City EAGLE	State ID	Zip Code 83616-6627
---------------	-------------	------------------------

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

Name of Employer (for Individual) US DEPT OF COMMERCE	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
520.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	06	/	2017

**Transaction ID : 76745823**

Amount of Each Receipt this Period  
40.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	115.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 OF 485
	<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. VIEHMANN, DAN, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 14063 BAYWOOD VILLAGES DR

City CHESTERFIELD	State MO	Zip Code 63017-3450
----------------------	-------------	------------------------

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

Name of Employer (for Individual) SOUTH WESTERN BELL	Occupation (for Individual) FOREMAN
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	23	/	2017

**Transaction ID : 76745829**

Amount of Each Receipt this Period  
40.00

Memo Item

**B. COTHRAN, ROY O, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5600 SLATER CIR

City MOSS POINT	State MS	Zip Code 39562-7859
--------------------	-------------	------------------------

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

Name of Employer (for Individual) Retired	Occupation (for Individual) Retired
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
225.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	11	/	2017

**Transaction ID : 76745830**

Amount of Each Receipt this Period  
25.00

Memo Item

**C. LUETH, ARNOLD, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 692 WALES RIDGE RD # R

City WALES	State MI	Zip Code 48027-3404
---------------	-------------	------------------------

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

Name of Employer (for Individual) Ford Motor Company	Occupation (for Individual) Retired - Engineer
---	---

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
274.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	06	/	2017

**Transaction ID : 76745832**

Amount of Each Receipt this Period  
25.00

Memo Item

<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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 OF 485
	<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. GRAY, BRUCE A, A, MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 40 MEDITERRANEAN DR APT 34

City WEYMOUTH	State MA	Zip Code 02188-3812
------------------	-------------	------------------------

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

Name of Employer (for Individual) A O WILSON STRUCTURAL	Occupation (for Individual) WELDER
--	---------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
260.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		11		2017

**Transaction ID : 76745838**

Amount of Each Receipt this Period  
30.00

Memo Item

**B. ZWIERKO, RICHARD C, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1306 MISTYVALE ST

City HERNDON	State VA	Zip Code 20170-3629
-----------------	-------------	------------------------

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

Name of Employer (for Individual) U.S. GOVERNMENT	Occupation (for Individual) PROG/PROJ MANAGER
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
225.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		23		2017

**Transaction ID : 76745850**

Amount of Each Receipt this Period  
100.00

Memo Item

**C. KEY, WILLIAM S, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 151 HOLLIS ST

City PEPPERELL	State MA	Zip Code 01463-1435
-------------------	-------------	------------------------

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

Name of Employer (for Individual) US ARMY	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
255.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		11		2017

**Transaction ID : 76745858**

Amount of Each Receipt this Period  
100.00

Memo Item

<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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 OF 485
	<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. INTERRANTE, STANLEY, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1520 SEVILLE ST

City PLACENTIA	State CA	Zip Code 92870-3013
-------------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
201.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		18		2017

**Transaction ID : 76745859**

Amount of Each Receipt this Period  
25.00

Memo Item

**B. LUNDELL, BRYCE E, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2763 DEMING BLVD

City CHEYENNE	State WY	Zip Code 82001-5709
------------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
235.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		23		2017

**Transaction ID : 76745860**

Amount of Each Receipt this Period  
33.00

Memo Item

**C. SCHUSTER, MARVIN R, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 70 HOLLAND RD

City CATAULA	State GA	Zip Code 31804-3306
-----------------	-------------	------------------------

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

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
225.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		13		2017

**Transaction ID : 76745865**

Amount of Each Receipt this Period  
100.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	158.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 OF 485
	<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. GNADT, FREDRIC C., MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4150 CRESTFIELD AVE  
 City HOLIDAY State FL Zip Code 34691-1601  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PASCO COUNTY SHERIFFS OFFICE Occupation (for Individual) CORRECTIONS OFFICER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 254.00

Date of Receipt 10 / 06 / 2017  
**Transaction ID : 76745870**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**B. VAUGHAN, CRAIG S., MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2336 FAIRPLAY WAY  
 City AURORA State CO Zip Code 80011-2981  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 251.00

Date of Receipt 10 / 06 / 2017  
**Transaction ID : 76745881**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**C. STOLL, PETER D., MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6 BARBARA RD  
 City ELLENVILLE State NY Zip Code 12428-5306  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 06 / 2017  
**Transaction ID : 76745895**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

<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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 OF 485
	<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. GAY, JAMES C., MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7924 TELEGRAPH RD

City SEVERN	State MD	Zip Code 21144-1858
----------------	-------------	------------------------

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

Name of Employer (for Individual) MD HOUSE OF CORRECTIONS	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
201.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		03		2017

**Transaction ID : 76745900**

Amount of Each Receipt this Period  
25.00

Memo Item

**B. JOHNSON, GARY S., MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 1174

City VALDESE	State NC	Zip Code 28690-1174
-----------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		01		2017

**Transaction ID : 76745914**

Amount of Each Receipt this Period  
50.00

Memo Item

**C. WINTER, DAVID, MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 705 E COOVER ST

City MECHANICSBURG	State PA	Zip Code 17055-3414
-----------------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
1175.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		02		2017

**Transaction ID : 76745926**

Amount of Each Receipt this Period  
100.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	175.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 OF 485
	<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. SANDERS, GERALD, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5106 ANTONIO AVE

City EL PASO	State TX	Zip Code 79924-5814
-----------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
238.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		06		2017

**Transaction ID : 76745964**

Amount of Each Receipt this Period  
37.00

Memo Item

**B. DOUGHERTY, JOSEPH P, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2627 JOHNSON RD

City UPPER CHICHESTER	State PA	Zip Code 19061-3524
--------------------------	-------------	------------------------

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

Name of Employer (for Individual) FEDERAL BUREAU OF INVESTIGATIO	Occupation (for Individual) SUPPLY TECHNICIAN
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
321.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		23		2017

**Transaction ID : 76745965**

Amount of Each Receipt this Period  
25.00

Memo Item

**C. BIEHLE, MELVIN, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2640 W COUNTY ROAD 300 N

City NORTH VERNON	State IN	Zip Code 47265-7302
----------------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
216.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		06		2017

**Transaction ID : 76745995**

Amount of Each Receipt this Period  
50.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	112.00
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 OF 485
	<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. BIGELOW, LOWELL A, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 624 DENISE DR

City WOODLAND	State CA	Zip Code 95776-4219
------------------	-------------	------------------------

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

Name of Employer (for Individual) DAVIS GOLF COURSE	Occupation (for Individual) LABOR
--	--------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
299.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	10	/	2017

**Transaction ID : 76745996**

Amount of Each Receipt this Period  
40.00

Memo Item

**B. PARSONS, EUGENE, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1535 SALOMON LN

City CHESTERBROOK	State PA	Zip Code 19087-1103
----------------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
334.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	06	/	2017

**Transaction ID : 76746060**

Amount of Each Receipt this Period  
37.00

Memo Item

**C. FIEDLER, CARL, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 101 CHERRY RD

City IDABEL	State OK	Zip Code 74745-7623
----------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
600.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	02	/	2017

**Transaction ID : 76746095**

Amount of Each Receipt this Period  
200.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	277.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 OF 485
	<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**

**A. WILSON, LEROY, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1108 STONEBRIDGE BLVD

City NEW CASTLE	State DE	Zip Code 19720-6721
--------------------	-------------	------------------------

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

Name of Employer (for Individual) US Postal Service	Occupation (for Individual) Mail Processing Equipt Mechanic
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
296.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		05		2017

**Transaction ID : 76746118**

Amount of Each Receipt this Period  
25.00

Memo Item

**B. BRYANT, JAMES R, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 333 FOWLER RD

City BEECH BLUFF	State TN	Zip Code 38313-9368
---------------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
241.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		10		2017

**Transaction ID : 76746126**

Amount of Each Receipt this Period  
25.00

Memo Item

**C. PIERCE, DARRIN, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 118 PINE ST

City VACAVILLE	State CA	Zip Code 95688-6914
-------------------	-------------	------------------------

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

Name of Employer (for Individual) SOUTHWEST AIRLINES	Occupation (for Individual) AIRCRAFT MECHANIC
---	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
375.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		12		2017

**Transaction ID : 76746129**

Amount of Each Receipt this Period  
100.00

Memo Item

<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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 OF 485
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<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. THIELE, FREDERICK H, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6 DALEWOOD LN  
 City KINGS PARK State NY Zip Code 11754-2813  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt 10 / 12 / 2017  
**Transaction ID : 76746138**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**B. GRIFFITH, TIM, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 12102 HAYDEN LAKE RD W  
 City CHAMPLIN State MN Zip Code 55316-1702  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) ANOKA CARE CENTER Occupation (for Individual) BUILDING MAINTENANCE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 310.00

Date of Receipt 10 / 03 / 2017  
**Transaction ID : 76746142**  
 Amount of Each Receipt this Period 55.00  
 Memo Item

**C. MYRICK, BRUCE M, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 52453 RED HILL RD  
 City INDEPENDENCE State LA Zip Code 70443-2415  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 272.00

Date of Receipt 10 / 10 / 2017  
**Transaction ID : 76746143**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	105.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 OF 485
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<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. WANDZEL, DENNIS J, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4788 ELMWOOD RD  
 City AKRON State MI Zip Code 48701-9731  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 202.00

Date of Receipt 10 / 30 / 2017  
**Transaction ID : 76746173**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**B. FERGUSON, DOUGLAS, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 10601 W HARMONY LN  
 City PEORIA State AZ Zip Code 85382-2571  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 418.00

Date of Receipt 10 / 10 / 2017  
**Transaction ID : 76746174**  
 Amount of Each Receipt this Period 55.00  
 Memo Item

**C. TEAGUE, HARMON, , MR, JR**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1241 FRASIER ST  
 City HAYNESVILLE State LA Zip Code 71038-4922  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 410.00

Date of Receipt 10 / 06 / 2017  
**Transaction ID : 76746193**  
 Amount of Each Receipt this Period 55.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	135.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 53 OF 485 (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. NICHOLS, STEPHEN W, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3551 CASEBERE MILLER RD

City EDGERTON	State OH	Zip Code 43517-9511
------------------	-------------	------------------------

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

Name of Employer (for Individual) Retired	Occupation (for Individual) Retired
--	--

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		07		2017

**Transaction ID : 76746199**

Amount of Each Receipt this Period  
300.00

Memo Item

**B. HARTMAN, TED, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 155

City LOMA	State CO	Zip Code 81524-0155
--------------	-------------	------------------------

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

Name of Employer (for Individual) DISABLED	Occupation (for Individual) DISABLED
---	---

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
235.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		04		2017

**Transaction ID : 76746202**

Amount of Each Receipt this Period  
25.00

Memo Item

**C. MAY, PAT, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 274

City CURLEW	State WA	Zip Code 99118-0274
----------------	-------------	------------------------

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

Name of Employer (for Individual)	Occupation (for Individual) DISABLED
-----------------------------------	---

Receipt For:  
 Primary     General  
 Other (specify)

Aggregate Year-to-Date ▼  
212.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		24		2017

**Transaction ID : 76746205**

Amount of Each Receipt this Period  
37.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	362.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 OF 485
	<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. THORNE, PAUL H, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 30683 BIG HORN CT

City CHARLOTTE HALL	State MD	Zip Code 20622-3102
------------------------	-------------	------------------------

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

Name of Employer (for Individual) PG County Fire Dept	Occupation (for Individual) Retired - Paramedic
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
223.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		05		2017

**Transaction ID : 76746206**

Amount of Each Receipt this Period  
25.00

Memo Item

**B. WELLS, CHALMER D, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2075 E 600 S

City WOLCOTTVILLE	State IN	Zip Code 46795-9016
----------------------	-------------	------------------------

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

Name of Employer (for Individual) GENERAL MOTORS CORP	Occupation (for Individual) MILLWRIGHT
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
322.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		04		2017

**Transaction ID : 76746236**

Amount of Each Receipt this Period  
25.00

Memo Item

**C. JACOBS, DELL, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 73

City WORTHING	State SD	Zip Code 57077-0073
------------------	-------------	------------------------

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

Name of Employer (for Individual) JOHNSON OIL CO	Occupation (for Individual) LABOR
---	--------------------------------------

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
305.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		10		2017

**Transaction ID : 76746237**

Amount of Each Receipt this Period  
20.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	70.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 55 OF 485  
(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. HAUSER, ALFRED W, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 30171 KING WILLIAM RD  
 City WEST POINT State VA Zip Code 23181-3211  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 331.00

Date of Receipt 10 / 02 / 2017  
**Transaction ID : 76746242**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**B. OLSON, CARL A, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2749 HAPPY VALLEY RD  
 City SEQUIM State WA Zip Code 98382-7733  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PACIFIC MARITIME ASSOCIATION Occupation (for Individual) LONGSHOREMAN  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt 10 / 12 / 2017  
**Transaction ID : 76746244**  
 Amount of Each Receipt this Period 75.00  
 Memo Item

**C. EDDY, ROGER L, , MR, JR**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4040 E BLOOD RD  
 City COWLESVILLE State NY Zip Code 14037-9633  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) ROSWELL PARK CANCER INSTITUTE Occupation (for Individual) RESEARCH SCIENTIST  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 10 / 06 / 2017  
**Transaction ID : 76746246**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 56 OF 485
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

**A. FOLEY, JAMES W, , MR, JR**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 75 PAON BLVD

City WAKEFIELD	State MA	Zip Code 01880-1137
-------------------	-------------	------------------------

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

Name of Employer (for Individual) Foley Transportation	Occupation (for Individual) Limo Driver
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
550.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 16 / 2017  
**Transaction ID : 76746258**

Amount of Each Receipt this Period  
50.00

Memo Item

**B. COOPER, FREDDIE, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO BOX 241

City GRANBY	State MO	Zip Code 64844-0241
----------------	-------------	------------------------

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

Name of Employer (for Individual) US ARMY	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
287.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 10 / 2017  
**Transaction ID : 76746267**

Amount of Each Receipt this Period  
25.00

Memo Item

**C. FUNK, CURT M, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 425 UPLAND WAY

City GREEN RIVER	State WY	Zip Code 82935-6063
---------------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
311.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 10 / 2017  
**Transaction ID : 76746290**

Amount of Each Receipt this Period  
25.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	100.00
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 57 OF 485
	<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. CHAPLIN, GORDON, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 771258

City WICHITA	State KS	Zip Code 67277-1258
-----------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED - PIPEFITTER / WELDER
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
207.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		04		2017

**Transaction ID : 76746292**

Amount of Each Receipt this Period  
20.00

Memo Item

**B. REICH, JAMES M, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8839 WINCHESTER AVE

City PHILADELPHIA	State PA	Zip Code 19115-5104
----------------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
298.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		03		2017

**Transaction ID : 76746293**

Amount of Each Receipt this Period  
25.00

Memo Item

**C. LACEY, ROBERT J, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1222 VAN ALLEN RD

City WYOMING	State NY	Zip Code 14591-9528
-----------------	-------------	------------------------

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

Name of Employer (for Individual) LAPP INS DIV CLEVEPAK	Occupation (for Individual) LABORER
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
273.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		10		2017

**Transaction ID : 76746302**

Amount of Each Receipt this Period  
25.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	70.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 OF 485
	<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**

**A. DAVIS, DAVID L, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9730 MEADOW LN

City DENHAM SPRINGS	State LA	Zip Code 70706-0358
------------------------	-------------	------------------------

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

Name of Employer (for Individual) GLOBAL DATA SYSTEMS	Occupation (for Individual) STORAGE NETWORK CONSULT
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
461.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2017

**Transaction ID : 76746306**

Amount of Each Receipt this Period  
25.00

Memo Item

**B. DAVIS, DAVID L, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9730 MEADOW LN

City DENHAM SPRINGS	State LA	Zip Code 70706-0358
------------------------	-------------	------------------------

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

Name of Employer (for Individual) GLOBAL DATA SYSTEMS	Occupation (for Individual) STORAGE NETWORK CONSULT
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
436.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		05		2017

**Transaction ID : 76746307**

Amount of Each Receipt this Period  
37.00

Memo Item

**C. HAAS, DEAN D, , MR, JR**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 589 DOTTS ST

City PENNSBURG	State PA	Zip Code 18073-1517
-------------------	-------------	------------------------

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

Name of Employer (for Individual) COLORCON	Occupation (for Individual) SHIPPING SPECIALIST
---	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
330.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		23		2017

**Transaction ID : 76746319**

Amount of Each Receipt this Period  
50.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	112.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 59 OF 485
	<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	<input type="checkbox"/> 17

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

**A. RUKES, RICHARD A, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5620 NE WHITESIDE DR

City TOPEKA	State KS	Zip Code 66617-1642
----------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
475.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		10		2017

**Transaction ID : 76746336**

Amount of Each Receipt this Period  
150.00

Memo Item

**B. BOOKER, DAVID, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 314

City KINCAID	State IL	Zip Code 62540-0314
-----------------	-------------	------------------------

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

Name of Employer (for Individual) Retired	Occupation (for Individual) Retired
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
207.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		17		2017

**Transaction ID : 76746341**

Amount of Each Receipt this Period  
20.00

Memo Item

**C. O'NEAL, JOHN T, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9371 W COUNTY ROAD 1000 N

City STILESVILLE	State IN	Zip Code 46180-9693
---------------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
401.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		16		2017

**Transaction ID : 76746342**

Amount of Each Receipt this Period  
25.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	195.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 60 OF 485
	<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	<input type="checkbox"/> 17

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

**A. RENTFRO, RICK, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10040 SW HEDGES CT

City TUALATIN	State OR	Zip Code 97062-8914
------------------	-------------	------------------------

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

Name of Employer (for Individual) HOWARD C CORP	Occupation (for Individual) SALES MGR
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
314.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		30		2017

**Transaction ID : 76746354**

Amount of Each Receipt this Period  
50.00

Memo Item

**B. BIEMECK, JOHN, , COL,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1212 MONROE BAY AVE

City COLONIAL BEACH	State VA	Zip Code 22443-2920
------------------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
205.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		17		2017

**Transaction ID : 76746368**

Amount of Each Receipt this Period  
50.00

Memo Item

**C. HUBER, OSCAR L, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 5074

City EUREKA	State CA	Zip Code 95502-5074
----------------	-------------	------------------------

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

Name of Employer (for Individual) STATE OF CALIF	Occupation (for Individual) GEOLOGIST
---	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
950.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		06		2017

**Transaction ID : 76746369**

Amount of Each Receipt this Period  
300.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	400.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 61 OF 485
	<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. ESPE, STEPHEN A, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5054 TRENARY WAY

City SAN JOSE	State CA	Zip Code 95118-2626
------------------	-------------	------------------------

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

Name of Employer (for Individual) CALIFORNIA FIRE	Occupation (for Individual) RETIRED-PUBLIC SAFETY OFFICER
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
235.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		12		2017

**Transaction ID : 76746372**

Amount of Each Receipt this Period  
10.00

Memo Item

**B. ESPE, STEPHEN A, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5054 TRENARY WAY

City SAN JOSE	State CA	Zip Code 95118-2626
------------------	-------------	------------------------

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

Name of Employer (for Individual) CALIFORNIA FIRE	Occupation (for Individual) RETIRED-PUBLIC SAFETY OFFICER
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
260.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		23		2017

**Transaction ID : 76746373**

Amount of Each Receipt this Period  
25.00

Memo Item

**C. VEACH, JAMES H, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 385

City RANDSBURG	State CA	Zip Code 93554-0385
-------------------	-------------	------------------------

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

Name of Employer (for Individual) White House Saloon	Occupation (for Individual) Owner
---	--------------------------------------

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
297.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		11		2017

**Transaction ID : 76746408**

Amount of Each Receipt this Period  
25.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	60.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 62 OF 485
	<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	<input type="checkbox"/> 17

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

**A. MARKLAND, MIKE, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3912 WEDGE CT

City LONGMONT	State CO	Zip Code 80503-8304
------------------	-------------	------------------------

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

Name of Employer (for Individual) UNEMPLOYED	Occupation (for Individual)
---	-----------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
242.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		24		2017

**Transaction ID : 76746428**

Amount of Each Receipt this Period  
20.00

Memo Item

**B. JAMES, ROBERT M, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 31588 CHICAGO TRL

City NEW CARLISLE	State IN	Zip Code 46552-9639
----------------------	-------------	------------------------

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

Name of Employer (for Individual) WHIRLPOOL	Occupation (for Individual) FACTORY
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
228.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		17		2017

**Transaction ID : 76746445**

Amount of Each Receipt this Period  
25.00

Memo Item

**C. SEIDLER, JAMES L, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11730 SW CRESTWOOD CIR

City PORT SAINT LUCIE	State FL	Zip Code 34987-2725
--------------------------	-------------	------------------------

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

Name of Employer (for Individual) THE CONTINENTAL GROUP LTD	Occupation (for Individual) PROPERTY MANAGER
--	---

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
241.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		04		2017

**Transaction ID : 76746464**

Amount of Each Receipt this Period  
24.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	69.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 63 OF 485
	<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. SEIDLER, JAMES L, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11730 SW CRESTWOOD CIR

City PORT SAINT LUCIE	State FL	Zip Code 34987-2725
--------------------------	-------------	------------------------

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

Name of Employer (for Individual) THE CONTINENTAL GROUP LTD	Occupation (for Individual) PROPERTY MANAGER
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
266.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		04		2017

**Transaction ID : 76746465**

Amount of Each Receipt this Period  
25.00

Memo Item

**B. ENNIS, JAMES, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10332 BOGARDUS AVE

City WHITTIER	State CA	Zip Code 90603-2641
------------------	-------------	------------------------

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

Name of Employer (for Individual) Retired	Occupation (for Individual) Retired
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
376.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		10		2017

**Transaction ID : 76746467**

Amount of Each Receipt this Period  
37.00

Memo Item

**C. CLARK, JAMES E, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1315 S SHERIDAN AVE

City INDIANAPOLIS	State IN	Zip Code 46203-2654
----------------------	-------------	------------------------

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

Name of Employer (for Individual) Ford Motor Company	Occupation (for Individual) Retired
---	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
213.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		06		2017

**Transaction ID : 76746484**

Amount of Each Receipt this Period  
37.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	99.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 64 OF 485
	(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"/> 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. FREEMAN, RAND, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10813 OLD SANTA SUSANA PASS RD

City CHATSWORTH	State CA	Zip Code 91311-1204
--------------------	-------------	------------------------

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

Name of Employer (for Individual)	Occupation (for Individual) CONSUTLANT - Zoning & Planning
-----------------------------------	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
330.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		06		2017

**Transaction ID : 76746487**

Amount of Each Receipt this Period  
100.00

Memo Item

**B. YOUNGQUIST, VERNON, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5298 ALAMO DR

City ABILENE	State TX	Zip Code 79605-4508
-----------------	-------------	------------------------

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

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
215.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		13		2017

**Transaction ID : 76746496**

Amount of Each Receipt this Period  
25.00

Memo Item

**C. HALLOCK, JAMES C, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 337 SHADOW HILL DR

City ELGIN	State IL	Zip Code 60124-3815
---------------	-------------	------------------------

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

Name of Employer (for Individual) STATE OF ILLINOIS	Occupation (for Individual) JUDGE
--	--------------------------------------

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
204.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		02		2017

**Transaction ID : 76746503**

Amount of Each Receipt this Period  
24.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	149.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 65 OF 485
	<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. HALLOCK, JAMES C, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 337 SHADOW HILL DR

City ELGIN	State IL	Zip Code 60124-3815
---------------	-------------	------------------------

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

Name of Employer (for Individual) STATE OF ILLINOIS	Occupation (for Individual) JUDGE
--	--------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
304.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		10		2017

**Transaction ID : 76746504**

Amount of Each Receipt this Period  
100.00

Memo Item

**B. STOUGHTON, PHILIP A, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4181 N FARM ROAD 35

City ASH GROVE	State MO	Zip Code 65604-8212
-------------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2017

**Transaction ID : 76746510**

Amount of Each Receipt this Period  
100.00

Memo Item

**C. MOORE, BEN, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 23061 N 104TH AVE

City PEORIA	State AZ	Zip Code 85383-2765
----------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		04		2017

**Transaction ID : 76746515**

Amount of Each Receipt this Period  
100.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	300.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 66 OF 485
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

**A. GLASER, BILL, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2639 CEDAR AVE  
 City SAINT PAUL State MN Zip Code 55110-4563  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) ADVANCE CIRCUITS Occupation (for Individual) FACTORY WORKER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 390.00

Date of Receipt 10 / 12 / 2017  
**Transaction ID : 76746525**  
 Amount of Each Receipt this Period 40.00  
 Memo Item

**B. GLASER, BILL, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2639 CEDAR AVE  
 City SAINT PAUL State MN Zip Code 55110-4563  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) ADVANCE CIRCUITS Occupation (for Individual) FACTORY WORKER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 10 / 11 / 2017  
**Transaction ID : 76746526**  
 Amount of Each Receipt this Period 35.00  
 Memo Item

**C. HAGANS, EUGENE B, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 323 3RD ST  
 City FORT LUPTON State CO Zip Code 80621-1909  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) DAIRY FARMER  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 208.00

Date of Receipt 10 / 23 / 2017  
**Transaction ID : 76746531**  
 Amount of Each Receipt this Period 55.00  
 Memo Item

<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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 67 OF 485
	<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**

**A. LODGE, JAMES H, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 12 SILVER AVE  
 City HOOKSETT State NH Zip Code 03106-1189  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 296.00

Date of Receipt 10 / 10 / 2017  
**Transaction ID : 76746538**  
 Amount of Each Receipt this Period 37.00  
 Memo Item

**B. BERGERON, ROBERT A, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 460 HILLSDALE DR  
 City SANTA ROSA State CA Zip Code 95409-6109  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 23 / 2017  
**Transaction ID : 76746540**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**C. PIKE, LARRY T, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2823 ELK ST  
 City LAFAYETTE State IN Zip Code 47904-1611  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) TIPPECANOE SCHOOL CORP. Occupation (for Individual) CUSTODIAN  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 818.00

Date of Receipt 10 / 04 / 2017  
**Transaction ID : 76746545**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	237.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 68 OF 485
	<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. MOORE, MICHAEL R, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1161 VICTOR DR

City MEMPHIS	State TN	Zip Code 38122-1538
-----------------	-------------	------------------------

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

Name of Employer (for Individual) Kellogg Company	Occupation (for Individual) Maintenance Supervisor
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
201.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		23		2017

**Transaction ID : 76746557**

Amount of Each Receipt this Period  
25.00

Memo Item

**B. DOLAN, KENNETH, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 900 LAKE ST

City BARABOO	State WI	Zip Code 53913-3036
-----------------	-------------	------------------------

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

Name of Employer (for Individual) TRANE COMPANY	Occupation (for Individual) RETIRED - LAB TECH
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		06		2017

**Transaction ID : 76746561**

Amount of Each Receipt this Period  
25.00

Memo Item

**C. LIVENGOOD, STEVE, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 59 BASLER DR

City ELIZABETHTOWN	State PA	Zip Code 17022-8918
-----------------------	-------------	------------------------

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

Name of Employer (for Individual) CARE CAPITAL MANAGEMENT	Occupation (for Individual) PHARMACIST
--	---

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
247.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		20		2017

**Transaction ID : 76746563**

Amount of Each Receipt this Period  
37.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	87.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 69 OF 485
	<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. TREMBLAY, LEO, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2583 CENTRE ST

City BOSTON	State MA	Zip Code 02132-6221
----------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
286.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		10		2017

**Transaction ID : 76746571**

Amount of Each Receipt this Period  
30.00

Memo Item

**B. CARLSON, THOMAS L, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4549 HIGHWAY 21

City EMBARRASS	State MN	Zip Code 55732-8026
-------------------	-------------	------------------------

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

Name of Employer (for Individual) USX Corp.	Occupation (for Individual) Retired - Steel Worker
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
260.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		10		2017

**Transaction ID : 76746572**

Amount of Each Receipt this Period  
50.00

Memo Item

**C. LUCKETT, DEAN K, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1950 LESLIE DR APT H

City KERRVILLE	State TX	Zip Code 78028-2529
-------------------	-------------	------------------------

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

Name of Employer (for Individual) Retired	Occupation (for Individual) Retired
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
251.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		04		2017

**Transaction ID : 76746584**

Amount of Each Receipt this Period  
25.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	105.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 70 OF 485
	<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. WALKER, GORDON C, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1410 SANDERS RD

City WINDSOR	State CA	Zip Code 95492-9774
-----------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
225.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		16		2017

**Transaction ID : 76746585**

Amount of Each Receipt this Period  
25.00

Memo Item

**B. LONGMOOR, RON, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 713 S POMEROY

City MESA	State AZ	Zip Code 85210-2537
--------------	-------------	------------------------

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

Name of Employer (for Individual) MOTOROLA COMPUTER GROUP	Occupation (for Individual) EMC TEST ENGINEER
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
450.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		23		2017

**Transaction ID : 76746588**

Amount of Each Receipt this Period  
50.00

Memo Item

**C. MILLER, JAMES F, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 61 HILLSIDE AVE

City PLYMOUTH	State CT	Zip Code 06782-2305
------------------	-------------	------------------------

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

Name of Employer (for Individual) ATLANTIC STEEL & PROCESSING	Occupation (for Individual) MAINTENANCE SUPERVISOR
--	---

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
286.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		16		2017

**Transaction ID : 76746613**

Amount of Each Receipt this Period  
25.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	100.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 71 OF 485
	<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. DOMINE, ROBERT E, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 70

City LOYAL	State WI	Zip Code 54446-0070
---------------	-------------	------------------------

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

Name of Employer (for Individual) EDGERTON CONTRACTORS	Occupation (for Individual) CONSTRUCTION WORKER
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
10		16		2017

**Transaction ID : 76746649**

Amount of Each Receipt this Period  
1000.00

Memo Item

**B. JAIME, HENRY R, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1011 N JEFFERSON ST APT 1

City JUNCTION CITY	State KS	Zip Code 66441-2475
-----------------------	-------------	------------------------

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

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
223.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
10		03		2017

**Transaction ID : 76746651**

Amount of Each Receipt this Period  
37.00

Memo Item

**C. NEMEC, GREGORY W, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 90 CHRIS JOE RD

City OAKLAND	State TN	Zip Code 38060-4281
-----------------	-------------	------------------------

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

Name of Employer (for Individual) FEDEX SERVICES	Occupation (for Individual) ENGINEER
---	---

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
224.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
10		16		2017

**Transaction ID : 76746657**

Amount of Each Receipt this Period  
25.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1062.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 72 OF 485
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

**A. FARMER, BEN F, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 141 KENZIE DR  
 City MADISON State MS Zip Code 39110-7081  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) LUCENT TECHNOLOGIES Occupation (for Individual) RETIRED - COMMUNICATIONS SUPE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 262.00

Date of Receipt 10 / 17 / 2017  
**Transaction ID : 76746672**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**B. LEAMAN, WILLIAM M, , MR, SR**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 18308 METZ DR  
 City GERMANTOWN State MD Zip Code 20874-2410  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt 10 / 02 / 2017  
**Transaction ID : 76746673**  
 Amount of Each Receipt this Period 15.00  
 Memo Item

**C. BROWN, PATRICK P, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2533 STATE HIGHWAY 508  
 City ONALASKA State WA Zip Code 98570-9645  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 10 / 16 / 2017  
**Transaction ID : 76746679**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

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



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 73 OF 485
	<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. DENTON, HOWARD E, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 26100 NEWPORT RD STE A12 PMB 1

City MENIFEE	State CA	Zip Code 92584-9072
-----------------	-------------	------------------------

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

Name of Employer (for Individual) AT&T	Occupation (for Individual) MANAGER
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
285.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		12		2017

**Transaction ID : 76746699**

Amount of Each Receipt this Period  
55.00

Memo Item

**B. DENTON, HOWARD E, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 26100 NEWPORT RD STE A12 PMB 1

City MENIFEE	State CA	Zip Code 92584-9072
-----------------	-------------	------------------------

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

Name of Employer (for Individual) AT&T	Occupation (for Individual) MANAGER
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
340.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		21		2017

**Transaction ID : 76746700**

Amount of Each Receipt this Period  
55.00

Memo Item

**C. KELLER, MARVIN, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8311 WINSFORD AVE

City LOS ANGELES	State CA	Zip Code 90045-4403
---------------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
320.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		30		2017

**Transaction ID : 76746712**

Amount of Each Receipt this Period  
50.00

Memo Item

<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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 74 OF 485
	<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. KELLER, MARVIN, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8311 WINSFORD AVE

City LOS ANGELES	State CA	Zip Code 90045-4403
---------------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
270.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		04		2017

**Transaction ID : 76746713**

Amount of Each Receipt this Period  
50.00

Memo Item

**B. WAGNER, JOHN K, K, MR, JR**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1421 OHIO AVE

City WHITE OAK	State PA	Zip Code 15131-1611
-------------------	-------------	------------------------

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

Name of Employer (for Individual) WEANNETTE DISTRICT MEMORIAL HO	Occupation (for Individual) NURSE
---	--------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2017

**Transaction ID : 76746721**

Amount of Each Receipt this Period  
50.00

Memo Item

**C. BURKE, JOHN F, F, MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 400 DUNSTABLE RD APT 24

City TYNGSBORO	State MA	Zip Code 01879-1923
-------------------	-------------	------------------------

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

Name of Employer (for Individual) US Airforce	Occupation (for Individual) Retired
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
262.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		16		2017

**Transaction ID : 76746727**

Amount of Each Receipt this Period  
50.00

Memo Item

<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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 75 OF 485
	<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. HAWKINS, RON, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 440 STASAL AVE

City JACKSON	State CA	Zip Code 95642-2120
-----------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
211.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	12	/	2017

**Transaction ID : 76746730**

Amount of Each Receipt this Period  
40.00

Memo Item

**B. SWENSEN, JOHN M, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 19301 ALTA VISTA AVE

City TEHACHAPI	State CA	Zip Code 93561-8637
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) County of Los Angeles	Occupation (for Individual) Retired
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
274.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	06	/	2017

**Transaction ID : 76746731**

Amount of Each Receipt this Period  
25.00

Memo Item

**C. LORENZ, JERALD H, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 515 EARLE LN

City REDONDO BEACH	State CA	Zip Code 90278-5004
-----------------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
247.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	16	/	2017

**Transaction ID : 76746732**

Amount of Each Receipt this Period  
37.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	102.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 76 OF 485
	<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	<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. MULVANEY, JOHNNIE M, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 84

City LAKE ISABELLA	State CA	Zip Code 93240-0084
-----------------------	-------------	------------------------

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

Name of Employer (for Individual) U.S. MILITARY	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
725.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	23	/	2017

**Transaction ID : 76746746**

Amount of Each Receipt this Period  
100.00

Memo Item

**B. BILLINGER, STEVE, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 4158

City CASPER	State WY	Zip Code 82604-0158
----------------	-------------	------------------------

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

Name of Employer (for Individual) TIMBERLINE SERVICE & REPAIR	Occupation (for Individual) MANAGER
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	20	/	2017

**Transaction ID : 76746749**

Amount of Each Receipt this Period  
500.00

Memo Item

**C. HOOVER, THOMAS L, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 1251

City CONGRESS	State AZ	Zip Code 85332-1251
------------------	-------------	------------------------

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

Name of Employer (for Individual) LA UNIFIED SCHOOL DIST	Occupation (for Individual) RETIRED - TEACHER
---	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
214.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	16	/	2017

**Transaction ID : 76746789**

Amount of Each Receipt this Period  
25.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	625.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 77 OF 485
	<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. MOODY, DUANE M, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 39727 HOOK ST

City PALMDALE	State CA	Zip Code 93551-2944
------------------	-------------	------------------------

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

Name of Employer (for Individual)	Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
265.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		04		2017

**Transaction ID : 76746803**

Amount of Each Receipt this Period  
100.00

Memo Item

**B. HARDT, RONALD D, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1524 8TH AVE S

City CLINTON	State IA	Zip Code 52732-5327
-----------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		06		2017

**Transaction ID : 76746815**

Amount of Each Receipt this Period  
200.00

Memo Item

**C. COOK, HAROLD, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9159 E BELLEVUE ST

City TUCSON	State AZ	Zip Code 85715-5704
----------------	-------------	------------------------

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

Name of Employer (for Individual)	Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2017

**Transaction ID : 76746817**

Amount of Each Receipt this Period  
100.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	400.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 78 OF 485
	<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. COOK, HAROLD, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9159 E BELLEVUE ST

City TUCSON	State AZ	Zip Code 85715-5704
----------------	-------------	------------------------

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

Name of Employer (for Individual)	Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		10		2017

**Transaction ID : 76746818**

Amount of Each Receipt this Period  
100.00

Memo Item

**B. POTTER, DOUGLAS, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 525 W 102ND ST

City BLOOMINGTON	State MN	Zip Code 55420-5259
---------------------	-------------	------------------------

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

Name of Employer (for Individual) TIE COMMERCE	Occupation (for Individual) CONSULTANT
---	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
325.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		23		2017

**Transaction ID : 76746824**

Amount of Each Receipt this Period  
100.00

Memo Item

**C. NEVLAND, ERIK L, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 31765 VIA CAMPANARIO

City TEMECULA	State CA	Zip Code 92592-1500
------------------	-------------	------------------------

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

Name of Employer (for Individual) SAN DIEGO GAS & ELECT CO	Occupation (for Individual) ELECTRICIAN
---	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		23		2017

**Transaction ID : 76746840**

Amount of Each Receipt this Period  
150.00

Memo Item

<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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 79 OF 485
	<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. HILTON, BOBBY, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 104 DEWEY BROWN DR

City MARION	State NC	Zip Code 28752-8565
----------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
255.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		03		2017

**Transaction ID : 76746842**

Amount of Each Receipt this Period  
37.00

Memo Item

**B. ROGERS, DAVID Y, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 50368

City MIDLAND	State TX	Zip Code 79710-0368
-----------------	-------------	------------------------

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

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) LANDMAN / OIL PRODUCER
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		16		2017

**Transaction ID : 76746844**

Amount of Each Receipt this Period  
1000.00

Memo Item

**C. BLACKWELL, JONATHAN L, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 158

City SPRINGVALE	State ME	Zip Code 04083-0158
--------------------	-------------	------------------------

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

Name of Employer (for Individual) SEARIVER MARITIME, INC.	Occupation (for Individual) RETIRED - MERCHANT MARINER
--	---

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
284.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		12		2017

**Transaction ID : 76746858**

Amount of Each Receipt this Period  
55.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1092.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 80 OF 485
	<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. METZLER, JIMM R, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1361 INGLEWOOD DR

City STEPHENVILLE	State TX	Zip Code 76401-1612
----------------------	-------------	------------------------

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

Name of Employer (for Individual) TXU ELECTRIC	Occupation (for Individual) POWERPLANT OPERATOR
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
203.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		10		2017

**Transaction ID : 76746866**

Amount of Each Receipt this Period  
25.00

Memo Item

**B. PRIVETT, ROYCE, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9546 HINTON DR

City SANTEE	State CA	Zip Code 92071-2761
----------------	-------------	------------------------

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

Name of Employer (for Individual) OCEAN TECHNOLOGY INC	Occupation (for Individual) PROGRAM ANALYST
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		12		2017

**Transaction ID : 76746868**

Amount of Each Receipt this Period  
50.00

Memo Item

**C. HENSLEY, EARL E, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 77 MAULDIN RD

City QUITMAN	State AR	Zip Code 72131-8925
-----------------	-------------	------------------------

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

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		23		2017

**Transaction ID : 76746875**

Amount of Each Receipt this Period  
75.00

Memo Item

<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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 81 OF 485
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

**A. BRADLEY, ED, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 40425 CALLE TORCIDA  
 City TEMECULA State CA Zip Code 92591-1736  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED - ELECTRICIAN  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 10 / 11 / 2017  
**Transaction ID : 76746902**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**B. CHEATHAM, WALTER E, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO BOX 4  
 City LAVEEN State AZ Zip Code 85339-0004  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) MARICOPA CO. COMMUNITY COLLEGE Occupation (for Individual) DISPATCHER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 224.00

Date of Receipt 10 / 19 / 2017  
**Transaction ID : 76746907**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**C. SEYMUOR, ROBERT L, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 607 LAUREL DR  
 City KENAI State AK Zip Code 99611-7539  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 10 / 30 / 2017  
**Transaction ID : 76746919**  
 Amount of Each Receipt this Period 125.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 175.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 82 OF 485
	<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. SOPER, WILLIAM, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1042 LAIRD ST

City MARSHFIELD	State WI	Zip Code 54449-1228
--------------------	-------------	------------------------

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

Name of Employer (for Individual) MARSHFIELD CLINIC	Occupation (for Individual) SR. PROGRAMMER / ANALYST
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
310.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		13		2017

**Transaction ID : 76746922**

Amount of Each Receipt this Period  
40.00

Memo Item

**B. REITZ, MICHAEL, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1219 SUGAR CREEK LN

City ROCKLEDGE	State FL	Zip Code 32955-4637
-------------------	-------------	------------------------

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

Name of Employer (for Individual) USDI/BLM	Occupation (for Individual) Retired
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
201.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		06		2017

**Transaction ID : 76746927**

Amount of Each Receipt this Period  
25.00

Memo Item

**C. PERCY, PETER W, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 968 OLYMPIA AVE

City VENTURA	State CA	Zip Code 93004-2219
-----------------	-------------	------------------------

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

Name of Employer (for Individual) CA DEPT OF INSURANCE	Occupation (for Individual) CRIMINAL INVESTIGATOR
---	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		17		2017

**Transaction ID : 76746930**

Amount of Each Receipt this Period  
50.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	115.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 83 OF 485
	<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. COMPTON, SCOT B, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6411 N 131ST LN

City LITCHFIELD PARK	State AZ	Zip Code 85340-5302
-------------------------	-------------	------------------------

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

Name of Employer (for Individual) Laboratory Sciences of AZ	Occupation (for Individual) Pathology Assistant
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
432.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		12		2017

**Transaction ID : 76746934**

Amount of Each Receipt this Period  
55.00

Memo Item

**B. SMITH, DOUGLAS B, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2510 W HOWARD AVE

City VISALIA	State CA	Zip Code 93277-4243
-----------------	-------------	------------------------

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

Name of Employer (for Individual) STATE OF CAL	Occupation (for Individual) TECHNICIAN
---	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
208.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		04		2017

**Transaction ID : 76746947**

Amount of Each Receipt this Period  
55.00

Memo Item

**C. SULLIVAN, DONALD, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 45434 11TH ST W

City LANCASTER	State CA	Zip Code 93534-1408
-------------------	-------------	------------------------

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

Name of Employer (for Individual) USAF - EDWARDS AFB	Occupation (for Individual) BUDGET ANALYST
---	---

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
234.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		30		2017

**Transaction ID : 76746968**

Amount of Each Receipt this Period  
120.00

Memo Item

<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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 84 OF 485
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

**A. SOPP, MELVIN, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 704 HEARN ST  
 City YREKA State CA Zip Code 96097-2822  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 10 / 10 / 2017  
**Transaction ID : 76746977**  
 Amount of Each Receipt this Period 60.00  
 Memo Item

**B. SENCENBAUGH, LEE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO BOX 1205  
 City LOS BANOS State CA Zip Code 93635-1205  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CA STATE PARKS Occupation (for Individual) STATE PARK RANGER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 10 / 18 / 2017  
**Transaction ID : 76746980**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**C. GATHWRIGHT, JACKIE R, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3 PANTHER RIDGE RD  
 City HENDERSONVILLE State NC Zip Code 28792-9291  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt 10 / 03 / 2017  
**Transaction ID : 76746994**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	260.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 85 OF 485
	<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. LAMB, JIMMY D, , COL,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 110 LIVINGSTON TERRACE DR

City SAN BRUNO	State CA	Zip Code 94066-2849
-------------------	-------------	------------------------

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

Name of Employer (for Individual) GTE	Occupation (for Individual) ENGR MANAGER
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
465.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
10		23		2017

**Transaction ID : 76747000**

Amount of Each Receipt this Period  
60.00

Memo Item

**B. TETER, ROGER D, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 682 TIFFANY CT

City SUNNYVALE	State CA	Zip Code 94087-2439
-------------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
625.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
10		10		2017

**Transaction ID : 76747001**

Amount of Each Receipt this Period  
200.00

Memo Item

**C. KERRIGAN, ROBERT, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 851 THORNHILL DR

City DALY CITY	State CA	Zip Code 94015-3649
-------------------	-------------	------------------------

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

Name of Employer (for Individual) SAN FRANCISCO	Occupation (for Individual) MUNICIPAL EMPLOYEE
--	---

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
225.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
10		16		2017

**Transaction ID : 76747007**

Amount of Each Receipt this Period  
75.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	335.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 86 OF 485
	<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. BARNES, GEORGE G, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 960 ILIMA WAY

City PALO ALTO	State CA	Zip Code 94306-2617
-------------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED - ENGINEER
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
998.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	10	/	2017

**Transaction ID : 76747012**

Amount of Each Receipt this Period  
100.00

Memo Item

**B. HUCK, CLAYTON, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2460 100TH AVE

City ELLIS	State KS	Zip Code 67637-9263
---------------	-------------	------------------------

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

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) FARMER
--	---------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
277.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	06	/	2017

**Transaction ID : 76747032**

Amount of Each Receipt this Period  
25.00

Memo Item

**C. SUTAK, THOMAS A, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8 EASTWARD LN

City DANVILLE	State CA	Zip Code 94506-1908
------------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	11	/	2017

**Transaction ID : 76747046**

Amount of Each Receipt this Period  
100.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	225.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 87 OF 485
	(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"/> 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. CHANEY, JON B., , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 585 WILDROSE LN

City BOZEMAN	State MT	Zip Code 59715-7814
-----------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED - FARMER
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		11		2017

**Transaction ID : 76747049**

Amount of Each Receipt this Period  
100.00

Memo Item

**B. EARLE, KENNETH, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 27 BALLANTYNE RD

City ROCHESTER	State NY	Zip Code 14623-1954
-------------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
280.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		13		2017

**Transaction ID : 76747051**

Amount of Each Receipt this Period  
25.00

Memo Item

**C. DANSE, JAMES A., , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 578

City NOVATO	State CA	Zip Code 94948-0578
----------------	-------------	------------------------

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

Name of Employer (for Individual) SELF-EMPLOYED	Occupation (for Individual) ATTORNEY
--	---

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
215.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		06		2017

**Transaction ID : 76747053**

Amount of Each Receipt this Period  
100.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	225.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 88 OF 485
	(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"/> 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. MUMMA, HARRY E, , MR, JR**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 455 TANSBORO RD

City ATCO	State NJ	Zip Code 08004-2406
--------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
375.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		03		2017

**Transaction ID : 76747061**

Amount of Each Receipt this Period  
250.00

Memo Item

**B. ANDERSON, WILLIAM H, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4896 N BROOKMEADOW WAY

City BOISE	State ID	Zip Code 83713-1436
---------------	-------------	------------------------

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

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
251.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		17		2017

**Transaction ID : 76747072**

Amount of Each Receipt this Period  
55.00

Memo Item

**C. MELANSON, STEPHEN E, , MR, SR**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 50 GARFIELD AVE

City MEDFORD	State MA	Zip Code 02155-4026
-----------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
261.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		11		2017

**Transaction ID : 76747081**

Amount of Each Receipt this Period  
25.00

Memo Item

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



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 89 OF 485
	<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. TONDER, DAVID, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1104 COUNTY ROAD 308

City PARACHUTE	State CO	Zip Code 81635-9225
-------------------	-------------	------------------------

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

Name of Employer (for Individual) Retired	Occupation (for Individual) Retired-Contractor
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
261.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		16		2017

**Transaction ID : 76747083**

Amount of Each Receipt this Period  
37.00

Memo Item

**B. GUNTHER, HOWARD, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 27 BAILEY RD

City BETHEL	State ME	Zip Code 04217-4857
----------------	-------------	------------------------

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

Name of Employer (for Individual) Retired	Occupation (for Individual) Retired
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
299.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		02		2017

**Transaction ID : 76747085**

Amount of Each Receipt this Period  
48.00

Memo Item

**C. DUFF, LEE, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 125

City HONDO	State NM	Zip Code 88336-0125
---------------	-------------	------------------------

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

Name of Employer (for Individual) Retired	Occupation (for Individual) Retired
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
272.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		11		2017

**Transaction ID : 76747107**

Amount of Each Receipt this Period  
25.00

Memo Item

<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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 90 OF 485
	<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. FOX, DAVID, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 305

City EASTFORD	State CT	Zip Code 06242-0305
------------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		10		2017

**Transaction ID : 76747115**

Amount of Each Receipt this Period  
300.00

Memo Item

**B. WECKOSKI, JOHN, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 330 GRANGE RD

City COAL CENTER	State PA	Zip Code 15423-1306
---------------------	-------------	------------------------

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

Name of Employer (for Individual) GF ENERGY POWER CONVERSION USA INC	Occupation (for Individual) SALES
---	--------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
290.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		16		2017

**Transaction ID : 76747122**

Amount of Each Receipt this Period  
25.00

Memo Item

**C. HAWKE, THOMAS R, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5440A MEMORY LN

City SHINGLE SPRINGS	State CA	Zip Code 95682-9730
-------------------------	-------------	------------------------

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

Name of Employer (for Individual) EL DORADO COUNTY	Occupation (for Individual) DEPUTY SHERIFF
---	---

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
236.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		16		2017

**Transaction ID : 76747142**

Amount of Each Receipt this Period  
25.00

Memo Item

<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) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 91 OF 485
<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. CREAM, RONALD, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7839 LATROBE AVE

City BURBANK	State IL	Zip Code 60459-1463
-----------------	-------------	------------------------

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

Name of Employer (for Individual)	Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
348.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	04	/	2017

**Transaction ID : 76747165**

Amount of Each Receipt this Period  
100.00

Memo Item

**B. BLAIR, ROBERT, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 17859

City NATCHEZ	State MS	Zip Code 39122-7859
-----------------	-------------	------------------------

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

Name of Employer (for Individual) PACIFIC GAS & ELECTRIC CO	Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	11	/	2017

**Transaction ID : 76747167**

Amount of Each Receipt this Period  
50.00

Memo Item

**C. MELANSON, ROBERT E, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 45 PENN ST

City QUINCY	State MA	Zip Code 02169-7505
----------------	-------------	------------------------

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

Name of Employer (for Individual) CORCORAN MANAGEMENT COMPANY	Occupation (for Individual) FACILITY MANAGER

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
355.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	10	/	2017

**Transaction ID : 76747180**

Amount of Each Receipt this Period  
50.00

Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 92 OF 485
	<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. MELANSON, ROBERT E, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 45 PENN ST

City QUINCY	State MA	Zip Code 02169-7505
----------------	-------------	------------------------

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

Name of Employer (for Individual) CORCORAN MANAGEMENT COMPANY	Occupation (for Individual) FACILITY MANAGER
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
405.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		23		2017

**Transaction ID : 76747181**

Amount of Each Receipt this Period  
50.00

Memo Item

**B. SINGER, WARREN L, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 39421 HIGHWAY 929

City PRAIRIEVILLE	State LA	Zip Code 70769-4928
----------------------	-------------	------------------------

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

Name of Employer (for Individual) INDUSTRIAL CONSULTING & SUPPLY	Occupation (for Individual) BUSINESS OWNER
---	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		20		2017

**Transaction ID : 76747203**

Amount of Each Receipt this Period  
500.00

Memo Item

**C. BARON, DAVID, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 13398 FOREST PARK DR

City GRAND HAVEN	State MI	Zip Code 49417-8841
---------------------	-------------	------------------------

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

Name of Employer (for Individual) US Army	Occupation (for Individual) Retired
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
356.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		17		2017

**Transaction ID : 76747214**

Amount of Each Receipt this Period  
37.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	587.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 93 OF 485
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<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. PRINGLE, BRUCE, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1855 LOOMIS OROVILLE RD  
 City LOOMIS State WA Zip Code 98827-9708  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 207.00

Date of Receipt 10 / 10 / 2017  
**Transaction ID : 76747222**  
 Amount of Each Receipt this Period 15.00  
 Memo Item

**B. MATTHEWS, RAYMOND, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2700 SEVEN MILE LN SE  
 City ALBANY State OR Zip Code 97322-7113  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) TELEDYNE WAH CHANG ALBANY Occupation (for Individual) TECHNICIAN  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 920.00

Date of Receipt 10 / 11 / 2017  
**Transaction ID : 76747228**  
 Amount of Each Receipt this Period 121.00  
 Memo Item

**C. ARMOR, RICHARD T, , MR, JR**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 105 WILLIAMS ST  
 City MARIETTA State OH Zip Code 45750-7866  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 224.00

Date of Receipt 10 / 16 / 2017  
**Transaction ID : 76747239**  
 Amount of Each Receipt this Period 20.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	156.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 94 OF 485
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

**A. BURES, DALE L, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 417 SE FOUNDATION DR  
 City DALLAS State OR Zip Code 97338-9760  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 212.00

Date of Receipt 10 / 18 / 2017  
**Transaction ID : 76747246**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**B. REID, JOHN, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 38251 470TH AVE  
 City WINDOM State MN Zip Code 56101-3144  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 11 / 2017  
**Transaction ID : 76747253**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**C. HINTON, TRUMAN A, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5948 E LYN HAVEN DR SE  
 City GRAND RAPIDS State MI Zip Code 49512-9320  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 347.00

Date of Receipt 10 / 21 / 2017  
**Transaction ID : 76747257**  
 Amount of Each Receipt this Period 55.00  
 Memo Item

<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) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 95 OF 485  
(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. GOOLD, JAMES R, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 19530 SPRAGUE RIVER RD  
 City CHILOQUIN State OR Zip Code 97624-9607  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GOOLDS SPRAGUE RIVER RANCH, INC. Occupation (for Individual) RANCHER / OWNER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 355.00

Date of Receipt 10 / 16 / 2017  
**Transaction ID : 76747264**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**B. DUFRENE, SERGIN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1116 JOYCE ST  
 City MARRERO State LA Zip Code 70072-2310  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 415.00

Date of Receipt 10 / 11 / 2017  
**Transaction ID : 76747265**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**C. BEALL, GARY E, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO BOX 1305  
 City TONOPAH State NV Zip Code 89049-1305  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED - ELECTRICIAN  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 328.00

Date of Receipt 10 / 25 / 2017  
**Transaction ID : 76747271**  
 Amount of Each Receipt this Period 37.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 237.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 96 OF 485
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

**A. MOORE, KENNETH L, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO BOX 367

City MOUNT VERNON	State OR	Zip Code 97865-0367
----------------------	-------------	------------------------

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

Name of Employer (for Individual) Retired	Occupation (for Individual) Retired
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
216.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 10 / 2017  
**Transaction ID : 76747276**

Amount of Each Receipt this Period  
 37.00

Memo Item

**B. DAILLY, ROBERT D, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO BOX 23901

City FEDERAL WAY	State WA	Zip Code 98093-0901
---------------------	-------------	------------------------

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

Name of Employer (for Individual) Retired	Occupation (for Individual) Retired
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
295.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 10 / 2017  
**Transaction ID : 76747278**

Amount of Each Receipt this Period  
 50.00

Memo Item

**C. MOORE, ROBERT G, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 27703 94TH AVE SW

City VASHON	State WA	Zip Code 98070-8609
----------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
249.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 13 / 2017  
**Transaction ID : 76747287**

Amount of Each Receipt this Period  
 25.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	112.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 97 OF 485
	<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. FOOTE, FRANK W, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 302

City FALL CITY	State WA	Zip Code 98024-0302
-------------------	-------------	------------------------

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

Name of Employer (for Individual) Retired	Occupation (for Individual) Retired
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
233.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		10		2017

**Transaction ID : 76747288**

Amount of Each Receipt this Period  
30.00

Memo Item

**B. MORMAN, WILLIAM B, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 111 HILLENDALE AVE

City NAZARETH	State PA	Zip Code 18064-9163
------------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
995.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		03		2017

**Transaction ID : 76747299**

Amount of Each Receipt this Period  
55.00

Memo Item

**C. MCAFEE, KEN, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 249 WOODCASTLE DR

City FLORENCE	State AL	Zip Code 35630-6203
------------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
381.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		23		2017

**Transaction ID : 76747311**

Amount of Each Receipt this Period  
25.00

Memo Item

<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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 98 OF 485
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

**A. Rael, Daniel J., MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1315 OLD MESCALERO RD  
 City TULAROSA State NM Zip Code 88352-9312  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 251.00

Date of Receipt 10 / 16 / 2017  
**Transaction ID : 76747320**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**B. Boyer, Paul J., MR, JR**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 35 N LEBANON ST  
 City LEBANON State PA Zip Code 17042-9546  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 244.00

Date of Receipt 10 / 10 / 2017  
**Transaction ID : 76747329**  
 Amount of Each Receipt this Period 24.00  
 Memo Item

**C. Boyer, Paul J., MR, JR**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 35 N LEBANON ST  
 City LEBANON State PA Zip Code 17042-9546  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 10 / 06 / 2017  
**Transaction ID : 76747330**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	74.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 99 OF 485
	<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. HERETH, DAVID L, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9909 56TH ST SE

City SNOHOMISH	State WA	Zip Code 98290-1010
-------------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) retired
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
361.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		10		2017

**Transaction ID : 76747331**

Amount of Each Receipt this Period  
25.00

Memo Item

**B. TODD, JACK D, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1679 BROOKS RD N

City EVANS	State WA	Zip Code 99126-9723
---------------	-------------	------------------------

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

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
258.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		23		2017

**Transaction ID : 76747345**

Amount of Each Receipt this Period  
37.00

Memo Item

**C. BULLPITT, HOWARD, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3445 14TH AVE NW

City OLYMPIA	State WA	Zip Code 98502-4023
-----------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
322.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		11		2017

**Transaction ID : 76747353**

Amount of Each Receipt this Period  
37.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	99.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 100 OF 485
	<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	<input type="checkbox"/> 17

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

**A. HARRELL, NEAL T, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 7872

City FREDERICKSBURG	State VA	Zip Code 22404-7872
------------------------	-------------	------------------------

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

Name of Employer (for Individual) SPOTSYLVANIA COUNTY	Occupation (for Individual) RETIRED - WATERWORKS OPERATC
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
325.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		02		2017

**Transaction ID : 76747361**

Amount of Each Receipt this Period  
100.00

Memo Item

**B. STEINER, HAL, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9012 25TH AVE SW UNIT 102D

City SEATTLE	State WA	Zip Code 98106-3269
-----------------	-------------	------------------------

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

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
225.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		23		2017

**Transaction ID : 76747366**

Amount of Each Receipt this Period  
75.00

Memo Item

**C. HERRING, GARY D, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 111 5TH AVE E

City BUCKEYE	State AZ	Zip Code 85326-1211
-----------------	-------------	------------------------

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

Name of Employer (for Individual) INSAMET OF ARIZONA	Occupation (for Individual) SUPERVISOR
---	---

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
274.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		04		2017

**Transaction ID : 76747372**

Amount of Each Receipt this Period  
37.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	212.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 101 OF 485
	<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. TUTTEN, HARRY L, , MR, JR**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 160

City EDISTO ISLAND	State SC	Zip Code 29438-0160
-----------------------	-------------	------------------------

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

Name of Employer (for Individual) COASTAL PLAINS PHYSICIANS ASSO.	Occupation (for Individual) PHYSICIAN
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1400.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		10		2017

**Transaction ID : 76747378**

Amount of Each Receipt this Period  
500.00

Memo Item

**B. FRASCH, WILLIAM W, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3960 N 750 E

City ATTICA	State IN	Zip Code 47918-7909
----------------	-------------	------------------------

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

Name of Employer (for Individual) MACALLISTER CAT RENTAL	Occupation (for Individual) DIESEL MECHANIC
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
304.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		06		2017

**Transaction ID : 76747394**

Amount of Each Receipt this Period  
25.00

Memo Item

**C. DUNBAR, HENRY T, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2412 LEE ST

City ANCHORAGE	State AK	Zip Code 99504-3120
-------------------	-------------	------------------------

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

Name of Employer (for Individual) HANKA TAXIDERMY	Occupation (for Individual) TAXIDERMIST
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
208.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		12		2017

**Transaction ID : 76747402**

Amount of Each Receipt this Period  
37.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	562.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 102 OF 485
	<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. GARNER, RICHARD W, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7201 E CHESTER HEIGHTS CIR  
 City ANCHORAGE State AK Zip Code 99504-3563  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) ORTHO ALASKA Occupation (for Individual) Orthopedic Surgery Specialist  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt 10 / 19 / 2017  
**Transaction ID : 76747405**  
 Amount of Each Receipt this Period 30.00  
 Memo Item

**B. BUIE, JOE, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 371 WILLOW GLENN CT  
 City MARIETTA State GA Zip Code 30068-3490  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 10 / 02 / 2017  
**Transaction ID : 76747406**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**C. SEDGWICK, MARY L, , MS,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 481 GOLDEN VISTA AVE  
 City RENO State NV Zip Code 89506-5735  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) UNIVERSITY OF NEVADA - RENO Occupation (for Individual) DIRECTOR OF FIELD EXPERIENCES  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 580.00

Date of Receipt 10 / 04 / 2017  
**Transaction ID : 76747425**  
 Amount of Each Receipt this Period 37.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	567.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 103 OF 485
	<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**

**A. LEARY, LYNN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2344 HORSESHOE CT  
 City SANTA ROSA State CA Zip Code 95405-8134  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 393.00

Date of Receipt 10 / 06 / 2017  
**Transaction ID : 76747435**  
 Amount of Each Receipt this Period 37.00  
 Memo Item

**B. CYRIACKS, JEFF, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO BOX 4347  
 City GRAND JUNCTION State CO Zip Code 81502-4347  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GRAND JUNCTOIN FCU Occupation (for Individual) FINANCIAL  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 203.00

Date of Receipt 10 / 12 / 2017  
**Transaction ID : 76747445**  
 Amount of Each Receipt this Period 28.00  
 Memo Item

**C. FEDLER, DONALD E, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 WAITE CORNER RD  
 City NORTH BROOKFIELD State MA Zip Code 01535-1220  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 10 / 10 / 2017  
**Transaction ID : 76747453**  
 Amount of Each Receipt this Period 37.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional).....▶ 102.00  
**TOTAL** This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 104 OF 485
	<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. POMEROY, CALEB, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 10347

City FAIRBANKS	State AK	Zip Code 99710-0347
-------------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		11		2017

**Transaction ID : 76747455**

Amount of Each Receipt this Period  
500.00

Memo Item

**B. STANHOPE, ALAN E, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 274 PLEASANT ST

City PAXTON	State MA	Zip Code 01612-1408
----------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
347.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		18		2017

**Transaction ID : 76747456**

Amount of Each Receipt this Period  
37.00

Memo Item

**C. COBER, WILLIAM R, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1602 BRUBAKER ST

City BERLIN	State PA	Zip Code 15530-1421
----------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
219.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		05		2017

**Transaction ID : 76747486**

Amount of Each Receipt this Period  
20.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	557.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 105 OF 485
	<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	<input type="checkbox"/> 17

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

**A. MUTER, ROBERT J, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 34471 S MAXTON CROSS RD

City DRUMMOND IS	State MI	Zip Code 49726-8523
---------------------	-------------	------------------------

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

Name of Employer (for Individual) Makinac Co. Sheriff Department	Occupation (for Individual) Retired-Deputy Sheriff
---	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
314.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		04		2017

**Transaction ID : 76747502**

Amount of Each Receipt this Period  
55.00

Memo Item

**B. CULLITY, DANIEL, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 209 OLD COUNTY RD

City EAST SANDWICH	State MA	Zip Code 02537-1536
-----------------------	-------------	------------------------

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

Name of Employer (for Individual) Cullity & Son Restoration	Occupation (for Individual) Restorer & Engineer
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		11		2017

**Transaction ID : 76747511**

Amount of Each Receipt this Period  
100.00

Memo Item

**C. FREES, RONALD, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4001 CIRCLE AVE

City READING	State PA	Zip Code 19606-3017
-----------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED - TOOLMAKER
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
274.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2017

**Transaction ID : 76747517**

Amount of Each Receipt this Period  
50.00

Memo Item

<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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 106 OF 485
	<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. SMITH, GARY A, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 504 S MARIPOSA ST

City PAYSON	State AZ	Zip Code 85541-5272
----------------	-------------	------------------------

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

Name of Employer (for Individual) ADCO EQUIP INC	Occupation (for Individual) TRUCK DRIVER
---	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
235.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		06		2017

**Transaction ID : 76747543**

Amount of Each Receipt this Period  
20.00

Memo Item

**B. BARLOW, MARCUS V, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 31 HUNTRESS AVE

City WESTBROOK	State ME	Zip Code 04092-2610
-------------------	-------------	------------------------

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

Name of Employer (for Individual) KRIS WAY TRUCK LEASING	Occupation (for Individual) TRUCK DRIVER
---	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
220.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		11		2017

**Transaction ID : 76747551**

Amount of Each Receipt this Period  
100.00

Memo Item

**C. NICHOLS, T STEPHEN, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 231 1ST ST APT 5

City HUNTINGTON BEACH	State CA	Zip Code 92648-5366
--------------------------	-------------	------------------------

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

Name of Employer (for Individual) FAITH FELLOWSHIP	Occupation (for Individual) MINISTER
---	---

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
203.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		24		2017

**Transaction ID : 76747559**

Amount of Each Receipt this Period  
25.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	145.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 107 OF 485
	<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. GREMBI, JAMES D, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 82 PUTTER DR

City PALM COAST	State FL	Zip Code 32164-4700
--------------------	-------------	------------------------

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

Name of Employer (for Individual) UNITED STATES NAVY	Occupation (for Individual) ENGINEER
---	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
525.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
10		16		2017

**Transaction ID : 76747574**

Amount of Each Receipt this Period  
25.00

Memo Item

**B. LINDSAY, PHILIP A, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3734 201ST LN NW

City ANOKA	State MN	Zip Code 55303-8920
---------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
785.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
10		03		2017

**Transaction ID : 76747610**

Amount of Each Receipt this Period  
100.00

Memo Item

**C. SULLIVAN, RONALD E, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2518 KNIGHTHILL LN

City BOWIE	State MD	Zip Code 20715-2757
---------------	-------------	------------------------

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

Name of Employer (for Individual) City of District of Columbia	Occupation (for Individual) Retired
---	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
215.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
10		03		2017

**Transaction ID : 76747625**

Amount of Each Receipt this Period  
30.00

Memo Item

<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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 108 OF 485
	<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. NESS, STEVE, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 162 CHATHAM RD NE

City CEDAR RAPIDS	State IA	Zip Code 52402-1539
----------------------	-------------	------------------------

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

Name of Employer (for Individual) ROCKWELL COLLINS	Occupation (for Individual) ENGINEER
---	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
494.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		12		2017

**Transaction ID : 76747630**

Amount of Each Receipt this Period  
37.00

Memo Item

**B. FINK, JOHN W, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1475 VALLEY RANCH CIR

City PRESCOTT	State AZ	Zip Code 86303-6339
------------------	-------------	------------------------

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

Name of Employer (for Individual) HORYWELL	Occupation (for Individual) ENGINEER
---	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
276.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		04		2017

**Transaction ID : 76747634**

Amount of Each Receipt this Period  
40.00

Memo Item

**C. MUNOZ, FRANK T, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 15 GOLF CREST CT

City HENDERSON	State NV	Zip Code 89052-6661
-------------------	-------------	------------------------

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

Name of Employer (for Individual) DOLORES CANNING COMPANY, INC.	Occupation (for Individual) PRESIDENT
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		10		2017

**Transaction ID : 76747648**

Amount of Each Receipt this Period  
100.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	177.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 109 OF 485
	<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	<input type="checkbox"/> 17

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

**A. JUTH, ED, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1000 NESHAMINY VALLEY DR

City BENSALEM	State PA	Zip Code 19020-1223
------------------	-------------	------------------------

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

Name of Employer (for Individual) METRO FIRE INC	Occupation (for Individual) MANAGER
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
348.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		03		2017

**Transaction ID : 76747651**

Amount of Each Receipt this Period  
37.00

Memo Item

**B. SCOGGIN, CURT, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7362 W PARKS HWY # 710

City WASILLA	State AK	Zip Code 99623-9300
-----------------	-------------	------------------------

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

Name of Employer (for Individual) PIPER LANDING AIRPORT	Occupation (for Individual) MANAGER
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		30		2017

**Transaction ID : 76747656**

Amount of Each Receipt this Period  
1000.00

Memo Item

**C. WAGNER, GEORGE B, , MR, JR**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1641 HUNTCREST DR

City CINCINNATI	State OH	Zip Code 45255-3047
--------------------	-------------	------------------------

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

Name of Employer (for Individual) CINCINNATI COCA-COLA	Occupation (for Individual) SERVICE TECH
---	---

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
356.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		03		2017

**Transaction ID : 76747665**

Amount of Each Receipt this Period  
25.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1062.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 110 OF 485
	<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	<input type="checkbox"/> 17

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

**A. OCONNELL, JOHN R, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9322 3RD AVE APT 125

City BROOKLYN	State NY	Zip Code 11209-6802
------------------	-------------	------------------------

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

Name of Employer (for Individual) NEW YORK TELEPHONE	Occupation (for Individual) INSTALLER- RETIRED
---	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
325.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		03		2017

**Transaction ID : 76747686**

Amount of Each Receipt this Period  
50.00

Memo Item

**B. BROWN, RALPH E, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 199

City LODGE GRASS	State MT	Zip Code 59050-0199
---------------------	-------------	------------------------

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

Name of Employer (for Individual) Retired	Occupation (for Individual) Retired
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
246.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		17		2017

**Transaction ID : 76747706**

Amount of Each Receipt this Period  
25.00

Memo Item

**C. LEEDY, ROY G, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 716 WESTGATE DR

City BILLINGS	State MT	Zip Code 59101-7024
------------------	-------------	------------------------

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

Name of Employer (for Individual) Retired	Occupation (for Individual) Retired
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
249.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		10		2017

**Transaction ID : 76747708**

Amount of Each Receipt this Period  
37.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	112.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 111 OF 485
	<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. SPLETZER, HERBERT E, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3620 HARDING ST

City DEARBORN	State MI	Zip Code 48124-3764
------------------	-------------	------------------------

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

Name of Employer (for Individual) Arobotech Systems	Occupation (for Individual) Inspector
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
325.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		10		2017

**Transaction ID : 76747723**

Amount of Each Receipt this Period  
100.00

Memo Item

**B. TRAFTON, DAVID E, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 112402

City TACOMA	State WA	Zip Code 98411-2402
----------------	-------------	------------------------

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

Name of Employer (for Individual) CITY OF TACOMA	Occupation (for Individual) PUBLIC WORKS
---	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
280.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		12		2017

**Transaction ID : 76747725**

Amount of Each Receipt this Period  
50.00

Memo Item

**C. MOSS, GUY W, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 331

City ZEPHYR COVE	State NV	Zip Code 89448-0331
---------------------	-------------	------------------------

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

Name of Employer (for Individual) Retired	Occupation (for Individual) Retired - Firefighter
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		16		2017

**Transaction ID : 76747740**

Amount of Each Receipt this Period  
100.00

Memo Item

<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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 112 OF 485
	<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	<input type="checkbox"/> 17

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

**A. BROCKIE, ROBERT E, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7529 MAPLECREST DR

City DALLAS	State TX	Zip Code 75254-2814
----------------	-------------	------------------------

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

Name of Employer (for Individual) UTHSCH	Occupation (for Individual) DOCTOR
---	---------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
320.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	17	/	2017

**Transaction ID : 76747749**

Amount of Each Receipt this Period  
120.00

Memo Item

**B. GREEN, RICHARD R, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 16297 JACOBS RD

City WATERTOWN	State NY	Zip Code 13601-5455
-------------------	-------------	------------------------

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

Name of Employer (for Individual) US ARMY	Occupation (for Individual) AUTO MECHANIC
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
450.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	03	/	2017

**Transaction ID : 76747750**

Amount of Each Receipt this Period  
150.00

Memo Item

**C. CUSHMAN, STEVEN, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11 AGRICULTURAL AVE

City REHOBOTH	State MA	Zip Code 02769-1513
------------------	-------------	------------------------

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

Name of Employer (for Individual) Retired	Occupation (for Individual) Retired
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
249.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	06	/	2017

**Transaction ID : 76747754**

Amount of Each Receipt this Period  
30.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	300.00
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 113 OF 485
	<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. BEARDEN, PAUL M, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2563 S STATE HIGHWAY 121

City BONHAM	State TX	Zip Code 75418-8958
----------------	-------------	------------------------

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

Name of Employer (for Individual) TX HWY DEPT	Occupation (for Individual) ENGR TECH III
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
322.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		03		2017

**Transaction ID : 76747759**

Amount of Each Receipt this Period  
25.00

Memo Item

**B. HERZOG, STANLEY M, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 1089

City SAINT JOSEPH	State MO	Zip Code 64502-1089
----------------------	-------------	------------------------

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

Name of Employer (for Individual) HERZOG CONTRACTING	Occupation (for Individual) OWNER
---	--------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
700.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		02		2017

**Transaction ID : 76747760**

Amount of Each Receipt this Period  
500.00

Memo Item

**C. RUTHERFORD, LAWRENCE, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 735 S SHORTINO LN

City BENSON	State AZ	Zip Code 85602-7617
----------------	-------------	------------------------

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

Name of Employer (for Individual) Retired	Occupation (for Individual) Retired
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
225.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		04		2017

**Transaction ID : 76747779**

Amount of Each Receipt this Period  
25.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	550.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 114 OF 485
	<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. SANDS, MICHAEL, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4740 DEXTER AVE

City FORT WORTH	State TX	Zip Code 76107-3738
--------------------	-------------	------------------------

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

Name of Employer (for Individual) SANDS PROPANE, INC.	Occupation (for Individual) PROPANE MARKETER
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
273.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		03		2017

**Transaction ID : 76747785**

Amount of Each Receipt this Period  

37.00
-------

 Memo Item

**B. COLE, BRIAN J, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 179

City CEDAR SPRINGS	State MI	Zip Code 49319-0179
-----------------------	-------------	------------------------

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

Name of Employer (for Individual) WOLVERINE WORLD WIDE, INC.	Occupation (for Individual) FACTORY WORKER
---	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
246.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		11		2017

**Transaction ID : 76747793**

Amount of Each Receipt this Period  

25.00
-------

 Memo Item

**C. MURRAY, MARK A, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 207 W THREE STORY HILL RD

City MORGANTOWN	State IN	Zip Code 46160-8967
--------------------	-------------	------------------------

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

Name of Employer (for Individual) TRADESMAN INTERNATIONAL	Occupation (for Individual) PLUMBER
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
212.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2017

**Transaction ID : 76747800**

Amount of Each Receipt this Period  

37.00
-------

 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	99.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 115 OF 485
	<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. BORBEE, ERNEST T, , MR, III**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5212 WILSHIRE LN  
 City OAKDALE State NY Zip Code 11769-1449  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) New York City Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 337.00

Date of Receipt 10 / 04 / 2017  
**Transaction ID : 76747805**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**B. GURLEY, STEVEN, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1436 S 500 W  
 City PAYSON State UT Zip Code 84651-8609  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) MOUNTAIN COUNTRY FOODS Occupation (for Individual) PARTS MANAGER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 223.00

Date of Receipt 10 / 10 / 2017  
**Transaction ID : 76747827**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**C. BUSSOM, GEORGE H, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 385 TYLER LN  
 City WHITE STONE State VA Zip Code 22578-3032  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt 10 / 06 / 2017  
**Transaction ID : 76747839**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

<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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 116 OF 485
	<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. WENTWORTH, DONALD N, , MR, JR**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 129 HOG BAY RD

City FRANKLIN	State ME	Zip Code 04634-3122
------------------	-------------	------------------------

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

Name of Employer (for Individual) UN-EMPLOYED	Occupation (for Individual) MACHINIST
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
328.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		12		2017

**Transaction ID : 76747854**

Amount of Each Receipt this Period  
25.00

Memo Item

**B. GILSON, BRUCE D, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 29123 FULLER AVE

City WICKLIFFE	State OH	Zip Code 44092-2326
-------------------	-------------	------------------------

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

Name of Employer (for Individual) Retired	Occupation (for Individual) Retired
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
276.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		03		2017

**Transaction ID : 76747866**

Amount of Each Receipt this Period  
25.00

Memo Item

**C. PHILLIPS, CHARLES D, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 480 KENSING RD

City MOUNTAIN HOME	State TX	Zip Code 78058-2163
-----------------------	-------------	------------------------

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

Name of Employer (for Individual) KERRVILLE CONSTRUCTION	Occupation (for Individual) ACCOUNTANT
---	---

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		10		2017

**Transaction ID : 76747868**

Amount of Each Receipt this Period  
25.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	75.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 117 OF 485
	<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. MORRIS, LIGHTLE Y, , MR, JR**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7918 JONES MALTSBERGER RD APT  
 City SAN ANTONIO State TX Zip Code 78216-6929  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 399.00

Date of Receipt 10 / 19 / 2017  
**Transaction ID : 76747874**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**B. MIFFITT, LAWRENCE, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 408 HALLMARK HOUSE  
 City HERSHEY State PA Zip Code 17033-2341  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 233.00

Date of Receipt 10 / 03 / 2017  
**Transaction ID : 76747880**  
 Amount of Each Receipt this Period 24.00  
 Memo Item

**C. ALLEN, DAVID L, L, MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO BOX 128  
 City KYLE State TX Zip Code 78640-0128  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) RANCHER  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt 10 / 11 / 2017  
**Transaction ID : 76747905**  
 Amount of Each Receipt this Period 37.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	86.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 118 OF 485
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

**A. MARTIN, GEORGE E, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 250 RAMBLING CREEK RD  
 City KERRVILLE State TX Zip Code 78028-8257  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED - ENGINEER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 10 / 19 / 2017  
**Transaction ID : 76747909**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**B. ERFMAN, DARREL, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 18578 YOUNGBERG RD  
 City NEWELL State SD Zip Code 57760-5862  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 295.00

Date of Receipt 10 / 03 / 2017  
**Transaction ID : 76747921**  
 Amount of Each Receipt this Period 30.00  
 Memo Item

**C. MILLER, ALAN D, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 12 BROOKTREE CIR  
 City MACEDON State NY Zip Code 14502-8926  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 10 / 06 / 2017  
**Transaction ID : 76747924**  
 Amount of Each Receipt this Period 30.00  
 Memo Item

<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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 119 OF 485
	<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. MARKS, CLARENCE G, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8520 POLARIS DR

City BAHAMA	State NC	Zip Code 27503-9604
----------------	-------------	------------------------

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

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) LOGGING
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
388.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		02		2017

**Transaction ID : 76747926**

Amount of Each Receipt this Period  
25.00

Memo Item

**B. BUCHOLZ, PHILIP H, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 390 E RIDGE AVE

City ELMHURST	State IL	Zip Code 60126-4115
------------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
227.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		12		2017

**Transaction ID : 76747945**

Amount of Each Receipt this Period  
55.00

Memo Item

**C. CRABB, STEPHEN, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2730 E 10TH ST

City ODESSA	State TX	Zip Code 79761-3332
----------------	-------------	------------------------

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

Name of Employer (for Individual) STEWART & STEVENSON POWER INC	Occupation (for Individual) DIESEL MECHANIC
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
258.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		11		2017

**Transaction ID : 76747947**

Amount of Each Receipt this Period  
25.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	105.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 120 OF 485
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<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. MOERLER, RICHARD W, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5626 GREY FEATHER CT  
 City WESTLAKE VILLAGE State CA Zip Code 91362-5293  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PROPERTY MANAGER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 449.00

Date of Receipt 10 / 13 / 2017  
**Transaction ID : 76747956**  
 Amount of Each Receipt this Period 37.00  
 Memo Item

**B. ENGER, PHILLIP F, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5975 GARRISON ST  
 City ARVADA State CO Zip Code 80004-5343  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 211.00

Date of Receipt 10 / 11 / 2017  
**Transaction ID : 76747959**  
 Amount of Each Receipt this Period 20.00  
 Memo Item

**C. MCDANIEL, ROBERT L, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 12188 ABELS RD  
 City N SPRINGFIELD State PA Zip Code 16430-1004  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 357.00

Date of Receipt 10 / 05 / 2017  
**Transaction ID : 76747969**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	82.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 121 OF 485
	<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**

**A. UREN, THOMAS J, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 411

City FAIRFAX	State MN	Zip Code 55332-0411
-----------------	-------------	------------------------

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

Name of Employer (for Individual) Retired	Occupation (for Individual) Retired
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
540.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		12		2017

**Transaction ID : 76747970**

Amount of Each Receipt this Period  
25.00

Memo Item

**B. CURTIS, DAVID K, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1613 N PERRY PARK RD

City SEDALIA	State CO	Zip Code 80135-8511
-----------------	-------------	------------------------

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

Name of Employer (for Individual) Oaklands Ranch	Occupation (for Individual) Rancher
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
420.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		16		2017

**Transaction ID : 76747977**

Amount of Each Receipt this Period  
100.00

Memo Item

**C. ACOSTA, MIKE, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8608 BRIDLEWOOD LN

City BAKERSFIELD	State CA	Zip Code 93311-2525
---------------------	-------------	------------------------

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

Name of Employer (for Individual) AERA ENERGY LLC	Occupation (for Individual) GEOLOGIST
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
610.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		10		2017

**Transaction ID : 76747988**

Amount of Each Receipt this Period  
50.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	175.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 122 OF 485
	<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	<input type="checkbox"/> 17

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

**A. PEARCE, DAVID, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3640 MAGNOLIA DR

City BRUNSWICK	State OH	Zip Code 44212-1525
-------------------	-------------	------------------------

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

Name of Employer (for Individual) USF HOLLAND	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
205.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		29		2017

**Transaction ID : 76747989**

Amount of Each Receipt this Period  
55.00

Memo Item

**B. HUNT, WALLACE G, , COL,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5886 S IRONTON CT

City ENGLEWOOD	State CO	Zip Code 80111-3935
-------------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
212.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		17		2017

**Transaction ID : 76747990**

Amount of Each Receipt this Period  
25.00

Memo Item

**C. JOHNS, JAMES H, , MR, JR**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 864

City GEORGETOWN	State CO	Zip Code 80444-0864
--------------------	-------------	------------------------

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

Name of Employer (for Individual) CLIMAX MOLYBDENUM COMPANY	Occupation (for Individual) RETIRED - MINING ENGINEER
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
275.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		16		2017

**Transaction ID : 76747995**

Amount of Each Receipt this Period  
150.00

Memo Item

<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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 123 OF 485
	<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	<input type="checkbox"/> 17

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

**A. STUDEMAN, KENNETH, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 65523 N CENTERVILLE RD

City STURGIS	State MI	Zip Code 49091-9148
-----------------	-------------	------------------------

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

Name of Employer (for Individual) Retired	Occupation (for Individual) Retired
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
460.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		17		2017

**Transaction ID : 76747997**

Amount of Each Receipt this Period  
150.00

Memo Item

**B. MAHRS, ED, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 10154

City GREENSBORO	State NC	Zip Code 27404-0154
--------------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
325.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		17		2017

**Transaction ID : 76747998**

Amount of Each Receipt this Period  
100.00

Memo Item

**C. DARLING, DAVID J, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 403 E JOHNSON ST

City RIVER FALLS	State WI	Zip Code 54022-3020
---------------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
228.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		11		2017

**Transaction ID : 76748006**

Amount of Each Receipt this Period  
20.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	270.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 124 OF 485
	<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	<input type="checkbox"/> 17

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

**A. LYE, EDWARD A, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 28506 COUNTY ROAD 30

City AKRON	State CO	Zip Code 80720-9247
---------------	-------------	------------------------

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

Name of Employer (for Individual) E & R PLUMBING	Occupation (for Individual) PLUMBER
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		04		2017

**Transaction ID : 76748018**

Amount of Each Receipt this Period  
500.00

Memo Item

**B. STEIN, WILLIAM G, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5160 BLUESTEM DR

City COLORADO SPRINGS	State CO	Zip Code 80917-1310
--------------------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
324.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		10		2017

**Transaction ID : 76748025**

Amount of Each Receipt this Period  
25.00

Memo Item

**C. LEE, HAROLD D, D, MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4529 W SANDRA TER

City GLENDALE	State AZ	Zip Code 85306-2125
------------------	-------------	------------------------

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

Name of Employer (for Individual) MARICOPA COUNTY	Occupation (for Individual) Database Administrator
--	---

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
249.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2017

**Transaction ID : 76748028**

Amount of Each Receipt this Period  
25.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	550.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 125 OF 485
	<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. LEE, HAROLD D, D, MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4529 W SANDRA TER

City GLENDALE	State AZ	Zip Code 85306-2125
------------------	-------------	------------------------

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

Name of Employer (for Individual) MARICOPA COUNTY	Occupation (for Individual) Database Administrator
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
224.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		06		2017

**Transaction ID : 76748029**

Amount of Each Receipt this Period  
25.00

Memo Item

**B. DENDA, HEINZ, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3646 E LEMON CREEK RD

City BERRIEN SPRINGS	State MI	Zip Code 49103-9520
-------------------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
266.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		12		2017

**Transaction ID : 76748036**

Amount of Each Receipt this Period  
25.00

Memo Item

**C. DOERNER, WAYNE, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 37 PENN AVE

City NEWTON	State NJ	Zip Code 07860-9776
----------------	-------------	------------------------

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

Name of Employer (for Individual) COLONIAL IND EQUIP CO INC	Occupation (for Individual) SELF-EMPLOYED
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
202.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		13		2017

**Transaction ID : 76748050**

Amount of Each Receipt this Period  
25.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	75.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 126 OF 485
	<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"/>	<input type="checkbox"/> 17

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

**A. MILLER, ROBERT A, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5865 LENE A DR NW

City BREMERTON	State WA	Zip Code 98312-1111
-------------------	-------------	------------------------

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

Name of Employer (for Individual) PUGET SOUND NAVAL SHIPYARD	Occupation (for Individual) RETIRED - ENGINEERING TECHNICAL
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
345.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		20		2017

**Transaction ID : 76748084**

Amount of Each Receipt this Period  
55.00

Memo Item

**B. MILLER, ROBERT A, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5865 LENE A DR NW

City BREMERTON	State WA	Zip Code 98312-1111
-------------------	-------------	------------------------

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

Name of Employer (for Individual) PUGET SOUND NAVAL SHIPYARD	Occupation (for Individual) RETIRED - ENGINEERING TECHNICAL
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
290.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		10		2017

**Transaction ID : 76748085**

Amount of Each Receipt this Period  
50.00

Memo Item

**C. LODL, ROBERT J, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address W8948 BUTLER LAKE RD

City CASCADE	State WI	Zip Code 53011-1154
-----------------	-------------	------------------------

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

Name of Employer (for Individual) PLYMOUTH FOAM, INC.	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
216.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		11		2017

**Transaction ID : 76748090**

Amount of Each Receipt this Period  
37.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	142.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 127 OF 485
	<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. HUTER, EARL, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9040 LINDEN RD

City NAMPA	State ID	Zip Code 83687-8016
---------------	-------------	------------------------

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

Name of Employer (for Individual) Huter Land & Investments LLC	Occupation (for Individual) President
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2017

**Transaction ID : 76748093**

Amount of Each Receipt this Period  
150.00

Memo Item

**B. MILLER, ROBERT L, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1547 BEDFORD AVE

City CLOVIS	State CA	Zip Code 93611-6607
----------------	-------------	------------------------

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

Name of Employer (for Individual) Fresno County, CA Sheriff's Office	Occupation (for Individual) Retired-Deputy Sheriff
---	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
260.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		10		2017

**Transaction ID : 76748108**

Amount of Each Receipt this Period  
25.00

Memo Item

**C. GILES, JOHN N, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 150 N 600 E

City HEBER CITY	State UT	Zip Code 84032-1725
--------------------	-------------	------------------------

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

Name of Employer (for Individual) US STEEL CORP	Occupation (for Individual) STEEL WORKER
--	---

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
519.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		10		2017

**Transaction ID : 76748112**

Amount of Each Receipt this Period  
40.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	215.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 128 OF 485
	<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. FIRPO, JOHN, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1119 SANDRINGHAM RD

City BALA CYNWYD	State PA	Zip Code 19004-2022
---------------------	-------------	------------------------

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

Name of Employer (for Individual) MED AM DREXEL HILL	Occupation (for Individual) PHYSICIAN
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
235.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		05		2017

**Transaction ID : 76748138**

Amount of Each Receipt this Period  
100.00

Memo Item

**B. DELAGARZA, TYRONE, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 768 JUNIPER RD

City VALPARAISO	State IN	Zip Code 46385-8400
--------------------	-------------	------------------------

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

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
229.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		12		2017

**Transaction ID : 76748140**

Amount of Each Receipt this Period  
25.00

Memo Item

**C. ROBERTSON, FRANK H, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6401 S CHAMPIONSHIP DR

City CHANDLER	State AZ	Zip Code 85249-8615
------------------	-------------	------------------------

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

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) REAL ESTATE SALES
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
222.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		04		2017

**Transaction ID : 76748145**

Amount of Each Receipt this Period  
25.00

Memo Item

<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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 129 OF 485
	<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. MOORE, FRANK L, , MR, III**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 23061 N 104TH AVE  
 City PEORIA State AZ Zip Code 85383-2765  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 10 / 11 / 2017  
**Transaction ID : 76748150**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**B. BOATWRIGHT, RICHARD L, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 26582 S COOPERS HAWK RD  
 City AMADO State AZ Zip Code 85645-9565  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SAN XAVIER BOOK & MATERIALS Occupation (for Individual) TEAMSTER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 254.00

Date of Receipt 10 / 10 / 2017  
**Transaction ID : 76748186**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**C. DUGAN, EDWARD J, , MR, III**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1037 NW 5TH AVE  
 City CAMAS State WA Zip Code 98607-2716  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 12 / 2017  
**Transaction ID : 76748196**  
 Amount of Each Receipt this Period 400.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	525.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 130 OF 485
	<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	<input type="checkbox"/> 17

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

**A. MILLER, MARY M, , MS,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 12436 CREEKHURST DR

City COLORADO SPRINGS	State CO	Zip Code 80921-5702
--------------------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) Retired
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
600.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2017

**Transaction ID : 76748208**

Amount of Each Receipt this Period  
100.00

Memo Item

**B. DAIN, JACK E, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4517 QUARTZ DR NE

City RIO RANCHO	State NM	Zip Code 87124-4910
--------------------	-------------	------------------------

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

Name of Employer (for Individual) AHOL SECURITY	Occupation (for Individual) COURT SECURITY OFFICER
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
217.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		16		2017

**Transaction ID : 76748222**

Amount of Each Receipt this Period  
25.00

Memo Item

**C. HAYES, PHILLIP T, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1239 S 17TH ST

City LAS VEGAS	State NV	Zip Code 89104-1832
-------------------	-------------	------------------------

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

Name of Employer (for Individual) Treasure Island, LLC	Occupation (for Individual) Table Game Dealer
---	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
228.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		10		2017

**Transaction ID : 76748260**

Amount of Each Receipt this Period  
55.00

Memo Item

<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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 131 OF 485
	<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. KNOWLES, LEO J., MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4815 WOOD RD

City CAMPBELL	State NY	Zip Code 14821-9709
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETRIED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
274.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		03		2017

**Transaction ID : 76748270**

Amount of Each Receipt this Period  
25.00

Memo Item

**B. BOUCHER, GEORGE R., MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1109 SEWELL DR

City ELKO	State NV	Zip Code 89801-2963
--------------	-------------	------------------------

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

Name of Employer (for Individual) Retired	Occupation (for Individual) Retired - County Mgmt / Admin
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
224.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		06		2017

**Transaction ID : 76748278**

Amount of Each Receipt this Period  
25.00

Memo Item

**C. BOUCHER, GEORGE R., MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1109 SEWELL DR

City ELKO	State NV	Zip Code 89801-2963
--------------	-------------	------------------------

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

Name of Employer (for Individual) Retired	Occupation (for Individual) Retired - County Mgmt / Admin
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
248.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		06		2017

**Transaction ID : 76748279**

Amount of Each Receipt this Period  
24.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	74.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 132 OF 485
	<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. SCHUBERT, WALTER R, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 997

City TROY	State NH	Zip Code 03465-0997
--------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		12		2017

**Transaction ID : 76748294**

Amount of Each Receipt this Period  
300.00

Memo Item

**B. RAGAINS, DENNIS D, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 31106 APPLE VALLEY RD

City PARMA	State ID	Zip Code 83660-6392
---------------	-------------	------------------------

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

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) FARMER
--	---------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
211.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		10		2017

**Transaction ID : 76748312**

Amount of Each Receipt this Period  
50.00

Memo Item

**C. LAWSON, BRUCE F, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 267 YOUNG ST

City EAST HAMPTON	State CT	Zip Code 06424-1849
----------------------	-------------	------------------------

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

Name of Employer (for Individual) PRATT & WHITNEY AIRCRAFT	Occupation (for Individual) ELECTRONIC TECH
---	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
258.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		24		2017

**Transaction ID : 76748313**

Amount of Each Receipt this Period  
36.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	386.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 133 OF 485
	(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. KOLESAR, JAMES S, S, MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 70 LYNN DR

City MONROE	State CT	Zip Code 06468-3118
----------------	-------------	------------------------

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

Name of Employer (for Individual) C BPT	Occupation (for Individual) ENGINEER
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
255.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		10		2017

**Transaction ID : 76748319**

Amount of Each Receipt this Period  
200.00

Memo Item

**B. RIORDAN, JAMES J, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2600 SE OCEAN BLVD APT M12

City STUART	State FL	Zip Code 34996-3458
----------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
375.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		03		2017

**Transaction ID : 76748324**

Amount of Each Receipt this Period  
100.00

Memo Item

**C. SPAIN, WILLIAM D, , MR, JR**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 191 E LAKE BLVD

City MAHOPAC	State NY	Zip Code 10541-1701
-----------------	-------------	------------------------

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

Name of Employer (for Individual) SPAIN & SPAIN, P.C.	Occupation (for Individual) ATTORNEY
--	---

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		23		2017

**Transaction ID : 76748326**

Amount of Each Receipt this Period  
500.00

Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 134 OF 485
	<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. WEBSTER, BILLIE M, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1111 UNION AVE E

City WYNNE	State AR	Zip Code 72396-3037
---------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED-MILITARY/FARMER
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
295.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		04		2017

**Transaction ID : 76748333**

Amount of Each Receipt this Period  
100.00

Memo Item

**B. KENDALL, KENNETH J, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3875 SUMMER GROVE WAY N

City JACKSONVILLE	State FL	Zip Code 32257-8878
----------------------	-------------	------------------------

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

Name of Employer (for Individual) INTL PAPER CO	Occupation (for Individual) BUS SYS SPCLST
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		03		2017

**Transaction ID : 76748345**

Amount of Each Receipt this Period  
400.00

Memo Item

**C. BARWIG, DAVID, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3572 W STONEPINE LN UNIT A

City ANAHEIM	State CA	Zip Code 92804-7618
-----------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2017

**Transaction ID : 76748349**

Amount of Each Receipt this Period  
50.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	550.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 135 OF 485
	<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"/>	<input type="checkbox"/> 17

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

**A. MCGRATH, JOHN J, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 747

City MEEKER	State CO	Zip Code 81641-0747
----------------	-------------	------------------------

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

Name of Employer (for Individual) METRO NORTH	Occupation (for Individual) RAIL ROAD WORKER
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
480.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	12	/	2017

**Transaction ID : 76748357**

Amount of Each Receipt this Period  
50.00

Memo Item

**B. MCINTYRE, ANDREW, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 447

City WASHINGTON	State VA	Zip Code 22747-0447
--------------------	-------------	------------------------

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

Name of Employer (for Individual) CITY UNIV OF NY	Occupation (for Individual) PROFESSOR
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
350.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	03	/	2017

**Transaction ID : 76748374**

Amount of Each Receipt this Period  
100.00

Memo Item

**C. JORDAN, EDWARD L, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 354 RICHARD AVE APT C4

City HICKSVILLE	State NY	Zip Code 11801-1240
--------------------	-------------	------------------------

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

Name of Employer (for Individual) AT&T INFORMATION SYS	Occupation (for Individual) SYSTEMS TECH
---	---

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
211.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	03	/	2017

**Transaction ID : 76748380**

Amount of Each Receipt this Period  
37.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	187.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 136 OF 485
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. TOWNSEND, JOHN R, , MR,</b>		Date of Receipt
Mailing Address 5092 STATE ROUTE UU		<input type="text" value="10"/> / <input type="text" value="03"/> / <input type="text" value="2017"/>
City WILLOW SPRINGS	State MO	Zip Code 65793-8240
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : 76748393</b>
Name of Employer (for Individual) WILLOW HEALTH CARE, INC.		Amount of Each Receipt this Period <input type="text" value="25.00"/>
Occupation (for Individual) PLANT MANAGER		<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="297.00"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. EVANS, BUFORD H, , MR, JR</b>		Date of Receipt
Mailing Address 135 OLD FARM RD		<input type="text" value="10"/> / <input type="text" value="19"/> / <input type="text" value="2017"/>
City MARIETTA	State GA	Zip Code 30068-3434
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : 76748413</b>
Name of Employer (for Individual) EVANS STRUCTURAL ENGINEERING, INC.		Amount of Each Receipt this Period <input type="text" value="200.00"/>
Occupation (for Individual) CEO		<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="450.00"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. CARMAN, GARY B, , MR,</b>		Date of Receipt
Mailing Address 5815 LONE HORSE DR		<input type="text" value="10"/> / <input type="text" value="19"/> / <input type="text" value="2017"/>
City RENO	State NV	Zip Code 89502-9002
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : 76748441</b>
Name of Employer (for Individual)		Amount of Each Receipt this Period <input type="text" value="250.00"/>
Occupation (for Individual) Food Scientist		<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ <input type="text" value="250.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="475.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text" value=""/>



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 137 OF 485
	(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"/> 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. HART, ROBERT B, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 214

City MENTONE	State CA	Zip Code 92359-0214
-----------------	-------------	------------------------

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

Name of Employer (for Individual) Retired	Occupation (for Individual) Retired
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		12		2017

**Transaction ID : 76748442**

Amount of Each Receipt this Period  
100.00

Memo Item

**B. SUBCLEFF, AUSTIN C, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 442 VALLEY FALLS RD

City MELROSE	State NY	Zip Code 12121-1812
-----------------	-------------	------------------------

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

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) LOGGER
--	---------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
246.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		12		2017

**Transaction ID : 76748456**

Amount of Each Receipt this Period  
37.00

Memo Item

**C. LEWIS, JOHN, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3032 GARNET MINE RD

City GARNET VALLEY	State PA	Zip Code 19061-1717
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Retired	Occupation (for Individual) none
--	-------------------------------------

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		21		2017

**Transaction ID : 76748463**

Amount of Each Receipt this Period  
100.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	237.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 138 OF 485
	<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. FINGER, ROBERT H, , MR, JR**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 12 BIRCHWOOD DR W

City SAUGERTIES	State NY	Zip Code 12477-2102
--------------------	-------------	------------------------

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

Name of Employer (for Individual) IBM CORP	Occupation (for Individual) RETIRED
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
314.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		06		2017

**Transaction ID : 76748465**

Amount of Each Receipt this Period  
25.00

Memo Item

**B. AUTRY, NANCY P, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 35 PINE RIDGE DR

City LOUISVILLE	State MS	Zip Code 39339-3502
--------------------	-------------	------------------------

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

Name of Employer (for Individual) N P AUTRY ACCOUNTING SERVICES	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
350.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		16		2017

**Transaction ID : 76748469**

Amount of Each Receipt this Period  
100.00

Memo Item

**C. HANDY, DAVID, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10 NICKLAUS DR

City GANSEVOORT	State NY	Zip Code 12831-1763
--------------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED-TEACHER
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
275.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		16		2017

**Transaction ID : 76748483**

Amount of Each Receipt this Period  
200.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	325.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 139 OF 485
<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. WENDLAND, LARRY, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 98 IRENE LN

City MOUNT SHASTA	State CA	Zip Code 96067-9773
----------------------	-------------	------------------------

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

Name of Employer (for Individual) SKINNERS ROADSIDE TRUCK REPAIR, INC.	Occupation (for Individual) DIESEL TRUCK MECHANIC
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
211.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		24		2017

**Transaction ID : 76748492**

Amount of Each Receipt this Period  
25.00

Memo Item

**B. MAIN, BART L, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1700 ROBIN LN APT 206

City LISLE	State IL	Zip Code 60532-4170
---------------	-------------	------------------------

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

Name of Employer (for Individual) Retired	Occupation (for Individual) Retired
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
325.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		11		2017

**Transaction ID : 76748499**

Amount of Each Receipt this Period  
100.00

Memo Item

**C. PRIMROSE, MICHAEL A, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 12008 IRISH MIST RD NE

City ALBUQUERQUE	State NM	Zip Code 87122-3151
---------------------	-------------	------------------------

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

Name of Employer (for Individual) FOOR SERVICES OF AMERICA	Occupation (for Individual) MANAGEMENT
---	---

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
650.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		12		2017

**Transaction ID : 76748525**

Amount of Each Receipt this Period  
50.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	175.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 140 OF 485
	<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. GASSER, ROBERT, , COL, JR**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9613 CHATHAMS FORD DR

City VIENNA	State VA	Zip Code 22182-4416
----------------	-------------	------------------------

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

Name of Employer (for Individual) US AIR FORCE	Occupation (for Individual) OFFICER
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2017

**Transaction ID : 76748537**

Amount of Each Receipt this Period  
250.00

Memo Item

**B. THINNES, JERRY, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 17905 GREENHORN RD

City GRASS VALLEY	State CA	Zip Code 95945-9348
----------------------	-------------	------------------------

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

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
225.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		16		2017

**Transaction ID : 76748550**

Amount of Each Receipt this Period  
100.00

Memo Item

**C. PURVINCE, BOB, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 20220 S 96TH ST

City HICKMAN	State NE	Zip Code 68372-9806
-----------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
525.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		03		2017

**Transaction ID : 76748576**

Amount of Each Receipt this Period  
100.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	450.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 141 OF 485
<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. HEINOLD, JAMES E, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 588 LEXINGTON DR

City SALINE	State MI	Zip Code 48176-1048
----------------	-------------	------------------------

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

Name of Employer (for Individual) EDWARD SUROVELL REALTORS	Occupation (for Individual) REALTOR
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	10	/	2017

**Transaction ID : 76748588**

Amount of Each Receipt this Period  
200.00

Memo Item

**B. ROLLINS, GREG, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10625 RESEDA BLVD

City NORTHRIDGE	State CA	Zip Code 91326-3130
--------------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
221.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	11	/	2017

**Transaction ID : 76748612**

Amount of Each Receipt this Period  
26.00

Memo Item

**C. STEPHENS, DENNIS A, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 593

City WEST BRANCH	State MI	Zip Code 48661-0593
---------------------	-------------	------------------------

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

Name of Employer (for Individual) GM TRUCK & BUS	Occupation (for Individual) FACTORY WORKER
---	---

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
240.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	04	/	2017

**Transaction ID : 76748616**

Amount of Each Receipt this Period  
20.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	246.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 142 OF 485
	<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. VENNARD, LEROY J, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 980 S HOMER RD

City MIDLAND	State MI	Zip Code 48640-8388
-----------------	-------------	------------------------

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

Name of Employer (for Individual) DESIGN CRAFTSMEN	Occupation (for Individual) RETIRED
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
480.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		10		2017

**Transaction ID : 76748627**

Amount of Each Receipt this Period  
55.00

Memo Item

**B. BRADLEY, HOWARD C, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 129 SUGARTREE CIR

City LIPAN	State TX	Zip Code 76462-4310
---------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
331.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		23		2017

**Transaction ID : 76748637**

Amount of Each Receipt this Period  
37.00

Memo Item

**C. COPELAND, JAMES A, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 78118 M 40

City LAWTON	State MI	Zip Code 49065-9467
----------------	-------------	------------------------

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

Name of Employer (for Individual) Retired	Occupation (for Individual) Retired
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
316.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		12		2017

**Transaction ID : 76748645**

Amount of Each Receipt this Period  
30.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	122.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 143 OF 485
	<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. PARMETER, MARK, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1008 SYCAMORE DR

City LAS CRUCES	State NM	Zip Code 88005-3079
--------------------	-------------	------------------------

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

Name of Employer (for Individual) J & N ELEC	Occupation (for Individual) ELECTRICIAN
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
276.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		10		2017

**Transaction ID : 76748660**

Amount of Each Receipt this Period  
55.00

Memo Item

**B. MOORE, WAYMAN J, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 93

City MEADOWBROOK	State WV	Zip Code 26404-0093
---------------------	-------------	------------------------

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

Name of Employer (for Individual) Retired	Occupation (for Individual) Retired
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
226.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		06		2017

**Transaction ID : 76748666**

Amount of Each Receipt this Period  
25.00

Memo Item

**C. MICKUS, MICHAEL J, J, MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 511

City HUBBELL	State MI	Zip Code 49934-0511
-----------------	-------------	------------------------

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

Name of Employer (for Individual) UPPER PENINSULA POWER CO	Occupation (for Individual) ELECTRICAL ENGINEER
---	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		20		2017

**Transaction ID : 76748682**

Amount of Each Receipt this Period  
200.00

Memo Item

<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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 144 OF 485
	<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. YATES, ALLEN, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 16560 MENEFEER RD

City ATHENS	State AL	Zip Code 35613-6918
----------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
445.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		11		2017

**Transaction ID : 76748683**

Amount of Each Receipt this Period  
100.00

Memo Item

**B. MORELY, THOMAS E, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8425 25TH AVE

City KENOSHA	State WI	Zip Code 53143-6280
-----------------	-------------	------------------------

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

Name of Employer (for Individual) Snap On Tools Corp.	Occupation (for Individual) Retired
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
255.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		06		2017

**Transaction ID : 76748700**

Amount of Each Receipt this Period  
100.00

Memo Item

**C. EAGAN, W RICHARD, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3 RIDERS RUN

City NEWTOWN SQUARE	State PA	Zip Code 19073-3025
------------------------	-------------	------------------------

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

Name of Employer (for Individual) Retired	Occupation (for Individual) Retired
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
255.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		11		2017

**Transaction ID : 76748708**

Amount of Each Receipt this Period  
25.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	225.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 145 OF 485
	<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. BUE, ALBERT H, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 12123 S STATE ROAD 140

City CLINTON	State WI	Zip Code 53525-8454
-----------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) ELECTRICAL ENGINEER
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
271.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2017

**Transaction ID : 76748712**

Amount of Each Receipt this Period  
25.00

Memo Item

**B. BUE, ALBERT H, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 12123 S STATE ROAD 140

City CLINTON	State WI	Zip Code 53525-8454
-----------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) ELECTRICAL ENGINEER
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
246.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		02		2017

**Transaction ID : 76748713**

Amount of Each Receipt this Period  
24.00

Memo Item

**C. FRECHTLING, ANDREW C, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1141 GREATHOUSE RD

City WAXAHACHIE	State TX	Zip Code 75167-8309
--------------------	-------------	------------------------

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

Name of Employer (for Individual) SOUTHWEST AIRLINES	Occupation (for Individual) commercial pilot
---	---

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
2000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		01		2017

**Transaction ID : 76748721**

Amount of Each Receipt this Period  
200.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	249.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 146 OF 485
	<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. DUCHARME, PAUL E, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 224 IROQUOIS AVE

City GREEN BAY	State WI	Zip Code 54301-1970
-------------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
700.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		23		2017

**Transaction ID : 76748723**

Amount of Each Receipt this Period  
100.00

Memo Item

**B. BUROW, ROBERT, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4059 MAYNARDIER RIDGE RD

City GRANTSVILLE	State MD	Zip Code 21536-2222
---------------------	-------------	------------------------

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

Name of Employer (for Individual) BUROW TRUCK LINES INC.	Occupation (for Individual) TRUCK DRIVER
---	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
336.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		05		2017

**Transaction ID : 76748735**

Amount of Each Receipt this Period  
37.00

Memo Item

**C. MATTSON, JOHN G, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3570 CYPRESS ST

City EAU CLAIRE	State WI	Zip Code 54701-7619
--------------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
264.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		03		2017

**Transaction ID : 76748736**

Amount of Each Receipt this Period  
37.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	174.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 147 OF 485
	<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. CAMPBELL, JOSEPH J, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 12317 NAVY ST

City LOS ANGELES	State CA	Zip Code 90066-1048
---------------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
605.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		10		2017

**Transaction ID : 76748739**

Amount of Each Receipt this Period  
50.00

Memo Item

**B. HENDERSON, BOBBIE D, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7350 STATE AVE APT 412

City KANSAS CITY	State KS	Zip Code 66112-3056
---------------------	-------------	------------------------

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

Name of Employer (for Individual) US POST OFFICE	Occupation (for Individual) MAILHANDLER
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
260.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		03		2017

**Transaction ID : 76748750**

Amount of Each Receipt this Period  
20.00

Memo Item

**C. HUBERT, DAN, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7740 NW ROCHESTER RD

City TOPEKA	State KS	Zip Code 66617-1947
----------------	-------------	------------------------

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

Name of Employer (for Individual) TOPEKA POLICE DEPT	Occupation (for Individual) POLICE DETECTIVE
---	---

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
262.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		11		2017

**Transaction ID : 76748756**

Amount of Each Receipt this Period  
50.00

Memo Item

<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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 148 OF 485
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

**A. YOST, JORIER, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO BOX 14  
 City OWINGS State MD Zip Code 20736-0014  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 177.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 03 / 2017  
**Transaction ID : 76748759**  
 Amount of Each Receipt this Period  
 25.00  
 Memo Item

**B. YOST, JORIER, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO BOX 14  
 City OWINGS State MD Zip Code 20736-0014  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 202.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 03 / 2017  
**Transaction ID : 76748760**  
 Amount of Each Receipt this Period  
 25.00  
 Memo Item

**C. SKINNER, JOHN E, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1604 E 60TH AVE N  
 City BELLE PLAINE State KS Zip Code 67013-8272  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 BOEING retired  
 Receipt For:  
 Primary  General  
 Other (specify)  
 Aggregate Year-to-Date ▼  
 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 23 / 2017  
**Transaction ID : 76748764**  
 Amount of Each Receipt this Period  
 100.00  
 Memo Item

<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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 149 OF 485
	<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. MILLER, CHARLES M, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2 KENSINGTON CT

City JOHNSON CITY	State TN	Zip Code 37601-9290
----------------------	-------------	------------------------

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

Name of Employer (for Individual) HAJOCA CORP	Occupation (for Individual) LABORER
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
322.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		11		2017

**Transaction ID : 76748776**

Amount of Each Receipt this Period  
25.00

Memo Item

**B. ROSE, STEPHEN R, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9240 KRISTIN LN

City FAIRFAX	State VA	Zip Code 22032-1811
-----------------	-------------	------------------------

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

Name of Employer (for Individual) USAF	Occupation (for Individual) FEDERAL OFFICER
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
216.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		23		2017

**Transaction ID : 76748780**

Amount of Each Receipt this Period  
216.00

Memo Item

**C. CARROW, RONALD L, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4131 N 60TH AVE

City OMAHA	State NE	Zip Code 68104-2712
---------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
350.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		12		2017

**Transaction ID : 76748786**

Amount of Each Receipt this Period  
50.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	291.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 150 OF 485
<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. CARL, R BARTON, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 14601 WILSON RD

City EDMOND	State OK	Zip Code 73013-1556
----------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
10		03		2017

**Transaction ID : 76748804**

Amount of Each Receipt this Period  
50.00

Memo Item

**B. RAMSEY, CLINTON T, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 163 HEMPSTEAD 1240

City NASHVILLE	State AR	Zip Code 71852-8438
-------------------	-------------	------------------------

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

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
480.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
10		06		2017

**Transaction ID : 76748808**

Amount of Each Receipt this Period  
40.00

Memo Item

**C. ECK, TERRY L, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2501 EVERITT DR

City ENID	State OK	Zip Code 73703-5237
--------------	-------------	------------------------

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

Name of Employer (for Individual) NORTHROP	Occupation (for Individual) AIRCRAFT MECH
---	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
234.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
10		19		2017

**Transaction ID : 76748817**

Amount of Each Receipt this Period  
55.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	145.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 151 OF 485
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<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. GEHRING, ROBERT A, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 183 SUNSET VIEW DR  
 City DOYLESTOWN State PA Zip Code 18901-2762  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) TRANS TECHNOLOGY CORPORATION Occupation (for Individual) FINANCE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 02 / 2017  
**Transaction ID : 76748833**  
 Amount of Each Receipt this Period  
 200.00  
 Memo Item

**B. MONSEES, WAYNE R, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1 WHEATSTON CT  
 City PRINCETON JUNCTION State NJ Zip Code 08550-1936  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 02 / 2017  
**Transaction ID : 76748844**  
 Amount of Each Receipt this Period  
 50.00  
 Memo Item

**C. SCHULTZ, NORMAN G, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 13 HOLIDAY DR  
 City HAWLEY State PA Zip Code 18428-4514  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PRENTICE HALL INC Occupation (for Individual) OFFICE WORKER  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 226.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 03 / 2017  
**Transaction ID : 76748852**  
 Amount of Each Receipt this Period  
 30.00  
 Memo Item

<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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 152 OF 485
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<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. WILLIS, DALE, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 641 COUNTY ROUTE 39  
 City CHATEAUGAY State NY Zip Code 12920-3708  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) DALE WILLIS Occupation (for Individual) DAIRY FARMER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt 10 / 03 / 2017  
**Transaction ID : 76748856**  
 Amount of Each Receipt this Period 37.00  
 Memo Item

**B. CASTRET, CARL W, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 13629 BELMEADE AVE  
 City GRANDVIEW State MO Zip Code 64030-3729  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Essendant Occupation (for Individual) Shelf Stocker  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 426.00

Date of Receipt 10 / 04 / 2017  
**Transaction ID : 76748857**  
 Amount of Each Receipt this Period 55.00  
 Memo Item

**C. FOGLE, CHARLES, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 522 W OIL ST  
 City MONTPELIER State IN Zip Code 47359-1245  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 296.00

Date of Receipt 10 / 06 / 2017  
**Transaction ID : 76748869**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	117.00
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 153 OF 485
	<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. LOGAN, JOSEPH M, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 207 COLORADO TRL

City BROWNS MILLS	State NJ	Zip Code 08015-5603
----------------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
205.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		03		2017

**Transaction ID : 76748880**

Amount of Each Receipt this Period  
55.00

Memo Item

**B. RILEY, DANIEL W, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 33 GREENVALE RD

City CHERRY HILL	State NJ	Zip Code 08034-1703
---------------------	-------------	------------------------

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

Name of Employer (for Individual) FAA Technical Center	Occupation (for Individual) Retired - Engineer
---	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
235.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		23		2017

**Transaction ID : 76748881**

Amount of Each Receipt this Period  
20.00

Memo Item

**C. ZAMBONE, ALBERT S, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1122 E LANDIS AVE

City VINELAND	State NJ	Zip Code 08360-4114
------------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
745.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		05		2017

**Transaction ID : 76748900**

Amount of Each Receipt this Period  
120.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	195.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 154 OF 485
	<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. LONG, THOMAS R, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 640 WINDWARD PT

City LENOIR CITY	State TN	Zip Code 37772-4576
---------------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
398.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		04		2017

**Transaction ID : 76748923**

Amount of Each Receipt this Period  
37.00

Memo Item

**B. WHARTON, WILLIAM, , MR, JR**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 544

City LAKE PLEASANT	State NY	Zip Code 12108-0544
-----------------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED-MECHANIC
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
360.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		12		2017

**Transaction ID : 76748924**

Amount of Each Receipt this Period  
160.00

Memo Item

**C. MARTIN, EDWARD S, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1046 WOODBERRY RD

City NEW KENSINGTON	State PA	Zip Code 15068-5308
------------------------	-------------	------------------------

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

Name of Employer (for Individual) ALCOA	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		13		2017

**Transaction ID : 76748929**

Amount of Each Receipt this Period  
300.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	497.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 155 OF 485
	<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. MARTIN, EDWARD S, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1046 WOODBERRY RD

City NEW KENSINGTON	State PA	Zip Code 15068-5308
------------------------	-------------	------------------------

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

Name of Employer (for Individual) ALCOA	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1900.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		30		2017

**Transaction ID : 76748930**

Amount of Each Receipt this Period  
300.00

Memo Item

**B. MARTIN, EDWARD S, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1046 WOODBERRY RD

City NEW KENSINGTON	State PA	Zip Code 15068-5308
------------------------	-------------	------------------------

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

Name of Employer (for Individual) ALCOA	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1600.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		23		2017

**Transaction ID : 76748931**

Amount of Each Receipt this Period  
600.00

Memo Item

**C. WHALL, CLIFFORD W, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 28W526 JUANITA DR

City NAPERVILLE	State IL	Zip Code 60564-9610
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
325.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		10		2017

**Transaction ID : 76748932**

Amount of Each Receipt this Period  
100.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1000.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 156 OF 485
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<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. LANYI, ROBERT J, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2361 GUFFEY RD  
 City N HUNTINGDON State PA Zip Code 15642-2965  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) The Fight Company Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 217.00

Date of Receipt 10 / 10 / 2017  
**Transaction ID : 76748944**  
 Amount of Each Receipt this Period 40.00  
 Memo Item

**B. MOSTOLLER, ADRIAN L, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1500 FOX BRANCH LN  
 City BASTIAN State VA Zip Code 24314-5055  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt 10 / 04 / 2017  
**Transaction ID : 76748948**  
 Amount of Each Receipt this Period 55.00  
 Memo Item

**C. BARNES, HARRY W, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 215 BROOKSIDE BLVD  
 City PITTSBURGH State PA Zip Code 15241-1511  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) BARNES CORP Occupation (for Individual) ACCOUNTANT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 562.00

Date of Receipt 10 / 12 / 2017  
**Transaction ID : 76748950**  
 Amount of Each Receipt this Period 150.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	245.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 157 OF 485
	<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. BARNES, HARRY W, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 215 BROOKSIDE BLVD

City PITTSBURGH	State PA	Zip Code 15241-1511
--------------------	-------------	------------------------

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

Name of Employer (for Individual) BARNES CORP	Occupation (for Individual) ACCOUNTANT
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
662.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		30		2017

**Transaction ID : 76748951**

Amount of Each Receipt this Period  
100.00

Memo Item

**B. KARWATSKE, MICHAEL, , MR, JR**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 239 AMEND RD

City UNIONTOWN	State PA	Zip Code 15401-6861
-------------------	-------------	------------------------

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

Name of Employer (for Individual) ALBERT GALLATIN AREA SCHLS	Occupation (for Individual) TEACHER
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
223.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		02		2017

**Transaction ID : 76748956**

Amount of Each Receipt this Period  
25.00

Memo Item

**C. FOSTER, RICHARD A, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 233 W 5TH ST

City EMPORIUM	State PA	Zip Code 15834-1009
------------------	-------------	------------------------

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

Name of Employer (for Individual) CALDWELL CORP	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
650.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		12		2017

**Transaction ID : 76748976**

Amount of Each Receipt this Period  
200.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	325.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 158 OF 485
	<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. PATON, JOHN G, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 191

City CRAWFORD	State CO	Zip Code 81415-0191
------------------	-------------	------------------------

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

Name of Employer (for Individual) CRAWFORD COUNTRY GUNSMITHING	Occupation (for Individual) GUNSMITH
---	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
650.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		06		2017

**Transaction ID : 76748997**

Amount of Each Receipt this Period  
100.00

Memo Item

**B. BALDWIN, ROBERT C, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 432 E IRVIN AVE

City STATE COLLEGE	State PA	Zip Code 16801-6601
-----------------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
244.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		03		2017

**Transaction ID : 76749003**

Amount of Each Receipt this Period  
37.00

Memo Item

**C. ROTH, BRUCE, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 3

City TUSCARAWAS	State OH	Zip Code 44682-0003
--------------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED ? PLUMBER - PIPEFITTER
--	---

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
277.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		16		2017

**Transaction ID : 76749007**

Amount of Each Receipt this Period  
50.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	187.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 159 OF 485
	<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	<input type="checkbox"/> 17

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

**A. PEREZ, OWEN W, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1300 WALNUT GROVE AVE

City ROSEMEAD	State CA	Zip Code 91770-3708
------------------	-------------	------------------------

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

Name of Employer (for Individual) retired	Occupation (for Individual) retired
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		06		2017

**Transaction ID : 76749010**

Amount of Each Receipt this Period  
250.00

Memo Item

**B. HARRER, WAYNE E, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 1423

City WEST CHESTER	State OH	Zip Code 45071-1423
----------------------	-------------	------------------------

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

Name of Employer (for Individual) GE AVIATION	Occupation (for Individual) RETIRED - MECHANICAL ENGINEER
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
210.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		06		2017

**Transaction ID : 76749025**

Amount of Each Receipt this Period  
25.00

Memo Item

**C. RONALD, CHRIS, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1884 FRENCH CREEK MINA RD

City CLYMER	State NY	Zip Code 14724-9652
----------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
219.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		23		2017

**Transaction ID : 76749050**

Amount of Each Receipt this Period  
37.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	312.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 160 OF 485
	<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. SMITHGALL, CHARLES W, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 534 W LEMON ST

City LANCASTER	State PA	Zip Code 17603-3323
-------------------	-------------	------------------------

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

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) PHARMACIST
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
261.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		02		2017

**Transaction ID : 76749057**

Amount of Each Receipt this Period  
25.00

Memo Item

**B. WOOD, FRANKLIN D, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 1325

City MOUNTAIN VIEW	State AR	Zip Code 72560-1325
-----------------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
275.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		10		2017

**Transaction ID : 76749058**

Amount of Each Receipt this Period  
25.00

Memo Item

**C. PETRACHONIS, JOSEPH E, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 82 CEMETERY HL

City RINGTOWN	State PA	Zip Code 17967-9758
------------------	-------------	------------------------

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

Name of Employer (for Individual) PA POWER & LIGHT	Occupation (for Individual) JOURNEYMAN LIVEMAN
---	---

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
440.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		10		2017

**Transaction ID : 76749068**

Amount of Each Receipt this Period  
40.00

Memo Item

<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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 161 OF 485
	<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. JADUSH, JOHN J, , MR, JR**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4207 BAUM PL

City TEMPLE	State PA	Zip Code 19560-1719
----------------	-------------	------------------------

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

Name of Employer (for Individual) PA GAME COMMISSION	Occupation (for Individual) DISPATCHER
---	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
289.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		23		2017

**Transaction ID : 76749069**

Amount of Each Receipt this Period  
26.00

Memo Item

**B. HELMS, GARY L, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 745 FINADY AVE

City BETHLEHEM	State PA	Zip Code 18015-2714
-------------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) Disabled-Retired
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
239.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2017

**Transaction ID : 76749070**

Amount of Each Receipt this Period  
25.00

Memo Item

**C. RUTT, RICHARD T, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 233

City WIND GAP	State PA	Zip Code 18091-0233
------------------	-------------	------------------------

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

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) CONSULTING ENGINEER
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
225.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		10		2017

**Transaction ID : 76749075**

Amount of Each Receipt this Period  
100.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	151.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 162 OF 485
	<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. TILLEMA, DOWE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6431 FOREST LAKE RD  
 City LAND O LAKES State WI Zip Code 54540-9760  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) EASTBAY, INC. Occupation (for Individual) OPERATIONS PROFESSIONAL  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1800.00

Date of Receipt 10 / 12 / 2017  
**Transaction ID : 76749094**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item

**B. MEYER, DORIS, , MS,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 16 BIVONA LN LOT 39  
 City NEW WINDSOR State NY Zip Code 12553-7222  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt 10 / 16 / 2017  
**Transaction ID : 76749095**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**C. HOLLOWAY, WADE, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 409 W BOOTH RD  
 City SEARCY State AR Zip Code 72143-8887  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) STRUCTURAL INTEGRITY ASSC Occupation (for Individual) NDE TECH LEVEL III  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt 10 / 10 / 2017  
**Transaction ID : 76749096**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1050.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 163 OF 485
	<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. STEVENSON, ALAN L., MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1002 TAYLOR AVE

City WEST CHESTER	State PA	Zip Code 19380-6036
----------------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
334.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		10		2017

**Transaction ID : 76749129**

Amount of Each Receipt this Period  
25.00

Memo Item

**B. ZERBE, JAMES, MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3524 FREMONT ST

City READING	State PA	Zip Code 19605-1836
-----------------	-------------	------------------------

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

Name of Employer (for Individual) Retired	Occupation (for Individual) Retired
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
232.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		03		2017

**Transaction ID : 76749154**

Amount of Each Receipt this Period  
25.00

Memo Item

**C. PADGETT, DIANNE B., MS,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10803 BURGOYNE RD

City HOUSTON	State TX	Zip Code 77042-2719
-----------------	-------------	------------------------

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

Name of Employer (for Individual) Padgett Exploration	Occupation (for Individual) Consulting Geophysicist
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		20		2017

**Transaction ID : 76749162**

Amount of Each Receipt this Period  
200.00

Memo Item

<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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 164 OF 485
	<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. PEER, RANDY, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9408 SUNSET DR

City ATWATER	State CA	Zip Code 95301-5208
-----------------	-------------	------------------------

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

Name of Employer (for Individual) STATE OF CALIFORNIA	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
450.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		06		2017

**Transaction ID : 76749170**

Amount of Each Receipt this Period  
100.00

Memo Item

**B. KNAPP, LOUIS H, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 110 WESTBURY PL

City WINCHESTER	State VA	Zip Code 22603-8679
--------------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		02		2017

**Transaction ID : 76749172**

Amount of Each Receipt this Period  
100.00

Memo Item

**C. JONES, JOHN M, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2480 PROPHECY RD

City MIDDLESEX	State NC	Zip Code 27557-8031
-------------------	-------------	------------------------

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

Name of Employer (for Individual) US GOVT	Occupation (for Individual) CIVIL SERVICE
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
575.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		05		2017

**Transaction ID : 76749180**

Amount of Each Receipt this Period  
55.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	255.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 165 OF 485
	<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. MARTINO, FRANK W, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 401 DALE RD

City MILLERSVILLE	State MD	Zip Code 21108-2022
----------------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		11		2017

**Transaction ID : 76749188**

Amount of Each Receipt this Period  
50.00

Memo Item

**B. MARTINO, FRANK W, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 401 DALE RD

City MILLERSVILLE	State MD	Zip Code 21108-2022
----------------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
353.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2017

**Transaction ID : 76749189**

Amount of Each Receipt this Period  
48.00

Memo Item

**C. MARTINO, FRANK W, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 401 DALE RD

City MILLERSVILLE	State MD	Zip Code 21108-2022
----------------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
305.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		22		2017

**Transaction ID : 76749190**

Amount of Each Receipt this Period  
55.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	153.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 166 OF 485
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

**A. HOULEHAN, JOHN J., MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6917 NW 76TH PL  
 City KANSAS CITY State MO Zip Code 64152-2279  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 10 / 04 / 2017  
**Transaction ID : 76749195**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**B. GOSSON, ROBERT G., MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 144 DOE RUN RD  
 City GUN BARREL CITY State TX Zip Code 75156-3519  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 276.00

Date of Receipt 10 / 06 / 2017  
**Transaction ID : 76749224**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**C. NETZER, RUDOLPH P., MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8505 S 200 E  
 City HAMLET State IN Zip Code 46532-9672  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Employed Occupation (for Individual) Farming  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 317.00

Date of Receipt 10 / 20 / 2017  
**Transaction ID : 76749232**  
 Amount of Each Receipt this Period 55.00  
 Memo Item

<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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 167 OF 485
	<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. BOLTON, DWIGHT E, E, MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 630 ALFORD RD

City ELLENSBURG	State WA	Zip Code 98926-7313
--------------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
240.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2017

**Transaction ID : 76749243**

Amount of Each Receipt this Period  
55.00

Memo Item

**B. PEBERDY, JAMES N, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 249 BROOK RD

City BARNESVILLE	State GA	Zip Code 30204-3371
---------------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
297.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		12		2017

**Transaction ID : 76749248**

Amount of Each Receipt this Period  
25.00

Memo Item

**C. STUAN, TERRY D, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8349 MORNING GRV

City CONVERSE	State TX	Zip Code 78109-3443
------------------	-------------	------------------------

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

Name of Employer (for Individual) G.E. REAVES ENGINEERING INC	Occupation (for Individual) ENGINEER
--	---

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
201.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		10		2017

**Transaction ID : 76749251**

Amount of Each Receipt this Period  
25.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	105.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 168 OF 485
	<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	<input type="checkbox"/> 17

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

**A. SWINNEY, PAUL G., DR.**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO BOX 131990  
 City TYLER State TX Zip Code 75713-1990  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) RETIRED - DENTIST  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 235.00

Date of Receipt 10 / 11 / 2017  
**Transaction ID : 76749255**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**B. KELLEY, KEVIN E., MR.**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8524 CYRUS AVE  
 City ROME State NY Zip Code 13440-9355  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) WAL-MART Occupation (for Individual) LOGISTICS  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 222.00

Date of Receipt 10 / 17 / 2017  
**Transaction ID : 76749257**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**C. VECCHIE, RONALD J., MR.**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1121 LOCUST ST # 3424  
 City QUINCY State IL Zip Code 62301-1919  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Refreshment Services, Inc. Occupation (for Individual) Vice President  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 251.00

Date of Receipt 10 / 24 / 2017  
**Transaction ID : 76749283**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... 175.00  
**TOTAL** This Period (last page this line number only).....



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 169 OF 485
	<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. WEBSTER, DAVID, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4L MATTHEW DR

City DERRY	State NH	Zip Code 03038-7228
---------------	-------------	------------------------

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

Name of Employer (for Individual)	Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	13	/	2017

**Transaction ID : 76749288**

Amount of Each Receipt this Period  
50.00

Memo Item

**B. ALLEN, CARL W, W, MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 621 6TH ST

City NEVADA	State IA	Zip Code 50201-2213
----------------	-------------	------------------------

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

Name of Employer (for Individual) IOWA DOT	Occupation (for Individual) DESIGN TECH
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
234.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	03	/	2017

**Transaction ID : 76749290**

Amount of Each Receipt this Period  
20.00

Memo Item

**C. HEIN, JIM, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4326 EL RANCHO DR

City DAVENPORT	State IA	Zip Code 52806-4822
-------------------	-------------	------------------------

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

Name of Employer (for Individual) STATE OF IOWA	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
239.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	12	/	2017

**Transaction ID : 76749299**

Amount of Each Receipt this Period  
25.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	95.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 170 OF 485
	<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. BANAS, PAUL, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 210 SW MIDDEN REACH

City DEPOE BAY	State OR	Zip Code 97341-9539
-------------------	-------------	------------------------

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

Name of Employer (for Individual) QINETIQ NORTH AMERICA, INC	Occupation (for Individual) MANAGER
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
209.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		04		2017

**Transaction ID : 76749311**

Amount of Each Receipt this Period  
55.00

Memo Item

**B. HOLEM, ROBERT L, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 19134 W KELLY RD

City LAKE VILLA	State IL	Zip Code 60046-9673
--------------------	-------------	------------------------

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

Name of Employer (for Individual) STATE OF ILLINOIS	Occupation (for Individual) RETIRED - STATE POLICE
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		12		2017

**Transaction ID : 76749328**

Amount of Each Receipt this Period  
25.00

Memo Item

**C. MOREHOUSE, KEITH J, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 830

City OLATHE	State CO	Zip Code 81425-0830
----------------	-------------	------------------------

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

Name of Employer (for Individual) NORTHROP CORP	Occupation (for Individual) ENGINEER
--	---

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
355.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		20		2017

**Transaction ID : 76749330**

Amount of Each Receipt this Period  
100.00

Memo Item

<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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 171 OF 485
	<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. LAYA, GREG, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 360865

City COLUMBUS	State OH	Zip Code 43236-0865
------------------	-------------	------------------------

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

Name of Employer (for Individual) AIRNET SYSTEMS INC.	Occupation (for Individual) AVIATION MAINTENANCE TECH
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
477.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
10		10		2017

**Transaction ID : 76749338**

Amount of Each Receipt this Period  
80.00

Memo Item

**B. BARCUS, PHIL, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 260 E COUNTY ROAD 200 N

City CENTERPOINT	State IN	Zip Code 47840-8289
---------------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
330.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
10		11		2017

**Transaction ID : 76749377**

Amount of Each Receipt this Period  
55.00

Memo Item

**C. GREGULE, GEORGE J, , MR, JR**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5960 GRAND MERE RD

City STEVENSVILLE	State MI	Zip Code 49127-9735
----------------------	-------------	------------------------

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

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
220.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
10		24		2017

**Transaction ID : 76749378**

Amount of Each Receipt this Period  
30.00

Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 172 OF 485
	<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. JACOBSEN, GARY E, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10803 POTOMAC DR

City DEMOTTE	State IN	Zip Code 46310-8206
-----------------	-------------	------------------------

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

Name of Employer (for Individual) THE BUILDING DOCTOR, ESQ.	Occupation (for Individual) CONSTRUCTION / REMODELING
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		03		2017

**Transaction ID : 76749394**

Amount of Each Receipt this Period  
100.00

Memo Item

**B. JURITZ, MICHAEL, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9706 BIANCO TER APT F

City DES PLAINES	State IL	Zip Code 60016-1688
---------------------	-------------	------------------------

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

Name of Employer (for Individual) NI TEC INC	Occupation (for Individual) SCHEDULE MED COORD
---	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
309.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		11		2017

**Transaction ID : 76749397**

Amount of Each Receipt this Period  
25.00

Memo Item

**C. KRAKLAU, DENNIS, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10642 COUNTY ROAD 144

City BRAINERD	State MN	Zip Code 56401-1823
------------------	-------------	------------------------

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

Name of Employer (for Individual) Retired	Occupation (for Individual) Retired
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
490.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		11		2017

**Transaction ID : 76749414**

Amount of Each Receipt this Period  
250.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	375.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 173 OF 485
	<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. COUNTERMAN, DAVID J, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1106 DIANE LN

City PEKIN	State IL	Zip Code 61554-4573
---------------	-------------	------------------------

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

Name of Employer (for Individual) GALLATIN RIVER COMM	Occupation (for Individual) TELEPHONE REPAIRMAN
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
322.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		04		2017

**Transaction ID : 76749416**

Amount of Each Receipt this Period  
25.00

Memo Item

**B. HUTSON, MARK A, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1608 SIX POINTS RD

City BLOOMINGTON	State IL	Zip Code 61701-9518
---------------------	-------------	------------------------

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

Name of Employer (for Individual) BOB ZOOK AUTO BODY INC	Occupation (for Individual) BODY/FRAME TECH
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
285.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		10		2017

**Transaction ID : 76749418**

Amount of Each Receipt this Period  
25.00

Memo Item

**C. HUSSAR, EMMET O, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 103A KENT DR

City CATLIN	State IL	Zip Code 61817-9619
----------------	-------------	------------------------

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

Name of Employer (for Individual) GENERAL MOTORS COMPANY	Occupation (for Individual) FDRY WORKER
---	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
237.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		03		2017

**Transaction ID : 76749420**

Amount of Each Receipt this Period  
30.00

Memo Item

<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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 174 OF 485
	<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. CORSON, VICTOR D, D, MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 575 CORSON RD

City HENDERSON	State TN	Zip Code 38340-3417
-------------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
225.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		21		2017

**Transaction ID : 76749424**

Amount of Each Receipt this Period  
25.00

Memo Item

**B. ELLIS, JACK W, W, MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 504 W SOUTH AVE

City GREENVILLE	State IL	Zip Code 62246-1621
--------------------	-------------	------------------------

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

Name of Employer (for Individual) Retired	Occupation (for Individual) Retired
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
266.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		06		2017

**Transaction ID : 76749431**

Amount of Each Receipt this Period  
37.00

Memo Item

**C. EARLEY, JOHN P, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 316 GROVELAND DR

City MICHIANA SHORES	State IN	Zip Code 46360-1273
-------------------------	-------------	------------------------

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

Name of Employer (for Individual) INTERNATIONAL STEEL GROUP	Occupation (for Individual) STEELWORKER
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
239.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		11		2017

**Transaction ID : 76749445**

Amount of Each Receipt this Period  
55.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	117.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 175 OF 485
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

**A. SCHENAKER, JACK H, , COL,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3267 DORCICH ST  
 City SANTA CLARA State CA Zip Code 95050-2114  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 10 / 16 / 2017  
**Transaction ID : 76749458**  
 Amount of Each Receipt this Period 55.00  
 Memo Item

**B. FOSTER, BOB, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 116 CHARMING HEIGHTS DR  
 City HOT SPRINGS NATIONAL State AR Zip Code 71913-9061  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 16 / 2017  
**Transaction ID : 76749459**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**C. PIEPER, DAVID C, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 18290 E HARVARD PL  
 City AURORA State CO Zip Code 80013-5918  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 283.00

Date of Receipt 10 / 06 / 2017  
**Transaction ID : 76749466**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

<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) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 176 OF 485
	(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"/> 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. BAKIEROWSKI, WACLAW K, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1145 DUCK TRL  
 City HALIFAX State VA Zip Code 24558-2481  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) US GOVERNMENT Occupation (for Individual) GOVERNMENT SERVICE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 410.00

Date of Receipt 10 / 04 / 2017  
**Transaction ID : 76749469**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**B. PEARSONS, RICHARD, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4826 N LONGWORTH AVE  
 City INDIANAPOLIS State IN Zip Code 46226-2830  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 10 / 16 / 2017  
**Transaction ID : 76749470**  
 Amount of Each Receipt this Period 120.00  
 Memo Item

**C. CORNWELL, GARY D, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1794 CR 2300N  
 City ARTHUR State IL Zip Code 61911-6089  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CATERPILLAR, INC Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 272.00

Date of Receipt 10 / 03 / 2017  
**Transaction ID : 76749471**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	195.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 177 OF 485
	<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. WEED, WILLIAM H, , MR, III**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7406 GALANIS DR

City ANNANDALE	State VA	Zip Code 22003-2542
-------------------	-------------	------------------------

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

Name of Employer (for Individual) KEYW CORP.	Occupation (for Individual) ANALYST
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
322.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		10		2017

**Transaction ID : 76749472**

Amount of Each Receipt this Period  
20.00

Memo Item

**B. WAGONER, CHARLES, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 118 N 3RD AVE

City DES PLAINES	State IL	Zip Code 60016-2331
---------------------	-------------	------------------------

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

Name of Employer (for Individual) Maine Twp High School Dist 207	Occupation (for Individual) Retired
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		06		2017

**Transaction ID : 76749486**

Amount of Each Receipt this Period  
25.00

Memo Item

**C. RICHARDS, WILLIAM H, , MR, JR**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7253 BOTETOVRT AVE

City GLOUCESTER	State VA	Zip Code 23061-5103
--------------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
460.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		06		2017

**Transaction ID : 76749520**

Amount of Each Receipt this Period  
50.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	95.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 178 OF 485
	<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. MITCHELL, ROBERT G, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 165

City RURAL RETREAT	State VA	Zip Code 24368-0165
-----------------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
224.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		23		2017

**Transaction ID : 76749540**

Amount of Each Receipt this Period  
24.00

Memo Item

**B. MITCHELL, ROBERT G, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 165

City RURAL RETREAT	State VA	Zip Code 24368-0165
-----------------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		23		2017

**Transaction ID : 76749541**

Amount of Each Receipt this Period  
26.00

Memo Item

**C. MITCHELL, ROBERT G, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 165

City RURAL RETREAT	State VA	Zip Code 24368-0165
-----------------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
275.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		23		2017

**Transaction ID : 76749542**

Amount of Each Receipt this Period  
25.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	75.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 179 OF 485
	<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. BUNGARD, HOWARD L, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 503 LIPPENCOTT RD

City WAYNESBURG	State PA	Zip Code 15370-2643
--------------------	-------------	------------------------

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

Name of Employer (for Individual) GREEN COUNTRY MEMORIAL HOSPITA	Occupation (for Individual) MAINTENANCE
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
991.94

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		05		2017

**Transaction ID : 76749575**

Amount of Each Receipt this Period  
55.00

Memo Item

**B. SNIDER, JAMES F, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 66 KIT DR

City NEW CUMBERLAND	State WV	Zip Code 26047-1795
------------------------	-------------	------------------------

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

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) BUS DRIVER
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
221.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		10		2017

**Transaction ID : 76749577**

Amount of Each Receipt this Period  
37.00

Memo Item

**C. LOOMIS, RICHARD B, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7303 OLD ROUTE 73

City BRUCETON MILLS	State WV	Zip Code 26525-5351
------------------------	-------------	------------------------

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

Name of Employer (for Individual) Retired	Occupation (for Individual) Retired
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		06		2017

**Transaction ID : 76749588**

Amount of Each Receipt this Period  
125.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	217.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 180 OF 485
	<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	<input type="checkbox"/> 17

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

**A. MCCAMEY, EDDIE, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 730 BROWNS BRIDGE RD

City GREENEVILLE	State TN	Zip Code 37745-3738
---------------------	-------------	------------------------

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

Name of Employer (for Individual) Retired	Occupation (for Individual) Retired
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
267.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		04		2017

**Transaction ID : 76749590**

Amount of Each Receipt this Period  
25.00

Memo Item

**B. HILL, GERALD L, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3912 75TH PL

City LUBBOCK	State TX	Zip Code 79423-1128
-----------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED - PHYSICIAN
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
380.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		04		2017

**Transaction ID : 76749609**

Amount of Each Receipt this Period  
100.00

Memo Item

**C. PEKRUN, KENNETH W, W, MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 112 BRADFORD LN

City MANTEO	State NC	Zip Code 27954-9227
----------------	-------------	------------------------

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

Name of Employer (for Individual) DARE COUNTY BOARD OF EDUCATION	Occupation (for Individual) ELECTRICIAN
---	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
312.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		06		2017

**Transaction ID : 76749610**

Amount of Each Receipt this Period  
25.00

Memo Item

<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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 181 OF 485
	<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. SPOONS, HAROLD, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 10725 JOYCE CT  
 City FREDERICKSBURG State VA Zip Code 22407-7723  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 331.00

Date of Receipt **10 / 11 / 2017**  
**Transaction ID : 76749616**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**B. STUCK, ROBERT M, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 17 OLD STAGE TRL  
 City CLOVER State SC Zip Code 29710-8931  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) MAS Occupation (for Individual) ENGINEER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt **10 / 20 / 2017**  
**Transaction ID : 76749619**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**C. HOHING, CONRAD, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 803 FAIRFIELD RD  
 City FAYETTEVILLE State NC Zip Code 28303-5332  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 299.00

Date of Receipt **10 / 02 / 2017**  
**Transaction ID : 76749621**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	325.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 182 OF 485
	<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. FREY, EUGENE W, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3675 SPRINGETTS DR

City YORK	State PA	Zip Code 17406-7022
--------------	-------------	------------------------

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

Name of Employer (for Individual)	Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		02		2017

**Transaction ID : 76749622**

Amount of Each Receipt this Period  
100.00

Memo Item

**B. BIANCHI, TRAVIS L, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2727 CEDAR CREEK RD

City BLYTHEWOOD	State SC	Zip Code 29016-8153
--------------------	-------------	------------------------

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

Name of Employer (for Individual) US POSTAL SERVICE	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		10		2017

**Transaction ID : 76749637**

Amount of Each Receipt this Period  
250.00

Memo Item

**C. BULLIONS, ANDREW C, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 140 LOFTIS DR

City PELZER	State SC	Zip Code 29669-9255
----------------	-------------	------------------------

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

Name of Employer (for Individual) BAILEY CONTROLS CO	Occupation (for Individual) SALES ENGINEER
---	---

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
254.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2017

**Transaction ID : 76749650**

Amount of Each Receipt this Period  
37.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	387.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 183 OF 485
	<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**

**A. JOHNSTON, MILTON K, , MR, JR**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1341 DAPHNE LN NW

City ACWORTH	State GA	Zip Code 30101-7872
-----------------	-------------	------------------------

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

Name of Employer (for Individual) US GOVERNMENT	Occupation (for Individual) CIVIL SERVANT
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
10		16		2017

**Transaction ID : 76749656**

Amount of Each Receipt this Period  
37.00

Memo Item

**B. BRITAIN, JOHNNY M, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6071 GOLDEN LNDG

City CANTON	State GA	Zip Code 30114-8962
----------------	-------------	------------------------

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

Name of Employer (for Individual) GENERAL MOTORS	Occupation (for Individual) PIPEFITTER
---	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
253.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
10		06		2017

**Transaction ID : 76749661**

Amount of Each Receipt this Period  
55.00

Memo Item

**C. SEWELL, WILLIAM G, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 299

City BREMEN	State GA	Zip Code 30110-0299
----------------	-------------	------------------------

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

Name of Employer (for Individual) Retired	Occupation (for Individual) Retired
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
396.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
10		06		2017

**Transaction ID : 76749666**

Amount of Each Receipt this Period  
99.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	191.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 184 OF 485
	<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. BARRON, CHARLES, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 256 MCKINNON TRL

City CARROLLTON	State GA	Zip Code 30116-9050
--------------------	-------------	------------------------

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

Name of Employer (for Individual) Mike Bell Chevrolet	Occupation (for Individual) Parts Manager
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
232.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		16		2017

**Transaction ID : 76749667**

Amount of Each Receipt this Period  
25.00

Memo Item

**B. GRIFFIN, BURTON, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8249 LITTLE HOMINY RDG

City FLORENCE	State IN	Zip Code 47020-9680
------------------	-------------	------------------------

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

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
404.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		16		2017

**Transaction ID : 76749671**

Amount of Each Receipt this Period  
37.00

Memo Item

**C. TURNER, CHARLES J, , MR, JR**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 900 N ISLAND DR

City ATLANTA	State GA	Zip Code 30327-4624
-----------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
525.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		12		2017

**Transaction ID : 76749677**

Amount of Each Receipt this Period  
200.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	262.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 185 OF 485
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

**A. ARCURI, JOSEPH P, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4432 ROXBURY DR  
 City EVANS State GA Zip Code 30809-3252  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) AIRESEARCH AVIATION CO Occupation (for Individual) SVC MGR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 241.00

Date of Receipt 10 / 23 / 2017  
**Transaction ID : 76749682**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**B. WEDDALL, EDWIN C, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4706 105TH CT  
 City URBANDALE State IA Zip Code 50322-6312  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) IMPACC Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 330.00

Date of Receipt 10 / 04 / 2017  
**Transaction ID : 76749685**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**C. STUHMER, RICHARD T, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 136 HEATHER DR  
 City OZARK State AL Zip Code 36360-9220  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PAN AM SUPPORT SERVICES Occupation (for Individual) FLIGHT INSTRUCTOR  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt 10 / 22 / 2017  
**Transaction ID : 76749712**  
 Amount of Each Receipt this Period 55.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional).....▶ 105.00  
**TOTAL** This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 186 OF 485
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

**A. COLLINGS, ROBERT A, , MR, JR**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 532 WATTS HILL RD  
 City HONESDALE State PA Zip Code 18431-4143  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 232.00

Date of Receipt 10 / 16 / 2017  
**Transaction ID : 76749724**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**B. KAZLAUSKAS, RONALD, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2 HOMESTEAD AVE  
 City OXFORD State MA Zip Code 01540-1608  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) TRADE SOURCE, INC. Occupation (for Individual) CARPENTER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 10 / 11 / 2017  
**Transaction ID : 76749735**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**C. HUGHES, STEVE, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1707 300TH ST  
 City HAMILTON State KS Zip Code 66853-8809  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) RANCHER  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 10 / 10 / 2017  
**Transaction ID : 76749736**  
 Amount of Each Receipt this Period 55.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	75.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 187 OF 485
	<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. FENDER, JOHN L, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1040 CHRIS DALE DR

City SEYMOUR	State TN	Zip Code 37865-3208
-----------------	-------------	------------------------

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

Name of Employer (for Individual) TENNESSEE VALLEY AUTHORITY	Occupation (for Individual) RETIRED
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
329.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		10		2017

**Transaction ID : 76749737**

Amount of Each Receipt this Period  
25.00

Memo Item

**B. BROWN, CHARLES R, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7163 STATE LINE RD

City SOUTH FULTON	State TN	Zip Code 38257-7158
----------------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
272.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		06		2017

**Transaction ID : 76749744**

Amount of Each Receipt this Period  
35.00

Memo Item

**C. CARTER, JAMES T, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3244 SUNRISE ST

City MEMPHIS	State TN	Zip Code 38127-1440
-----------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
296.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		06		2017

**Transaction ID : 76749746**

Amount of Each Receipt this Period  
25.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	85.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 188 OF 485
	<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. SIMPKINS, RICHARD, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 48439 SNAP DRAGON LN

City FORT MILL	State SC	Zip Code 29707-5833
-------------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
202.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		10		2017

**Transaction ID : 76749758**

Amount of Each Receipt this Period  
37.00

Memo Item

**B. HIGDON, GEORGE L, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 1016

City WESSON	State MS	Zip Code 39191-1016
----------------	-------------	------------------------

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

Name of Employer (for Individual) Retired	Occupation (for Individual) Retired
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
320.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		16		2017

**Transaction ID : 76749762**

Amount of Each Receipt this Period  
55.00

Memo Item

**C. KIEFF, ARTHUR O, , MR, JR**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 16800 THRASHER LN

City OCEAN SPRINGS	State MS	Zip Code 39565-7307
-----------------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
217.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		04		2017

**Transaction ID : 76749767**

Amount of Each Receipt this Period  
36.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	128.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 189 OF 485
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<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. EISCHEID, ROBERT, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 228 S LINN AVE  
 City NEW HAMPTON State IA Zip Code 50659-2020  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) LYNCH LIVESTOCK Occupation (for Individual) MECHANIC  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 330.00

Date of Receipt 10 / 06 / 2017  
**Transaction ID : 76749768**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**B. STURTEVANT, LESLIE O, , MR, JR**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 424 HANLEY RD  
 City OCEAN SPRINGS State MS Zip Code 39564-4239  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 261.00

Date of Receipt 10 / 18 / 2017  
**Transaction ID : 76749769**  
 Amount of Each Receipt this Period 37.00  
 Memo Item

**C. ROBINETTE, KENNETH M, , MR, JR**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7695 BLACK BEAR PT  
 City COLORADO SPRINGS State CO Zip Code 80922-2739  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SOUTHWEST RESEARCH INST Occupation (for Individual) RESEARCH TECHNICIAN  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 174.00

Date of Receipt 10 / 23 / 2017  
**Transaction ID : 76749787**  
 Amount of Each Receipt this Period 24.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	86.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 190 OF 485 (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"/>	<input type="checkbox"/> 17

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

**A. ROBINETTE, KENNETH M, , MR, JR**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7695 BLACK BEAR PT

City COLORADO SPRINGS	State CO	Zip Code 80922-2739
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SOUTHWEST RESEARCH INST	Occupation (for Individual) RESEARCH TECHNICIAN
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
200.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		23		2017

**Transaction ID : 76749788**

Amount of Each Receipt this Period  
26.00

Memo Item

**B. ROBINETTE, KENNETH M, , MR, JR**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7695 BLACK BEAR PT

City COLORADO SPRINGS	State CO	Zip Code 80922-2739
--------------------------	-------------	------------------------

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

Name of Employer (for Individual) SOUTHWEST RESEARCH INST	Occupation (for Individual) RESEARCH TECHNICIAN
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
226.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		23		2017

**Transaction ID : 76749789**

Amount of Each Receipt this Period  
26.00

Memo Item

**C. ROBINETTE, KENNETH M, , MR, JR**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7695 BLACK BEAR PT

City COLORADO SPRINGS	State CO	Zip Code 80922-2739
--------------------------	-------------	------------------------

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

Name of Employer (for Individual) SOUTHWEST RESEARCH INST	Occupation (for Individual) RESEARCH TECHNICIAN
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		23		2017

**Transaction ID : 76749790**

Amount of Each Receipt this Period  
24.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	76.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 191 OF 485
	<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. ROBINETTE, KENNETH M, , MR, JR**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7695 BLACK BEAR PT  
 City COLORADO SPRINGS State CO Zip Code 80922-2739  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SOUTHWEST RESEARCH INST Occupation (for Individual) RESEARCH TECHNICIAN  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 10 / 23 / 2017  
**Transaction ID : 76749791**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**B. SEITZ, DONALD D, , SGT,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO BOX 302  
 City MILFORD CENTER State OH Zip Code 43045-0302  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SCOTTS MIRACLE GRO Occupation (for Individual) RETIRED - IT TECH  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 10 / 16 / 2017  
**Transaction ID : 76749818**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**C. COWHER, RICHARD, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1213 EDILYN CT  
 City WESTERVILLE State OH Zip Code 43081-2527  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Capital Engine Company Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 203.00

Date of Receipt 10 / 16 / 2017  
**Transaction ID : 76749823**  
 Amount of Each Receipt this Period 55.00  
 Memo Item

<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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 192 OF 485
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

**A. HERR, HENRY E, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2111 S VIEW RD  
 City LANCASTER State PA Zip Code 17602-1842  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 02 / 2017  
**Transaction ID : 76749879**  
 Amount of Each Receipt this Period 150.00  
 Memo Item

**B. DIVIS, THOMAS R, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5834 SPOTSWOOD DR  
 City LYNDHURST State OH Zip Code 44124-4030  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) INDUSTRIAL ENGINEER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 209.00

Date of Receipt 10 / 03 / 2017  
**Transaction ID : 76749883**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**C. RUFF, RONALD W, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4614 BRUENING DR  
 City PARMA State OH Zip Code 44134-4640  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Arcelor Mittal Steel Occupation (for Individual) Pipe Shop  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 330.00

Date of Receipt 10 / 02 / 2017  
**Transaction ID : 76749884**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	225.00
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 193 OF 485
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

**A. JOHNSON, RICHARD A, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 282 PARK PLACE DR

City WADSWORTH	State OH	Zip Code 44281-8245
-------------------	-------------	------------------------

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

Name of Employer (for Individual) FIRESTONE	Occupation (for Individual) SUPERVISOR
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
240.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 10 / 2017

**Transaction ID : 76749896**

Amount of Each Receipt this Period  
50.00

Memo Item

**B. LIEBMANN, JON H, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2469 26TH ST SW

City AKRON	State OH	Zip Code 44314-1605
---------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) 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 Y  
 10 / 16 / 2017

**Transaction ID : 76749898**

Amount of Each Receipt this Period  
25.00

Memo Item

**C. MILLER, ADEN M, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8222 BUSS RD

City APPLE CREEK	State OH	Zip Code 44606-9465
---------------------	-------------	------------------------

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

Name of Employer (for Individual) MILLWOOD, INC.	Occupation (for Individual) RETIRED
---	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
243.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 06 / 2017

**Transaction ID : 76749908**

Amount of Each Receipt this Period  
37.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	112.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 194 OF 485
	<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. BARE, DENNIS, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 3305

City WEST SOMERSET	State KY	Zip Code 42564-3305
-----------------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		06		2017

**Transaction ID : 76749927**

Amount of Each Receipt this Period  
100.00

Memo Item

**B. TOLLIVER, ORLAN, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3213 SENECA ST

City MIDDLETOWN	State OH	Zip Code 45044-7755
--------------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
296.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		04		2017

**Transaction ID : 76749929**

Amount of Each Receipt this Period  
37.00

Memo Item

**C. ACCORSI, KENNETH D, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 413 E BRUCE AVE UNIT B

City GILBERT	State AZ	Zip Code 85234-5843
-----------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
372.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		12		2017

**Transaction ID : 76749954**

Amount of Each Receipt this Period  
99.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	236.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 195 OF 485
	<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. BRASHEAR, O'BRYAN, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 389 GLENROSE ST

City VANDALIA	State OH	Zip Code 45377-3208
------------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
221.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		30		2017

**Transaction ID : 76749960**

Amount of Each Receipt this Period  
25.00

Memo Item

**B. COHEE, BUD, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1722 N 16TH ST

City GRAND JUNCTION	State CO	Zip Code 81501-6312
------------------------	-------------	------------------------

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

Name of Employer (for Individual) IBM	Occupation (for Individual) RETIRED - QUALITY ANALYST
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1004.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		10		2017

**Transaction ID : 76749962**

Amount of Each Receipt this Period  
100.00

Memo Item

**C. TREKAS, GEORGE A, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3321 ZUMBROTA RD

City ALPINE	State CA	Zip Code 91901-1556
----------------	-------------	------------------------

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

Name of Employer (for Individual) UNIV OF CALIF	Occupation (for Individual) MACHINIST
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
242.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		16		2017

**Transaction ID : 76749964**

Amount of Each Receipt this Period  
25.00

Memo Item

<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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 196 OF 485
	<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. BONICELLI, JOHN, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 220 HIDDEN CREEK DR

City COLORADO SPRINGS	State CO	Zip Code 80906-4373
--------------------------	-------------	------------------------

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

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) SALES
--	--------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
10		10		2017

**Transaction ID : 76749968**

Amount of Each Receipt this Period  
125.00

Memo Item

**B. MOWEN, TERRY, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2105 SELMA RD

City SPRINGFIELD	State OH	Zip Code 45505-4762
---------------------	-------------	------------------------

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

Name of Employer (for Individual) Retired	Occupation (for Individual) Retired
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
212.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
10		03		2017

**Transaction ID : 76749977**

Amount of Each Receipt this Period  
25.00

Memo Item

**C. JEFFERY, MICHAEL, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6490 COUNTY ROAD 24

City RAWSON	State OH	Zip Code 45881-9728
----------------	-------------	------------------------

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

Name of Employer (for Individual) CITY OF FINDLAY	Occupation (for Individual) CAPT FIRE DEPT
--	---

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
233.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
10		10		2017

**Transaction ID : 76749978**

Amount of Each Receipt this Period  
55.00

Memo Item

<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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 197 OF 485
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<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. CLAGER, HAROLD R, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1645 MAGNOLIA DR  
 City GREENWOOD State IN Zip Code 46143-6916  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Chrysler Corp. Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 03 / 2017  
**Transaction ID : 76749994**  
 Amount of Each Receipt this Period  
 25.00  
 Memo Item

**B. MCGUNNIGLE, RAYMOND P, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 17226 51ST AVE SE  
 City BOTHELL State WA Zip Code 98012-6706  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 30 / 2017  
**Transaction ID : 76750009**  
 Amount of Each Receipt this Period  
 100.00  
 Memo Item

**C. POWELL, MIKE, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7164 W 900 S  
 City CLAYPOOL State IN Zip Code 46510-9773  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) POWELL TIRE COMPANY, INC Occupation (for Individual) OWNER  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 20 / 2017  
**Transaction ID : 76750019**  
 Amount of Each Receipt this Period  
 100.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	225.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 198 OF 485
	<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	<input type="checkbox"/> 17

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

**A. COSNER, HAROLD L, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11 GOFF ST

City ELKINS	State WV	Zip Code 26241-3313
----------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
274.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		10		2017

**Transaction ID : 76750021**

Amount of Each Receipt this Period  
25.00

Memo Item

**B. KRINN, JOHN C, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 25 WESTGATE RD

City BLUFFTON	State IN	Zip Code 46714-1524
------------------	-------------	------------------------

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

Name of Employer (for Individual) Franklin Electric Company	Occupation (for Individual) Retired
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
610.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		17		2017

**Transaction ID : 76750029**

Amount of Each Receipt this Period  
55.00

Memo Item

**C. CASSIDY, MICHAEL C, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 16321 SPANGLER PEAK RD

City RAMONA	State CA	Zip Code 92065-4242
----------------	-------------	------------------------

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

Name of Employer (for Individual) NCR CORP	Occupation (for Individual) PROGRAMMER/ANALYST
---	---

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
314.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		11		2017

**Transaction ID : 76750035**

Amount of Each Receipt this Period  
37.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	117.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 199 OF 485
	<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. RILEY, HAROLD W, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8989 MYERS LAKE AVE NE

City ROCKFORD	State MI	Zip Code 49341-7718
------------------	-------------	------------------------

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

Name of Employer (for Individual) STATE OF MICHIGAN	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
223.32

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		04		2017

**Transaction ID : 76750041**

Amount of Each Receipt this Period  
15.00

Memo Item

**B. WILSON, OMER, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 16289 HUFFMAN RD

City MOORES HILL	State IN	Zip Code 47032-9297
---------------------	-------------	------------------------

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

Name of Employer (for Individual) MONSONTE CHEMICAL CO	Occupation (for Individual) CHIEF OPERATOR
---	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
339.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		12		2017

**Transaction ID : 76750050**

Amount of Each Receipt this Period  
25.00

Memo Item

**C. HIGGASON, BRAD, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1225 CANTERBURY RD

City CANTRALL	State IL	Zip Code 62625-8864
------------------	-------------	------------------------

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

Name of Employer (for Individual) SELF-EMPLOYED	Occupation (for Individual) PHYSICIAN
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
208.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		02		2017

**Transaction ID : 76750069**

Amount of Each Receipt this Period  
25.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	65.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 200 OF 485
	<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. BROOKS, GARY, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 622 E WOOD ST

City PARIS	State IL	Zip Code 61944-1957
---------------	-------------	------------------------

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

Name of Employer (for Individual) DEPT OF VETERANS AFFAIRS	Occupation (for Individual) POLICE OFFICER
---	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
375.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		06		2017

**Transaction ID : 76750078**

Amount of Each Receipt this Period  
55.00

Memo Item

**B. WALKER, BRIAN, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1424 COUNTY ROAD 36

City NORWICH	State NY	Zip Code 13815-3446
-----------------	-------------	------------------------

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

Name of Employer (for Individual) MEADWEST VACO	Occupation (for Individual) STOCK CHASER
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
408.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		03		2017

**Transaction ID : 76750081**

Amount of Each Receipt this Period  
55.00

Memo Item

**C. ZUBANAS, STEVEN, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 52 FELLE RD

City VERONA	State NJ	Zip Code 07044-1109
----------------	-------------	------------------------

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

Name of Employer (for Individual) KRAFT FOODS	Occupation (for Individual) ENGINEER
--	---

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
463.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		03		2017

**Transaction ID : 76750084**

Amount of Each Receipt this Period  
100.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	210.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 201 OF 485
	(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"/> 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**

**A. LIVINGOOD, C, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1221 DARIEN CLUB DR  
 City DARIEN State IL Zip Code 60561-3672  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 04 / 2017  
**Transaction ID : 76750085**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**B. HOWELL, HAROLD W, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 209 W WALNUT ST  
 City BLUE SPRINGS State MO Zip Code 64014-3062  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 KOHL'S DISTRIBUTION CENTER PROCESSOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 471.00

Date of Receipt 10 / 06 / 2017  
**Transaction ID : 76750112**  
 Amount of Each Receipt this Period 37.00  
 Memo Item

**C. AXTELL, ENOS A, , CAPT, JR**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 14815 S US HIGHWAY 71  
 City GRANDVIEW State MO Zip Code 64030-4361  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 E A AXTELL JR & CO COMM & IND REALTOR  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 383.00

Date of Receipt 10 / 06 / 2017  
**Transaction ID : 76750113**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	237.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 202 OF 485
	<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. BELL, JAMES H, , MD**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7 BEACH PINE DR

City NEWPORT COAST	State CA	Zip Code 92657-1528
-----------------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) PHYSICIAN
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
261.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		10		2017

**Transaction ID : 76750115**

Amount of Each Receipt this Period  
37.00

Memo Item

**B. KENNEDY, JIM, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 302 E KIMBALL ST

City CALLAWAY	State NE	Zip Code 68825-2612
------------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
225.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		16		2017

**Transaction ID : 76750116**

Amount of Each Receipt this Period  
100.00

Memo Item

**C. WILDE, WAYNE, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 91536 RIVER RD

City JUNCTION CITY	State OR	Zip Code 97448-9403
-----------------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
251.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		04		2017

**Transaction ID : 76750117**

Amount of Each Receipt this Period  
25.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	162.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 203 OF 485
	<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. STINETTE, MICHAEL G, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 2684

City SPRINGFIELD	State VA	Zip Code 22152-0684
---------------------	-------------	------------------------

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

Name of Employer (for Individual) ASTRA SERVICES	Occupation (for Individual) COMPUTER SERVICES
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
420.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2017

**Transaction ID : 76750151**

Amount of Each Receipt this Period  
50.00

Memo Item

**B. STINETTE, MICHAEL G, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 2684

City SPRINGFIELD	State VA	Zip Code 22152-0684
---------------------	-------------	------------------------

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

Name of Employer (for Individual) ASTRA SERVICES	Occupation (for Individual) COMPUTER SERVICES
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
370.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		03		2017

**Transaction ID : 76750152**

Amount of Each Receipt this Period  
30.00

Memo Item

**C. ALEXANDER, HOWARD A, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 164 W MOULTRIE ST

City BEMENT	State IL	Zip Code 61813-1440
----------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
674.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		03		2017

**Transaction ID : 76750156**

Amount of Each Receipt this Period  
55.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	135.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 204 OF 485
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

**A. JONES, TERRY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 118 VENUS RD  
 City OAK RIDGE State TN Zip Code 37830-6419  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) MARTIN MARIETTA ENERGY SYSTEMS Occupation (for Individual) INDUSTRIAL WORKER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 259.00

Date of Receipt 10 / 04 / 2017  
**Transaction ID : 76750161**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**B. BYRLEY, JOHN A, A, MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 118 E 14TH ST  
 City SEYMOUR State IN Zip Code 47274-1141  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) USPS Occupation (for Individual) POSTAL CLERK  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 295.00

Date of Receipt 10 / 03 / 2017  
**Transaction ID : 76750170**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**C. GRAY, MICHAEL G, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 107 BEECHWOOD DR  
 City SIMPSONVILLE State SC Zip Code 29681-6000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 228.00

Date of Receipt 10 / 17 / 2017  
**Transaction ID : 76750171**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

<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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 205 OF 485
	<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. DEWITT, CHLOE D, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 22600 BIRCHEN RD

City HARTSHORN	State MO	Zip Code 65479-6705
-------------------	-------------	------------------------

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

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
235.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		23		2017

**Transaction ID : 76750174**

Amount of Each Receipt this Period  
50.00

Memo Item

**B. KEOUGH, RICHARD F, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 53 BRYAN AVE

City DRACUT	State MA	Zip Code 01826-2401
----------------	-------------	------------------------

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

Name of Employer (for Individual) City of Methuen	Occupation (for Individual) Custodian
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
206.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		16		2017

**Transaction ID : 76750196**

Amount of Each Receipt this Period  
25.00

Memo Item

**C. HENDLEY, WALT, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 1550

City HUGHSON	State CA	Zip Code 95326-1550
-----------------	-------------	------------------------

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

Name of Employer (for Individual) HENDLEY FARMS, INC.	Occupation (for Individual) farming
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
550.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		11		2017

**Transaction ID : 76750212**

Amount of Each Receipt this Period  
150.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	225.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 206 OF 485
	<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. CORSETTI, JIM, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2059 POTOMAC WAY

City SAN MATEO	State CA	Zip Code 94403-1417
-------------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1100.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
10		06		2017

**Transaction ID : 76750232**

Amount of Each Receipt this Period  
100.00

Memo Item

**B. PARRILL, KENNETH, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7722 N FREDERICK PIKE

City CROSS JUNCTION	State VA	Zip Code 22625-2121
------------------------	-------------	------------------------

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

Name of Employer (for Individual) Self Employed	Occupation (for Individual) Mason
--	--------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
288.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
10		05		2017

**Transaction ID : 76750255**

Amount of Each Receipt this Period  
36.00

Memo Item

**C. POWELL, LINDIN, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1453 COUNTY ROAD 401

City CULLMAN	State AL	Zip Code 35057-1458
-----------------	-------------	------------------------

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

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
206.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
10		03		2017

**Transaction ID : 76750260**

Amount of Each Receipt this Period  
40.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	176.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 207 OF 485
	<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. HALL, ROBERT, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 600 HAWTHORN RD

City SACRAMENTO	State CA	Zip Code 95864-4906
--------------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED - CIVIL ENGINEER
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		16		2017

**Transaction ID : 76750297**

Amount of Each Receipt this Period  
500.00

Memo Item

**B. RINGO, ROBERT D, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3622 ROSS ST

City AMARILLO	State TX	Zip Code 79118-7726
------------------	-------------	------------------------

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

Name of Employer (for Individual) Retired	Occupation (for Individual) Retired
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		03		2017

**Transaction ID : 76750311**

Amount of Each Receipt this Period  
100.00

Memo Item

**C. GOBLECK, BRENN A, , MS,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 150

City DEMING	State NM	Zip Code 88031-0150
----------------	-------------	------------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) HOUSEWIFE
---	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
310.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		11		2017

**Transaction ID : 76750312**

Amount of Each Receipt this Period  
25.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	625.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 208 OF 485  
(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. MEIER, FREDERICK J, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 102 CANAL ST  
 City AUBURNDALE State FL Zip Code 33823-3505  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 US POSTAL SERVICE RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 326.00

Date of Receipt 10 / 03 / 2017  
**Transaction ID : 76750318**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**B. WISOTZKE, BILL, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5307 W HILLCREST DR  
 City MEQUON State WI Zip Code 53092-2014  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 RETIRED RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 10 / 10 / 2017  
**Transaction ID : 76750319**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**C. LOWE, BARRY, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 791 ALICE ST  
 City FOREST PARK State GA Zip Code 30297-2761  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt 10 / 06 / 2017  
**Transaction ID : 76750322**  
 Amount of Each Receipt this Period 55.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional).....▶ 180.00  
**TOTAL** This Period (last page this line number only).....▶



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 209 OF 485
	<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. BLEEKE, HAROLD F, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 12937 FRANKE RD

City MONROEVILLE	State IN	Zip Code 46773-9559
---------------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
224.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		06		2017

**Transaction ID : 76750332**

Amount of Each Receipt this Period  
25.00

Memo Item

**B. SAMUELS, LOUIS D, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 554 CRAWFORD ST

City GOLDEN	State CO	Zip Code 80401-4894
----------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
425.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		20		2017

**Transaction ID : 76750350**

Amount of Each Receipt this Period  
55.00

Memo Item

**C. SEXTON, HELM, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 721 LINCOLN AVE

City MORRISTOWN	State TN	Zip Code 37813-5618
--------------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		04		2017

**Transaction ID : 76750370**

Amount of Each Receipt this Period  
25.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	105.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 210 OF 485
	<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. COLE, RANDEL J, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1731 HAWK CT

City YUBA CITY	State CA	Zip Code 95993-5305
-------------------	-------------	------------------------

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

Name of Employer (for Individual) RANDEL COLE CONSTRUCTION	Occupation (for Individual) OWNER
---	--------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		16		2017

**Transaction ID : 76750374**

Amount of Each Receipt this Period  
50.00

Memo Item

**B. DIABO, STEVEN E, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5355 KINSEY RD

City STOCKBRIDGE	State MI	Zip Code 49285-9740
---------------------	-------------	------------------------

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

Name of Employer (for Individual) SEARS ROEBUCK	Occupation (for Individual) TECHNICIAN
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
259.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		16		2017

**Transaction ID : 76750385**

Amount of Each Receipt this Period  
37.00

Memo Item

**C. WOODROW, ALOIS CLETUS, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7647 NW COUNTY ROAD 229

City STARKE	State FL	Zip Code 32091-8180
----------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
290.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		12		2017

**Transaction ID : 76750426**

Amount of Each Receipt this Period  
20.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	107.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 211 OF 485
	<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	<input type="checkbox"/> 17

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

**A. MURR, ALLEN, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **PO BOX 603**

City <b>WHITEFISH</b>	State <b>MT</b>	Zip Code <b>59937-0603</b>
--------------------------	--------------------	-------------------------------

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

Name of Employer (for Individual) <b>RETIRED</b>	Occupation (for Individual) <b>RETIRED</b>
---	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	16	/	2017

**Transaction ID : 76750465**

Amount of Each Receipt this Period  

100.00
--------

 Memo Item

**B. BOSWELL, KEN, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **5804 WOODVIEW AVE**

City <b>AUSTIN</b>	State <b>TX</b>	Zip Code <b>78756-1030</b>
-----------------------	--------------------	-------------------------------

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

Name of Employer (for Individual) <b>RETIRED</b>	Occupation (for Individual) <b>RETIRED</b>
---	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **4000.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	23	/	2017

**Transaction ID : 76750472**

Amount of Each Receipt this Period  

400.00
--------

 Memo Item

**C. BASTAIN, RANDALL, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **26 HIGHLAND DR**

City <b>PENFIELD</b>	State <b>NY</b>	Zip Code <b>14526-1327</b>
-------------------------	--------------------	-------------------------------

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

Name of Employer (for Individual) <b>RETIRED</b>	Occupation (for Individual) <b>RETIRED</b>
---	---

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼ **205.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	03	/	2017

**Transaction ID : 76750478**

Amount of Each Receipt this Period  

12.00
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 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>512.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 212 OF 485
	<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. BASTAIN, RANDALL, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 26 HIGHLAND DR

City PENFIELD	State NY	Zip Code 14526-1327
------------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
215.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		20		2017

**Transaction ID : 76750479**

Amount of Each Receipt this Period  
10.00

Memo Item

**B. WATTERS, JAMES L, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 548-305 OLD HIGHWAY RD

City MCARTHUR	State CA	Zip Code 96056-7605
------------------	-------------	------------------------

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

Name of Employer (for Individual) Retired	Occupation (for Individual) Retired
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
351.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		06		2017

**Transaction ID : 76750503**

Amount of Each Receipt this Period  
25.00

Memo Item

**C. MASEN, LINDA MAE, , MS,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3601 PEARL LN

City FLOWER MOUND	State TX	Zip Code 75022-2959
----------------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
230.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		11		2017

**Transaction ID : 76750504**

Amount of Each Receipt this Period  
25.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	60.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 213 OF 485
	<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. STICKNEY, GLEN W, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 21595 CONIFER DR  
 City HUSON State MT Zip Code 59846-9700  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) REPUBLIC SERVICES Occupation (for Individual) GARBAGE MAN  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 463.00

Date of Receipt 10 / 10 / 2017  
**Transaction ID : 76750508**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**B. SOMERS, DONALD, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1040 N UNION ST  
 City GARY State IN Zip Code 46403-1460  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) INSULATION SPECIALTIES OF AMERICA Occupation (for Individual) PRESIDENT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt 10 / 12 / 2017  
**Transaction ID : 76750518**  
 Amount of Each Receipt this Period 55.00  
 Memo Item

**C. RIDER, STEPHEN R, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4365 BINCHY WAY  
 City RANCHO CORDOVA State CA Zip Code 95742-8091  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) State of California/ARB Occupation (for Individual) Air Pollution Specialist  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 11 / 2017  
**Transaction ID : 76750526**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	255.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 214 OF 485
	<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. PAVLIC, LOUIS, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 929 RIDGECREST ST

City MONTEREY PARK	State CA	Zip Code 91754-4622
-----------------------	-------------	------------------------

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

Name of Employer (for Individual)	Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		30		2017

**Transaction ID : 76750527**

Amount of Each Receipt this Period  
250.00

Memo Item

**B. O'DELL, JAMES R, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1027 MCRAE WAY

City ROSEVILLE	State CA	Zip Code 95678-7575
-------------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
450.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		03		2017

**Transaction ID : 76750541**

Amount of Each Receipt this Period  
100.00

Memo Item

**C. HUNTER, THERON, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1001 OXFORD ST

City MONTROSE	State CO	Zip Code 81401-5142
------------------	-------------	------------------------

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

Name of Employer (for Individual) NATIONAL PARK SERVICE	Occupation (for Individual) MAINTENANCE FOREMAN
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
322.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		06		2017

**Transaction ID : 76750544**

Amount of Each Receipt this Period  
25.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	375.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 215 OF 485
	<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. PEGUMP, STEVE, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3123 RYANS RD NE

City SOLON	State IA	Zip Code 52333-9307
---------------	-------------	------------------------

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

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) TRUCK DRIVER
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
298.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		12		2017

**Transaction ID : 76750567**

Amount of Each Receipt this Period  
25.00

Memo Item

**B. KAUFMAN, RYAN, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 217215 E FINLEY RD

City KENNEWICK	State WA	Zip Code 99337-7487
-------------------	-------------	------------------------

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

Name of Employer (for Individual) Cochran Marine, LLC	Occupation (for Individual) Electrician
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
321.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		13		2017

**Transaction ID : 76750574**

Amount of Each Receipt this Period  
25.00

Memo Item

**C. COOLEY, JOHN A, , MR, JR**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6790 TURNBERRY DR SE

City GRAND RAPIDS	State MI	Zip Code 49546-9731
----------------------	-------------	------------------------

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

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
350.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		04		2017

**Transaction ID : 76750606**

Amount of Each Receipt this Period  
150.00

Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 216 OF 485
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

**A. PERSI, PHILIP, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5939 BUICK DR  
 City INDIANAPOLIS State IN Zip Code 46224-5322  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) AMERICAN AIRLINES Occupation (for Individual) PILOT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 06 / 2017  
**Transaction ID : 76750619**  
 Amount of Each Receipt this Period 150.00  
 Memo Item

**B. ROBERTS, JOE, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO BOX 221  
 City WOLCOTTVILLE State IN Zip Code 46795-0221  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) MORGAN OLSON Occupation (for Individual) SAW OPERATOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 336.00

Date of Receipt 10 / 19 / 2017  
**Transaction ID : 76750629**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**C. BETTS, MORGAN, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 56 BROOKMOOR RD  
 City AVON State CT Zip Code 06001-2301  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 233.00

Date of Receipt 10 / 16 / 2017  
**Transaction ID : 76750641**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

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



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 217 OF 485
	<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. ZULEEG, ROBERT J, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1455 LAKE BERGE RD

City ORLANDO	State FL	Zip Code 32825-5706
-----------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
225.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		04		2017

**Transaction ID : 76750643**

Amount of Each Receipt this Period  
50.00

Memo Item

**B. HENSLEY, AUSTIN, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2656 GRANT AVE

City CINCINNATI	State OH	Zip Code 45231-1322
--------------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
201.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		10		2017

**Transaction ID : 76750651**

Amount of Each Receipt this Period  
25.00

Memo Item

**C. MILNE, DAVID, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 348 PAULETTE WAY

City FARMINGTON	State UT	Zip Code 84025-3239
--------------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
208.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		16		2017

**Transaction ID : 76750664**

Amount of Each Receipt this Period  
55.00

Memo Item

<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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 218 OF 485
	<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. WALKER, GARY N, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 491 OLDSTONE PL

City SIMI VALLEY	State CA	Zip Code 93065-5341
---------------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
317.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		20		2017

**Transaction ID : 76750667**

Amount of Each Receipt this Period  
50.00

Memo Item

**B. BURKLEY, ROBERT, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1409 MIDHURST CT

City BEL AIR	State MD	Zip Code 21014-5910
-----------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
244.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		02		2017

**Transaction ID : 76750677**

Amount of Each Receipt this Period  
25.00

Memo Item

**C. MITCHELL, DAVID, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1250 GULF BLVD APT 307

City CLEARWATER BEACH	State FL	Zip Code 33767-2714
--------------------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED - AUDITOR
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
241.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		04		2017

**Transaction ID : 76750721**

Amount of Each Receipt this Period  
25.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	100.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 219 OF 485
	<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**

**A. NELSON, JOHN, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3644 BAYONNE DR

City SAN DIEGO	State CA	Zip Code 92109-6616
-------------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
248.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		10		2017

**Transaction ID : 76750727**

Amount of Each Receipt this Period  
100.00

Memo Item

**B. NELSON, JOHN, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3644 BAYONNE DR

City SAN DIEGO	State CA	Zip Code 92109-6616
-------------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
448.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		21		2017

**Transaction ID : 76750728**

Amount of Each Receipt this Period  
200.00

Memo Item

**C. RUMLER, DAVID, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 5362

City LAKE MONTEZUMA	State AZ	Zip Code 86342-5362
------------------------	-------------	------------------------

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

Name of Employer (for Individual) Retired	Occupation (for Individual) Retired
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
415.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		12		2017

**Transaction ID : 76750735**

Amount of Each Receipt this Period  
55.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	355.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 220 OF 485
	<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. MEADOWS, VANCE, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8090 JULIET LN APT 101

City MANASSAS	State VA	Zip Code 20109-7870
------------------	-------------	------------------------

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

Name of Employer (for Individual) Retired	Occupation (for Individual) Retired
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
220.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		03		2017

**Transaction ID : 76750750**

Amount of Each Receipt this Period  
55.00

Memo Item

**B. MAYS, JANET A, , MS,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 17410 KNAPP ST

City NORTHRIDGE	State CA	Zip Code 91325-2420
--------------------	-------------	------------------------

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

Name of Employer (for Individual)	Occupation (for Individual) HOME MAKER
-----------------------------------	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		11		2017

**Transaction ID : 76750755**

Amount of Each Receipt this Period  
100.00

Memo Item

**C. BADGE, BARRY, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 575 S CENTERLINE RD

City NEWAYGO	State MI	Zip Code 49337-9053
-----------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
278.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		12		2017

**Transaction ID : 76750758**

Amount of Each Receipt this Period  
25.00

Memo Item

<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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 221 OF 485
	<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**

**A. BRADSHAW, GARRY I, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 339 W OFFICE ST

City HARRODSBURG	State KY	Zip Code 40330-1643
---------------------	-------------	------------------------

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

Name of Employer (for Individual) MERCER COUNTY	Occupation (for Individual) SECURITY
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
235.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		10		2017

**Transaction ID : 76750776**

Amount of Each Receipt this Period  
25.00

Memo Item

**B. FLETCHER, MIRIAM N, , MRS,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 286 W MARKET ST

City MARIETTA	State PA	Zip Code 17547-1420
------------------	-------------	------------------------

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

Name of Employer (for Individual) Retired	Occupation (for Individual) Retired
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
490.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		10		2017

**Transaction ID : 76750777**

Amount of Each Receipt this Period  
100.00

Memo Item

**C. CONDON, FRANK A, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 977

City CEDAR CREST	State NM	Zip Code 87008-0977
---------------------	-------------	------------------------

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

Name of Employer (for Individual) A P ASSURANCE, INC	Occupation (for Individual) SR CLAIMS REPRESENTATIVE
---	---

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
362.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		06		2017

**Transaction ID : 76750793**

Amount of Each Receipt this Period  
37.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	162.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 222 OF 485
	<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**

**A. DILLENBECK, BRUCE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address W9176 COUNTY ROAD X  
 City DARIEN State WI Zip Code 53114-1343  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) MANN BROS. INC. Occupation (for Individual) TRUCK DRIVER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 10 / 30 / 2017  
**Transaction ID : 76750807**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**B. LAWLIS, JEFF, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6504 NORTHLAND AVE NE  
 City ALBUQUERQUE State NM Zip Code 87109-2763  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 03 / 2017  
**Transaction ID : 76750845**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**C. BOTH, FRED W, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 433 S PHELPS AVE  
 City ARLINGTON HTS State IL Zip Code 60004-6919  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SIGNATURE FLIGHT SUPPORT Occupation (for Individual) REFUELER  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt 10 / 04 / 2017  
**Transaction ID : 76750858**  
 Amount of Each Receipt this Period 20.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 145.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 223 OF 485
	<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. HANSEN, CHARLES, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4902 64TH ST E

City TACOMA	State WA	Zip Code 98443-2347
----------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
292.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	23	/	2017

**Transaction ID : 76750861**

Amount of Each Receipt this Period  
37.00

Memo Item

**B. BITTNER, GERALD D, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 245 HILL RD

City ESKO	State MN	Zip Code 55733-9558
--------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
324.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	03	/	2017

**Transaction ID : 76750893**

Amount of Each Receipt this Period  
25.00

Memo Item

**C. SHIGLIK, NIKOLAY, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 513 OLYMPIA AVE

City CLIFFSIDE PARK	State NJ	Zip Code 07010-1615
------------------------	-------------	------------------------

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

Name of Employer (for Individual) ONE STOP DELIVERY, LLC	Occupation (for Individual) DIRECTOR
---	---

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
705.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	19	/	2017

**Transaction ID : 76750902**

Amount of Each Receipt this Period  
150.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	212.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 224 OF 485
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

**A. LAPP, JOHN, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 41 RIDGE VIEW DR  
 City LEOLA State PA Zip Code 17540-1119  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF Occupation (for Individual) TRUCKER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt 10 / 03 / 2017  
**Transaction ID : 76750906**  
 Amount of Each Receipt this Period 36.00  
 Memo Item

**B. HOWARD, JAY, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3840 LEWIS RIVER RD  
 City WOODLAND State WA Zip Code 98674-8273  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt 10 / 18 / 2017  
**Transaction ID : 76750908**  
 Amount of Each Receipt this Period 55.00  
 Memo Item

**C. FARE, CHARLES, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 869 GARFIELD ST  
 City CANON CITY State CO Zip Code 81212-4366  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 10 / 20 / 2017  
**Transaction ID : 76750914**  
 Amount of Each Receipt this Period 20.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	111.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 225 OF 485
	<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. COWLES, MATTHEW, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10875 RAVENNA AVE

City LOUISVILLE	State OH	Zip Code 44641-9732
--------------------	-------------	------------------------

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

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
231.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2017

**Transaction ID : 76750921**

Amount of Each Receipt this Period  
25.00

Memo Item

**B. SOUTHWARD, BOB, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2125 REEDER RD

City MONTOURSVILLE	State PA	Zip Code 17754-7824
-----------------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) retired
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
315.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2017

**Transaction ID : 76750953**

Amount of Each Receipt this Period  
25.00

Memo Item

**C. ENGLISH, JOHN, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9658 2ND ST

City OTSEGO	State MI	Zip Code 49078-9515
----------------	-------------	------------------------

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

Name of Employer (for Individual) PARKER AEROSPACE	Occupation (for Individual) PUMP MECHANIC
---	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
377.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		10		2017

**Transaction ID : 76750954**

Amount of Each Receipt this Period  
37.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	87.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 226 OF 485
	<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. SHAVER, ROY, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 490 WASHINGTON ST

City PLATTEVILLE	State WI	Zip Code 53818-2055
---------------------	-------------	------------------------

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

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
315.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		04		2017

**Transaction ID : 76750977**

Amount of Each Receipt this Period  
60.00

Memo Item

**B. BURNETT, BOB, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8052 SHADETREE DR

City WEST CHESTER	State OH	Zip Code 45069-2412
----------------------	-------------	------------------------

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

Name of Employer (for Individual) SIEMENS	Occupation (for Individual) LEADMAN - PUNCH PRESS DEPT
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
232.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		06		2017

**Transaction ID : 76751036**

Amount of Each Receipt this Period  
25.00

Memo Item

**C. POLLOCK, JOSEPH, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 26 PINE ST

City CENTRAL ISLIP	State NY	Zip Code 11722-4150
-----------------------	-------------	------------------------

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

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
226.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		04		2017

**Transaction ID : 76751044**

Amount of Each Receipt this Period  
100.00

Memo Item

<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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 227 OF 485
	<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. COTTRELL, KEN, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2092 E REID RD

City GRAND BLANC	State MI	Zip Code 48439-8501
---------------------	-------------	------------------------

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

Name of Employer (for Individual) GENERAL MOTORS COMPANY	Occupation (for Individual) SENIOR DESIGNER
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
332.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	23	/	2017

**Transaction ID : 76751053**

Amount of Each Receipt this Period  
55.00

Memo Item

**B. GLOVER, CLARENCE, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 317 E WASHINGTON ST

City SEQUIM	State WA	Zip Code 98382-3488
----------------	-------------	------------------------

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

Name of Employer (for Individual) PETER BLACK REAL ESTATE	Occupation (for Individual) REAL ESTATE SALES
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
535.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	04	/	2017

**Transaction ID : 76751060**

Amount of Each Receipt this Period  
55.00

Memo Item

**C. KEMPF, JOHN R, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 404 PARK AVE

City MARYVILLE	State MO	Zip Code 64468-1352
-------------------	-------------	------------------------

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

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) FARMING
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
327.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	10	/	2017

**Transaction ID : 76751061**

Amount of Each Receipt this Period  
25.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	135.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 228 OF 485
	<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. ROUSE, ARTHUR, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address W9224 W 16TH RD

City POUND	State WI	Zip Code 54161-9536
---------------	-------------	------------------------

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

Name of Employer (for Individual) Peshtigo Community Schools	Occupation (for Individual) Retired-Teacher
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
298.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		04		2017

**Transaction ID : 76751062**

Amount of Each Receipt this Period  
25.00

Memo Item

**B. BRODECK, ED, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 746 S HUTH RD

City CHEEKTOWAGA	State NY	Zip Code 14225-1719
---------------------	-------------	------------------------

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

Name of Employer (for Individual) GATES COLLISION	Occupation (for Individual) RETIRED-BASIC LABOR
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
217.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		03		2017

**Transaction ID : 76751064**

Amount of Each Receipt this Period  
25.00

Memo Item

**C. OBERMAN, JOSEPH, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 620 JEFFERSON ST

City HAYWARD	State CA	Zip Code 94544-4101
-----------------	-------------	------------------------

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

Name of Employer (for Individual) Self Employed	Occupation (for Individual) Apartment Manager
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
305.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		13		2017

**Transaction ID : 76751072**

Amount of Each Receipt this Period  
55.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	105.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 229 OF 485
	<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. GRANT, CHARLES, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3198 RIDGECREST ST

City MEMPHIS	State TN	Zip Code 38127-6330
-----------------	-------------	------------------------

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

Name of Employer (for Individual) US NAVY	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1200.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		06		2017

**Transaction ID : 76751098**

Amount of Each Receipt this Period  
100.00

Memo Item

**B. BREAZEAL, WILLIAM S, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 861 THOMSON RD

City WASHINGTON	State GA	Zip Code 30673-4319
--------------------	-------------	------------------------

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

Name of Employer (for Individual) CSX RAILROAD	Occupation (for Individual) RETIRED - CONDUCTOR
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
277.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		16		2017

**Transaction ID : 76751107**

Amount of Each Receipt this Period  
25.00

Memo Item

**C. TERZIAN, RANDY, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2990 N WEDGEWOOD DR

City WICHITA	State KS	Zip Code 67204-5031
-----------------	-------------	------------------------

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

Name of Employer (for Individual) Spirit Aerosystems	Occupation (for Individual) Plumber
---	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
220.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		11		2017

**Transaction ID : 76751115**

Amount of Each Receipt this Period  
37.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	162.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 230 OF 485
	<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. BASSETT, JON, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6315 W MARY CT

City VISALIA	State CA	Zip Code 93277-5179
-----------------	-------------	------------------------

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

Name of Employer (for Individual) BASSETT FARMS, INC.	Occupation (for Individual) FARMER
--	---------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
450.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	10	/	2017

**Transaction ID : 76751117**

Amount of Each Receipt this Period  
100.00

Memo Item

**B. SKINNER, RANDY, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 23284 FLORIS RD

City BLOOMFIELD	State IA	Zip Code 52537-7600
--------------------	-------------	------------------------

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

Name of Employer (for Individual) DISABLED	Occupation (for Individual) DISABLED
---	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
215.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	03	/	2017

**Transaction ID : 76751128**

Amount of Each Receipt this Period  
15.00

Memo Item

**C. LEONHARDT, JON, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6623 LA ROCCA RD NW

City ALBUQUERQUE	State NM	Zip Code 87114-3453
---------------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
1200.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	06	/	2017

**Transaction ID : 76751131**

Amount of Each Receipt this Period  
500.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	615.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 231 OF 485
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

**A. CURTIS, JOHN, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO BOX 1218

City SILVER SPRINGS	State NV	Zip Code 89429-1218
------------------------	-------------	------------------------

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
225.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 17 / 2017

**Transaction ID : 76751177**

Amount of Each Receipt this Period  
50.00

Memo Item

**B. PALKIN, FELIX A, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 10303 E HIGHWAY 84

City AXTELL	State TX	Zip Code 76624-1423
----------------	-------------	------------------------

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

Name of Employer (for Individual) Occupation (for Individual)  
 Texas State Technical College Lab Assistant

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 05 / 2017

**Transaction ID : 76751184**

Amount of Each Receipt this Period  
25.00

Memo Item

**C. LEERSSEN, JIM, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1919 81ST AVE

City GREELEY	State CO	Zip Code 80634-4634
-----------------	-------------	------------------------

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

Name of Employer (for Individual) Occupation (for Individual)  
 Self Employed Information Technology

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
203.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 06 / 2017

**Transaction ID : 76751196**

Amount of Each Receipt this Period  
37.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	112.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 232 OF 485
	<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. WINGE, ELDEN, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 18834 TRENGOVE RD NW

City SOLWAY	State MN	Zip Code 56678-4389
----------------	-------------	------------------------

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

Name of Employer (for Individual) Retired - Educator	Occupation (for Individual) Farmer
---	---------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
237.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		23		2017

**Transaction ID : 76751206**

Amount of Each Receipt this Period  
25.00

Memo Item

**B. WINGE, ELDEN, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 18834 TRENGOVE RD NW

City SOLWAY	State MN	Zip Code 56678-4389
----------------	-------------	------------------------

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

Name of Employer (for Individual) Retired - Educator	Occupation (for Individual) Farmer
---	---------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
212.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		10		2017

**Transaction ID : 76751207**

Amount of Each Receipt this Period  
25.00

Memo Item

**C. CARLSEN, JOHN S, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5257 SADDLE LN

City CASCO	State MI	Zip Code 48064-4687
---------------	-------------	------------------------

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

Name of Employer (for Individual) NORTHWESTERN BOAT CO	Occupation (for Individual) MECHANIC
---	---

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
275.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		10		2017

**Transaction ID : 76751212**

Amount of Each Receipt this Period  
75.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	125.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 233 OF 485
	<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. ELLIS, BOB, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6034 NUTMEG AVE

City PACE	State FL	Zip Code 32571-9312
--------------	-------------	------------------------

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

Name of Employer (for Individual) Self Employed	Occupation (for Individual) Minister
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
248.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		02		2017

**Transaction ID : 76751213**

Amount of Each Receipt this Period  
48.00

Memo Item

**B. GODDARD, RANDALL J, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 19767 N 1800TH AVE

City ATKINSON	State IL	Zip Code 61235-9663
------------------	-------------	------------------------

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

Name of Employer (for Individual) Retired	Occupation (for Individual) Retired
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
418.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		06		2017

**Transaction ID : 76751215**

Amount of Each Receipt this Period  
55.00

Memo Item

**C. BELLO, MANUEL I, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1905 W 54TH ST APT I102

City HIALEAH	State FL	Zip Code 33012-2181
-----------------	-------------	------------------------

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

Name of Employer (for Individual) LOU'S POLICE DISTRIBUTION	Occupation (for Individual) SALES
--	--------------------------------------

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
358.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		16		2017

**Transaction ID : 76751223**

Amount of Each Receipt this Period  
37.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	140.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 234 OF 485
	<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	<input type="checkbox"/> 17

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

**A. WAKE, ROY F, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6232 WHITE WILLOW RD

City MINOOKA	State IL	Zip Code 60447-8634
-----------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
258.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		10		2017

**Transaction ID : 76751224**

Amount of Each Receipt this Period  
25.00

Memo Item

**B. DICKSON, BARRY S, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7 PAMLICO CIR

City PENSACOLA	State FL	Zip Code 32507-8741
-------------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) Retired
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
256.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		17		2017

**Transaction ID : 76751245**

Amount of Each Receipt this Period  
37.00

Memo Item

**C. ROCKEY, DEAN, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 505

City EATON	State OH	Zip Code 45320-0505
---------------	-------------	------------------------

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

Name of Employer (for Individual) BROWN & SONS NURSERY & PRODUCE	Occupation (for Individual) NURSERY / PRODUCE SALES
---	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
260.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		13		2017

**Transaction ID : 76751255**

Amount of Each Receipt this Period  
30.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	92.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 235 OF 485
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<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. BASSETT, DONOVAN, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO BOX 276

City WAGON MOUND	State NM	Zip Code 87752-0276
---------------------	-------------	------------------------

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

Name of Employer (for Individual) OJO FELIZ RANCH	Occupation (for Individual) RANCH FOREMAN
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
224.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 03 / 2017  
**Transaction ID : 76751275**

Amount of Each Receipt this Period  
 37.00

Memo Item

**B. MARTZ, LARRY R, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2600 FLEETWOOD PL UNIT 340

City CASPER	State WY	Zip Code 82604-3173
----------------	-------------	------------------------

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

Name of Employer (for Individual) Retired	Occupation (for Individual) Retired
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
228.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 19 / 2017  
**Transaction ID : 76751283**

Amount of Each Receipt this Period  
 37.00

Memo Item

**C. SPENCER, PHILIP M, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 202 BUCKBOARD LN

City CARLSBAD	State NM	Zip Code 88220-8738
------------------	-------------	------------------------

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

Name of Employer (for Individual) NEW MEXICO STATE UNIVERSITY	Occupation (for Individual) WELDING INSTRUCTOR
--	---

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
222.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 12 / 2017  
**Transaction ID : 76751311**

Amount of Each Receipt this Period  
 25.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	99.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 236 OF 485
	<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. TWIGHT, PETER A, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1521 SAWYERS BAR RD  
 City ETNA State CA Zip Code 96027-9401  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PACIFIC STATES INDUSTRIES Occupation (for Individual) LICENSED FORESTER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt 10 / 11 / 2017  
**Transaction ID : 76751323**  
 Amount of Each Receipt this Period 75.00  
 Memo Item

**B. KOVACS, LANDON, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1190 E CROOKED LAKE DR  
 City KALAMAZOO State MI Zip Code 49009-9742  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) STATE FARM INSURANCE Occupation (for Individual) INSURANCE AGENT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 407.00

Date of Receipt 10 / 05 / 2017  
**Transaction ID : 76751329**  
 Amount of Each Receipt this Period 150.00  
 Memo Item

**C. SCHIELIE, TIMOTHY L, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2410 E BRANDENBERRY CT APT 2I  
 City ARLINGTON HTS State IL Zip Code 60004-5111  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt 10 / 11 / 2017  
**Transaction ID : 76751331**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

<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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 237 OF 485
	<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. BOLTON, ROBERT, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 714 ALTON CAROLINA RD

City CHARLESTOWN	State RI	Zip Code 02813-3501
---------------------	-------------	------------------------

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

Name of Employer (for Individual) Richmond Veterinary Clinic Inc.	Occupation (for Individual) Veterinarian/Owner/President of Corpor
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
220.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	06	/	2017

**Transaction ID : 76751350**

Amount of Each Receipt this Period  
25.00

Memo Item

**B. CLARK, VIRGEL, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2259 S WHITE PINE PL

City BOISE	State ID	Zip Code 83706-4462
---------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
255.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	11	/	2017

**Transaction ID : 76751352**

Amount of Each Receipt this Period  
55.00

Memo Item

**C. SMITH, ELENOR, , MRS,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 100 BREEZY HILL RD

City COLLINSVILLE	State CT	Zip Code 06019-3607
----------------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	11	/	2017

**Transaction ID : 76751356**

Amount of Each Receipt this Period  
250.00

Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 238 OF 485
	<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. FOSZCZ, ROGER M, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 910 W 11TH ST

City PORT ANGELES	State WA	Zip Code 98363-7207
----------------------	-------------	------------------------

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

Name of Employer (for Individual) FOSS MARITIME COMPANY	Occupation (for Individual) Professional Mariner
--	---

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
233.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		10		2017

**Transaction ID : 76751357**

Amount of Each Receipt this Period  
15.00

Memo Item

**B. BOLDT, RAYMOND, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1900 PORTERVILLE RD

City EAST AURORA	State NY	Zip Code 14052-9607
---------------------	-------------	------------------------

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

Name of Employer (for Individual) IROQUOIS CENTRAL SCHOOL	Occupation (for Individual) RETIRED - AUTO MECHANIC
--	--

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		11		2017

**Transaction ID : 76751361**

Amount of Each Receipt this Period  
37.00

Memo Item

**C. TURNER, FRED A, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 51400 STATE HIGHWAY 3

City CLARKIA	State ID	Zip Code 83812-9611
-----------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary     General  
 Other (specify)

Aggregate Year-to-Date ▼  
252.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		10		2017

**Transaction ID : 76751363**

Amount of Each Receipt this Period  
25.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	77.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 239 OF 485
	<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. KUHN, CLAIR L, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 162

City ASPERS	State PA	Zip Code 17304-0162
----------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
202.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		02		2017

**Transaction ID : 76751368**

Amount of Each Receipt this Period  
24.00

Memo Item

**B. HANSEN, JASON, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address W142N9949 AMBER DR

City GERMANTOWN	State WI	Zip Code 53022-5378
--------------------	-------------	------------------------

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

Name of Employer (for Individual) SBC SERVICES, INC (AT&T)	Occupation (for Individual) PROJECT MANAGER
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
320.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		06		2017

**Transaction ID : 76751399**

Amount of Each Receipt this Period  
100.00

Memo Item

**C. HANSEN, JASON, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address W142N9949 AMBER DR

City GERMANTOWN	State WI	Zip Code 53022-5378
--------------------	-------------	------------------------

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

Name of Employer (for Individual) SBC SERVICES, INC (AT&T)	Occupation (for Individual) PROJECT MANAGER
---	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
345.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2017

**Transaction ID : 76751400**

Amount of Each Receipt this Period  
25.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	149.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 240 OF 485
	<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. WAGNER, RON, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **PO BOX 247**

City <b>BONANZA</b>	State <b>OR</b>	Zip Code <b>97623-0247</b>
------------------------	--------------------	-------------------------------

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

Name of Employer (for Individual) <b>RETIRED</b>	Occupation (for Individual) <b>RETIRED</b>
---	---

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**252.00**

Date of Receipt  
**10 / 11 / 2017**

**Transaction ID : 76751427**

Amount of Each Receipt this Period  
**27.00**

Memo Item

**B. ARNAUD, ROBERT L, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **PO BOX 582**

City <b>SHELBY</b>	State <b>MT</b>	Zip Code <b>59474-0582</b>
-----------------------	--------------------	-------------------------------

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

Name of Employer (for Individual) <b>RETIRED</b>	Occupation (for Individual) <b>RETIRED</b>
---	---

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**201.00**

Date of Receipt  
**10 / 03 / 2017**

**Transaction ID : 76751458**

Amount of Each Receipt this Period  
**48.00**

Memo Item

**C. FRASER, JOHN R, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **105 SCARBOROUGH CT SE**

City <b>MARIETTA</b>	State <b>GA</b>	Zip Code <b>30067-4331</b>
-------------------------	--------------------	-------------------------------

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

Name of Employer (for Individual) <b>US ARMY / STATE OF GA</b>	Occupation (for Individual) <b>RETIRED</b>
---	---

Receipt For:  
 Primary     General  
 Other (specify)

Aggregate Year-to-Date ▼  
**349.00**

Date of Receipt  
**10 / 10 / 2017**

**Transaction ID : 76751465**

Amount of Each Receipt this Period  
**25.00**

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>100.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 241 OF 485
<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. LOVENBERG, RICHARD J, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 548

City HARRISBURG	State IL	Zip Code 62946-0548
--------------------	-------------	------------------------

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

Name of Employer (for Individual) Retired	Occupation (for Individual) Retired - Carpenter
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
230.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	11	/	2017

**Transaction ID : 76751468**

Amount of Each Receipt this Period  
30.00

Memo Item

**B. PERFETTO, CHESTER, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1414 FIELDSTONE RD

City READING	State PA	Zip Code 19608-9362
-----------------	-------------	------------------------

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

Name of Employer (for Individual) CHESTER PERFETTO AGENCY INC.	Occupation (for Individual) INSURANCE
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
277.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	05	/	2017

**Transaction ID : 76751473**

Amount of Each Receipt this Period  
25.00

Memo Item

**C. SALT, RAYSON J, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 580 W 138 S

City HEBRON	State IN	Zip Code 46341-9704
----------------	-------------	------------------------

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

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	03	/	2017

**Transaction ID : 76751477**

Amount of Each Receipt this Period  
100.00

Memo Item

<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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 242 OF 485
	<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. LAKE, RALPH W, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5432 JONESBORO WAY

City BUENA PARK	State CA	Zip Code 90621-1616
--------------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
371.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		16		2017

**Transaction ID : 76751478**

Amount of Each Receipt this Period  
25.00

Memo Item

**B. PROPP, LARRY D, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 83

City FORSYTH	State MT	Zip Code 59327-0083
-----------------	-------------	------------------------

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

Name of Employer (for Individual) Retired	Occupation (for Individual) Retired
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
215.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		16		2017

**Transaction ID : 76751486**

Amount of Each Receipt this Period  
55.00

Memo Item

**C. HALL, PHILLIP, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 466

City BLOUNTSTOWN	State FL	Zip Code 32424-0466
---------------------	-------------	------------------------

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

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
385.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		16		2017

**Transaction ID : 76751502**

Amount of Each Receipt this Period  
50.00

Memo Item

<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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 243 OF 485
	<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. HIGHMAN, ERIC, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 35588 WOLF PEN RD

City WOODSFIELD	State OH	Zip Code 43793-9261
--------------------	-------------	------------------------

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

Name of Employer (for Individual) ORMET PRIMARY ALUMINUM	Occupation (for Individual) RETIRED - WELDER
---	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
296.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	16	/	2017

**Transaction ID : 76751504**

Amount of Each Receipt this Period  
25.00

Memo Item

**B. FINK, GEORGE, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 516 OLD BARNSTABLE RD

City E FALMOUTH	State MA	Zip Code 02536-5440
--------------------	-------------	------------------------

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

Name of Employer (for Individual) Retired	Occupation (for Individual) Retired
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
280.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	23	/	2017

**Transaction ID : 76751507**

Amount of Each Receipt this Period  
20.00

Memo Item

**C. CEARLEY, TERRY, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7807 ALTO WAY

City DUBLIN	State CA	Zip Code 94568-1302
----------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
1100.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	20	/	2017

**Transaction ID : 76751536**

Amount of Each Receipt this Period  
200.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	245.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 244 OF 485
	<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. DUNN, STEVEN ALLEN, , MR, SR**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 600A WHYTE AVE

City ROSEVILLE	State CA	Zip Code 95661-5241
-------------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
210.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		06		2017

**Transaction ID : 76751558**

Amount of Each Receipt this Period  
30.00

Memo Item

**B. FLECK, DONALD, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 13910 STIMMEL ST NE

City PARIS	State OH	Zip Code 44669-9724
---------------	-------------	------------------------

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

Name of Employer (for Individual) Retired	Occupation (for Individual) Retired
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
575.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		23		2017

**Transaction ID : 76751567**

Amount of Each Receipt this Period  
100.00

Memo Item

**C. BENARD, CHRISTINE Z, , MRS,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 19 FAIR WIND DR

City SALEM	State SC	Zip Code 29676-4303
---------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		03		2017

**Transaction ID : 76751569**

Amount of Each Receipt this Period  
500.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	630.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 245 OF 485
	<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. BENARD, MICHAEL P, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 19 FAIR WIND DR

City SALEM	State SC	Zip Code 29676-4303
---------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		03		2017

**Transaction ID : 76751571**

Amount of Each Receipt this Period  
500.00

Memo Item

**B. ALLEN, RICHARD, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4199 WILD TURKEY TRL

City REED CITY	State MI	Zip Code 49677-8501
-------------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
267.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		10		2017

**Transaction ID : 76751578**

Amount of Each Receipt this Period  
25.00

Memo Item

**C. SMITH, WALTER, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 41862 BAINTREE CIR

City NORTHVILLE	State MI	Zip Code 48168-2363
--------------------	-------------	------------------------

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

Name of Employer (for Individual) STATE FARM	Occupation (for Individual) ATTORNEY
---	---

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
238.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		23		2017

**Transaction ID : 76751579**

Amount of Each Receipt this Period  
10.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	535.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 246 OF 485
	<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. PASCHKE, RANDY, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 12750 W 88TH CIR APT 188

City LENEXA	State KS	Zip Code 66215-3576
----------------	-------------	------------------------

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

Name of Employer (for Individual) GUARANTEED FOODS, INC.	Occupation (for Individual) DRIVER
---	---------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
567.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		16		2017

**Transaction ID : 76751613**

Amount of Each Receipt this Period  
37.00

Memo Item

**B. GASSER, FREDRICK C, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 892 H DR S

City EAST LEROY	State MI	Zip Code 49051-9717
--------------------	-------------	------------------------

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

Name of Employer (for Individual) RALSTON FOODS, INC.	Occupation (for Individual) RETIRED - INDUSTRIAL PLUMBER
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
325.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		11		2017

**Transaction ID : 76751673**

Amount of Each Receipt this Period  
25.00

Memo Item

**C. DEGAN, CHARLES R, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2600 BANK ST

City BAKERSFIELD	State CA	Zip Code 93304-2627
---------------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
220.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		23		2017

**Transaction ID : 76751681**

Amount of Each Receipt this Period  
20.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	82.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 247 OF 485
	<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. CHRISTIE, FRANK, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7790 14 MILE RD

City MECOSTA	State MI	Zip Code 49332-9625
-----------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
411.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		04		2017

**Transaction ID : 76751683**

Amount of Each Receipt this Period  
30.00

Memo Item

**B. BENOIT, NORMAN, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4711 NW REDWOOD DR

City TOPEKA	State KS	Zip Code 66618-1263
----------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
274.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		10		2017

**Transaction ID : 76751693**

Amount of Each Receipt this Period  
100.00

Memo Item

**C. DAHLKE, JAMES C, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2411 OCCIDENTAL HWY

City ADRIAN	State MI	Zip Code 49221-9504
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) Retired
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
224.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		21		2017

**Transaction ID : 76751697**

Amount of Each Receipt this Period  
25.00

Memo Item

<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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 248 OF 485
	<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. FARRINGTON, TYLER, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 120

City CALLAHAN	State CA	Zip Code 96014-0120
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Siskiyou Telephone	Occupation (for Individual) Spicer
---	---------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
439.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		16		2017

**Transaction ID : 76751705**

Amount of Each Receipt this Period  
50.00

Memo Item

**B. MARTIN, DALE, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 259 WINCHESTER RD

City FAIRLAWN	State OH	Zip Code 44333-3561
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
320.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		06		2017

**Transaction ID : 76751713**

Amount of Each Receipt this Period  
40.00

Memo Item

**C. SERBIN, STEPHEN, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 368

City NEW LONDON	State MO	Zip Code 63459-0368
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SERBIN BUILDING CONTRACTORS	Occupation (for Individual) SELF EMPLOYED BUILDER
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
274.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		03		2017

**Transaction ID : 76751719**

Amount of Each Receipt this Period  
25.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	115.00
<b>TOTAL</b> This Period (last page this line number only).....	



**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 249 OF 485
	<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. HANSON, GEORGE T, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 615 SNIVELY RD

City DULUTH	State MN	Zip Code 55803-2146
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Self Employed	Occupation (for Individual) Real Estate
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
324.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		11		2017

**Transaction ID : 76751734**

Amount of Each Receipt this Period  
25.00

Memo Item

**B. SHEFFIELD, ROBERT, , DR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1047 PEBBLE BEACH DR

City CLAYTON	State CA	Zip Code 94517-2225
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Robert Sheffield, DDS, Inc.	Occupation (for Individual) Orthodontist
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
210.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		10		2017

**Transaction ID : 76751735**

Amount of Each Receipt this Period  
50.00

Memo Item

**C. UMSTATTD, WILLIAM, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 733 STROKE RD

City VILLANOVA	State PA	Zip Code 19085-2050
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) ENGINEERING CONSULTANT
--	---

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
700.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		02		2017

**Transaction ID : 76751737**

Amount of Each Receipt this Period  
100.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	175.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 250 OF 485
	<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. TORSIELLO, ROCCO T, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 16 BERGER ST

City MOONACHIE	State NJ	Zip Code 07074-1514
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) KULITE SEMICONDUCTOR PRODUCTS	Occupation (for Individual) MACHINIST
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
229.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		03		2017

**Transaction ID : 76751739**

Amount of Each Receipt this Period  
25.00

Memo Item

**B. HABERMEHL, BRUCE, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2711 W GRACE ST APT 2

City RICHMOND	State VA	Zip Code 23220-1979
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
304.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		05		2017

**Transaction ID : 76751740**

Amount of Each Receipt this Period  
25.00

Memo Item

**C. STOTZGR, JOHN F, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 15713 ROTHSCHILD CT

City HAYMARKET	State VA	Zip Code 20169-6177
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) THE BOEING COMPANY	Occupation (for Individual) COMPUTER ADMINISTRATOR
---	---

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		22		2017

**Transaction ID : 76751773**

Amount of Each Receipt this Period  
100.00

Memo Item

<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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 251 OF 485
	<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. HUTCHISON, JOSEPH E, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4729 SUNSET DR

City PANAMA CITY	State FL	Zip Code 32404-7346
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
262.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		23		2017

**Transaction ID : 76751793**

Amount of Each Receipt this Period  
25.00

Memo Item

**B. HUMPHREY, DOUG A, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1304 W PHOENIX ST

City BROKEN ARROW	State OK	Zip Code 74011-1835
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Broken Arrow Woodworks	Occupation (for Individual) Cabinet Builder
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
450.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		02		2017

**Transaction ID : 76751804**

Amount of Each Receipt this Period  
50.00

Memo Item

**C. KRAUS, LAWRENCE W, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 914

City SNOWFLAKE	State AZ	Zip Code 85937-0914
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		01		2017

**Transaction ID : 76751811**

Amount of Each Receipt this Period  
25.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	100.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 252 OF 485
	<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. IMLER, WILLIAM H, , MR, III**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1955 BELLS FERRY RD APT 3727

City MARIETTA	State GA	Zip Code 30066-7011
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) UNIPRO FOODSERVICE, INC	Occupation (for Individual) DIRECTOR, EDA/MIT ACCOUNTING
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
405.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		06		2017

**Transaction ID : 76751817**

Amount of Each Receipt this Period  
100.00

Memo Item

**B. WILLIAMS, DANIEL D, , MR, JR**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3220 S GRANT ST

City ENGLEWOOD	State CO	Zip Code 80113-2607
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) retired
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
265.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		20		2017

**Transaction ID : 76751830**

Amount of Each Receipt this Period  
37.00

Memo Item

**C. RENAUD, ROBERT E, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 412 S WEST ST

City CARLISLE	State PA	Zip Code 17013-3855
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Dickinson College	Occupation (for Individual) Manager
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
456.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		02		2017

**Transaction ID : 76751840**

Amount of Each Receipt this Period  
100.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	237.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 253 OF 485
	<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. RANKIN, JAMES, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 72 EVERGREEN DR

City PORT ALLEGANY	State PA	Zip Code 16743-4404
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Retired	Occupation (for Individual) Retired
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
296.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		06		2017

**Transaction ID : 76751846**

Amount of Each Receipt this Period  
25.00

Memo Item

**B. CRAMER, MICHAEL M, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6041 AMBERDALE DR

City YORBA LINDA	State CA	Zip Code 92886-5950
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Ajinomoto Windsor, Inc	Occupation (for Individual) Sr Director, FSQA
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
416.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		16		2017

**Transaction ID : 76751848**

Amount of Each Receipt this Period  
40.00

Memo Item

**C. STAIRS, JENNIFER, , MS,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 412 S WEST ST

City CARLISLE	State PA	Zip Code 17013-3855
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Defense Logistics Agency	Occupation (for Individual) Human Resources Specialist
---	---

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
401.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		02		2017

**Transaction ID : 76751856**

Amount of Each Receipt this Period  
100.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	165.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 254 OF 485
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**National Rifle Association of America Political Victory Fund**

**A. NELSON, LAUREN E, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 403 N SUNSET BLVD

City GULF BREEZE	State FL	Zip Code 32561-4059
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) US NAVY	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
209.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		17		2017

**Transaction ID : 76751865**

Amount of Each Receipt this Period  
25.00

Memo Item

**B. MIDKIFF, ERNEST, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 84 TOWNSHIP ROAD 1248

City PROCTORVILLE	State OH	Zip Code 45669-8662
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) STEEL OF WEST VIRGINIA	Occupation (for Individual) PRODUCTION WORKER
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
222.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		20		2017

**Transaction ID : 76751866**

Amount of Each Receipt this Period  
25.00

Memo Item

**C. MASON, JAMES, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4810 NEWBERN RD

City PULASKI	State VA	Zip Code 24301-6931
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
246.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		05		2017

**Transaction ID : 76751870**

Amount of Each Receipt this Period  
25.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	75.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 255 OF 485
	<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. CHRIST, ROBT, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 538 S HARMONY RD

City OREGON	State IL	Zip Code 61061-9232
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Retired	Occupation (for Individual) Retired
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
215.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2017

**Transaction ID : 76751889**

Amount of Each Receipt this Period  
55.00

Memo Item

**B. CZYZEWSKI, LUDWIG, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1815 CENTRAL AVE

City FAIRBANKS	State AK	Zip Code 99709-4222
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
405.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		16		2017

**Transaction ID : 76751896**

Amount of Each Receipt this Period  
55.00

Memo Item

**C. TELLE, J THOMAS, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 680 REMUDA RD

City FREDERICKSBURG	State TX	Zip Code 78624-7031
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
360.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		04		2017

**Transaction ID : 76751903**

Amount of Each Receipt this Period  
37.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	147.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 256 OF 485
	<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. BRISTOL, KEN, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 125 COTTAGE CREEK LN

City YORK	State SC	Zip Code 29745-9152
--------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED - BANKER
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
10		16		2017

**Transaction ID : 76751904**

Amount of Each Receipt this Period  
50.00

Memo Item

**B. CARAWAY, LONNIE, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 807 EUCLID AVE

City MARTINS FERRY	State OH	Zip Code 43935-1215
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Turk Care Supply	Occupation (for Individual) Laborer
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
215.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
10		05		2017

**Transaction ID : 76751907**

Amount of Each Receipt this Period  
25.00

Memo Item

**C. COX, JOHN H, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 1007

City PURVIS	State MS	Zip Code 39475-1007
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
204.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
10		10		2017

**Transaction ID : 76751923**

Amount of Each Receipt this Period  
25.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	100.00
<b>TOTAL</b> This Period (last page this line number only).....	



**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 257 OF 485
	<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. ARROWSMITH, RALPH C, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 15125 MCCOY RD

City RED BLUFF	State CA	Zip Code 96080-8943
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Arrowsmith & Sons, Inc.	Occupation (for Individual) President
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
350.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	10	/	2017

**Transaction ID : 76751952**

Amount of Each Receipt this Period  
100.00

Memo Item

**B. FLINCHUM, JERRY, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 645 BETTY DR

City CHRISTIANSBURG	State VA	Zip Code 24073-1913
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Retired	Occupation (for Individual) Retired
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
242.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	03	/	2017

**Transaction ID : 76751963**

Amount of Each Receipt this Period  
37.00

Memo Item

**C. CERTA, PAUL, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2116 BEECH AVE

City RICHLAND	State WA	Zip Code 99354-2742
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) WASHINGTON RIVER PROTECTION	Occupation (for Individual) ENGINEER
--	---

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	19	/	2017

**Transaction ID : 76751964**

Amount of Each Receipt this Period  
100.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	237.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 258 OF 485
	<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. GEITH, JAMES W, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3530 ROCK CREEK VILLA DR

City QUINTON	State VA	Zip Code 23141-1654
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Retired	Occupation (for Individual) Retired
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
205.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		20		2017

**Transaction ID : 76751977**

Amount of Each Receipt this Period  
55.00

Memo Item

**B. ATKINSON, PHILIP F, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9222 32ND AVE

City KENOSHA	State WI	Zip Code 53142-5426
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) US Navy	Occupation (for Individual) Retired
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
214.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		04		2017

**Transaction ID : 76751992**

Amount of Each Receipt this Period  
37.00

Memo Item

**C. COSTON, DONALD A, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3505 STATE ROUTE 488

City CLIFTON SPGS	State NY	Zip Code 14432-9378
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Retired	Occupation (for Individual) Retired
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
394.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		06		2017

**Transaction ID : 76751998**

Amount of Each Receipt this Period  
37.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	129.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 259 OF 485
	<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. OERTELL, PAUL, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 305 W ADAMS ST

City VALLEY	State NE	Zip Code 68064-9766
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
555.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		10		2017

**Transaction ID : 76752006**

Amount of Each Receipt this Period  
50.00

Memo Item

**B. HICKEY, JERRY W, , , SR**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 116 ELM ST

City OGDEN	State AR	Zip Code 71853-9521
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
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Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
225.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		10		2017

**Transaction ID : 76752025**

Amount of Each Receipt this Period  
100.00

Memo Item

**C. HORNE, DONALD, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2964 GLADDEN LN W

City ALEXANDRIA	State AL	Zip Code 36250-5187
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) US Army	Occupation (for Individual) Retired
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		06		2017

**Transaction ID : 76752026**

Amount of Each Receipt this Period  
25.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	175.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 260 OF 485
	<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. RASH, CHARLES R, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 42991 CORALBELLS PL

City LEESBURG	State VA	Zip Code 20176-1684
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Charles Rash & Associates	Occupation (for Individual) Consultant
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
222.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		03		2017

**Transaction ID : 76752045**

Amount of Each Receipt this Period  
25.00

Memo Item

**B. HAWKINS, RICHARD M, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 605

City MEAD	State CO	Zip Code 80542-0605
--------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
273.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		16		2017

**Transaction ID : 76752047**

Amount of Each Receipt this Period  
55.00

Memo Item

**C. HANSON, ERIC L, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8195 SHACKELFORD DR

City FRISCO	State TX	Zip Code 75035-0596
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GULFSTREAM AEROSPACE	Occupation (for Individual) SALES
---	--------------------------------------

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
1200.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		03		2017

**Transaction ID : 76752057**

Amount of Each Receipt this Period  
200.00

Memo Item

<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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 261 OF 485
	<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. CHRISS, CAL, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9935 W SABIN CHURCH RD

City PEARL CITY	State IL	Zip Code 61062-9035
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Retired	Occupation (for Individual) Retired
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
221.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		10		2017

**Transaction ID : 76752063**

Amount of Each Receipt this Period  
25.00

Memo Item

**B. BLAHO, WILLIAM KEITH, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2294 ENON RD

City ENON VALLEY	State PA	Zip Code 16120-1436
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Retired	Occupation (for Individual) Retired
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		23		2017

**Transaction ID : 76752093**

Amount of Each Receipt this Period  
50.00

Memo Item

**C. MONTGOMERY, BILL, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 228 5TH ST

City PARK HILLS	State MO	Zip Code 63601-2361
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
201.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		24		2017

**Transaction ID : 76752130**

Amount of Each Receipt this Period  
55.00

Memo Item

<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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 262 OF 485
	<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. MANSELL, DUANE A, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 668 SALT SPRINGS RD

City WARREN	State OH	Zip Code 44481-8621
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
280.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		03		2017

**Transaction ID : 76752140**

Amount of Each Receipt this Period  
10.00

Memo Item

**B. ELHENY, DAVID R, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 164 ROLLING RIDGE DR

City KARNS CITY	State PA	Zip Code 16041-1122
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ROLLING RIDGE FARMS	Occupation (for Individual) FARM MANAGER
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
239.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		03		2017

**Transaction ID : 76752164**

Amount of Each Receipt this Period  
37.00

Memo Item

**C. WHITNEY, NATHANIEL, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 26 VALLEY ST

City NORFOLK	State MA	Zip Code 02056-1629
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
235.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		06		2017

**Transaction ID : 76752182**

Amount of Each Receipt this Period  
100.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	147.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 263 OF 485
	<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. STRICKLAND, CHARLES, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 148

City CARNESVILLE	State GA	Zip Code 30521-0148
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
210.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		06		2017

**Transaction ID : 76752191**

Amount of Each Receipt this Period  
30.00

Memo Item

**B. WILLIAMS, MATTHEW, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4560 N DUDLEYVILLE RD

City WINKELMAN	State AZ	Zip Code 85292-9724
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) DISABLED	Occupation (for Individual) DISABLED
---	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
490.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		04		2017

**Transaction ID : 76752215**

Amount of Each Receipt this Period  
40.00

Memo Item

**C. CHURCH, JAMES, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 533 HILTON AVE

City ROCKFORD	State IL	Zip Code 61107-4720
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
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Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		06		2017

**Transaction ID : 76752251**

Amount of Each Receipt this Period  
100.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	170.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 264 OF 485
	<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. GILBERT, DENNIS, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3825 RIVER DOWNS DR

City EDMOND	State OK	Zip Code 73034-2616
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
350.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
10		10		2017

**Transaction ID : 76752252**

Amount of Each Receipt this Period  
100.00

Memo Item

**B. NICHOLS, JEFF, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10 DOGWOOD CT

City WOODLAND PARK	State NJ	Zip Code 07424-3711
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) PORT AUTHORITY OF NY & NJ	Occupation (for Individual) LAW ENFORCEMENT
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
275.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
10		03		2017

**Transaction ID : 76752270**

Amount of Each Receipt this Period  
26.00

Memo Item

**C. NICHOLS, JEFF, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10 DOGWOOD CT

City WOODLAND PARK	State NJ	Zip Code 07424-3711
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) PORT AUTHORITY OF NY & NJ	Occupation (for Individual) LAW ENFORCEMENT
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
299.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
10		03		2017

**Transaction ID : 76752271**

Amount of Each Receipt this Period  
24.00

Memo Item

<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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 265 OF 485
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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. NICHOLS, JEFF, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 10 DOGWOOD CT  
 City WOODLAND PARK State NJ Zip Code 07424-3711  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PORT AUTHORITY OF NY & NJ Occupation (for Individual) LAW ENFORCEMENT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 324.00

Date of Receipt 10 / 03 / 2017  
**Transaction ID : 76752272**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**B. MAFFETT, STEPHEN, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2627 SOUTHFIELD CT  
 City FORT COLLINS State CO Zip Code 80525-5697  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Banner Health Occupation (for Individual) Medical Laboratory Scientist  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 10 / 19 / 2017  
**Transaction ID : 76752278**  
 Amount of Each Receipt this Period 55.00  
 Memo Item

**C. BOGART, MICHAEL J, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO BOX 295  
 City SUMPTER State OR Zip Code 97877-0295  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 23 / 2017  
**Transaction ID : 76752283**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	105.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 266 OF 485
	<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. CAVALIER, RICHARD T, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 410 W BROADWAY ST

City SPARTA	State IL	Zip Code 62286-1640
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) retired
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
273.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		24		2017

**Transaction ID : 76752288**

Amount of Each Receipt this Period  
55.00

Memo Item

**B. HANSEN, CARROLL, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 550 GRANDVIEW LN

City PLATTEVILLE	State WI	Zip Code 53818-1133
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Retired	Occupation (for Individual) Retired
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
314.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		11		2017

**Transaction ID : 76752296**

Amount of Each Receipt this Period  
35.00

Memo Item

**C. KAISER, DALE A, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 327 S 19TH ST

City CHESTERTON	State IN	Zip Code 46304-1943
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ARCLOR MITTAL STEEL CORP	Occupation (for Individual) MILLWRIGHT
---	---

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
426.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		20		2017

**Transaction ID : 76752326**

Amount of Each Receipt this Period  
100.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	190.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 267 OF 485
	<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. BAILEY, ROBERT, , MR, JR**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 138 BOLLINGER DR  
 City MOUNT BETHEL State PA Zip Code 18343-5356  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) HOPE SCHOOL Occupation (for Individual) CUSTODIAN  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 10 / 02 / 2017  
**Transaction ID : 76752330**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**B. SWEEDEN, JACKIE, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 915 LAKE RD  
 City ATKINS State AR Zip Code 72823-7089  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 222.00

Date of Receipt 10 / 30 / 2017  
**Transaction ID : 76752342**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**C. KENOURGIOS, JOHN, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4473 ROSCOMMON ST UNIT B  
 City LAS VEGAS State NV Zip Code 89147-7247  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 337.00

Date of Receipt 10 / 25 / 2017  
**Transaction ID : 76752347**  
 Amount of Each Receipt this Period 37.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	162.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 268 OF 485
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**National Rifle Association of America Political Victory Fund**

**A. HILL, RONALD B, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2972 NEW HOPEWELL CHURCH RD  
 City PROVIDENCE State KY Zip Code 42450-9743  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) KIMBERLY - CLARK Occupation (for Individual) TECHNICIAN  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 243.00

Date of Receipt 10 / 12 / 2017  
**Transaction ID : 76752358**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**B. KRIEGER, IRVING, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9417 HIGHWAY 63  
 City HOUSTON State MO Zip Code 65483-2579  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 495.00

Date of Receipt 10 / 10 / 2017  
**Transaction ID : 76752368**  
 Amount of Each Receipt this Period 55.00  
 Memo Item

**C. HANSON, JOHN, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 435 S MESA HILLS DR APT 103  
 City EL PASO State TX Zip Code 79912-5449  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 11 / 2017  
**Transaction ID : 76752380**  
 Amount of Each Receipt this Period 30.00  
 Memo Item

<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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 269 OF 485
	<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. SCARBOROUGH, JULIAN T., MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 325 WESTRIDGE DR

City RALEIGH	State NC	Zip Code 27609-5218
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SCARBOROUGH CREST FARMS, LLC	Occupation (for Individual) FARMING
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
850.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		02		2017

**Transaction ID : 76752394**

Amount of Each Receipt this Period  
100.00

Memo Item

**B. SPROVACH, CRAIG, MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 14341 W SHELLEY LN

City WADSWORTH	State IL	Zip Code 60083-9550
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
210.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		06		2017

**Transaction ID : 76752396**

Amount of Each Receipt this Period  
25.00

Memo Item

**C. RIPLEY, JOHN L., MR, JR**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 45 WESTHAMPTON WAY

City LANSDALE	State PA	Zip Code 19446-7316
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) INSURANCE SALES
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
260.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		06		2017

**Transaction ID : 76752424**

Amount of Each Receipt this Period  
50.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	175.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 270 OF 485
	<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. STARR, GEORGE R, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10001 W BRIGHT ANGEL CIR

City SUN CITY	State AZ	Zip Code 85351-1912
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) DESERT DIAMOND CASINO	Occupation (for Individual) SECURITY OFFICER
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
322.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		06		2017

**Transaction ID : 76752432**

Amount of Each Receipt this Period  
25.00

Memo Item

**B. STARR, GEORGE R, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10001 W BRIGHT ANGEL CIR

City SUN CITY	State AZ	Zip Code 85351-1912
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) DESERT DIAMOND CASINO	Occupation (for Individual) SECURITY OFFICER
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
297.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		03		2017

**Transaction ID : 76752433**

Amount of Each Receipt this Period  
24.00

Memo Item

**C. BOESCH, FRANK, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10131 SOUTHERN BREEZE CT

City WEEKI WACHEE	State FL	Zip Code 34613-6527
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) San Joaquin County	Occupation (for Individual) Retired
---	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
320.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		10		2017

**Transaction ID : 76752461**

Amount of Each Receipt this Period  
35.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	84.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 271 OF 485
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**National Rifle Association of America Political Victory Fund**

**A. DACK, WILLIAM J, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 10938 2ND ST # R  
 City ROSCOE State IL Zip Code 61073-9537  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED - MACHINE BUILDER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 269.00

Date of Receipt 10 / 10 / 2017  
**Transaction ID : 76752468**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**B. CROFTS, CHRISTOPHER, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO BOX 883  
 City CHEYENNE State WY Zip Code 82003-0883  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 10 / 16 / 2017  
**Transaction ID : 76752492**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**C. JACOBS, LARRY A, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1465 W 145 N  
 City IDAHO FALLS State ID Zip Code 83401-5151  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 10 / 10 / 2017  
**Transaction ID : 76752493**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	175.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 272 OF 485
	<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. MARBLE, ROBERT S, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7716 BORTHWICK DR

City FAYETTEVILLE	State NC	Zip Code 28306-8501
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) US ARMY	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
205.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		03		2017

**Transaction ID : 76752497**

Amount of Each Receipt this Period  
25.00

Memo Item

**B. EILERS, CHARLES, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 148 DIALITA DR

City WESTWEGO	State LA	Zip Code 70094-2816
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
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Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
225.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		16		2017

**Transaction ID : 76752500**

Amount of Each Receipt this Period  
75.00

Memo Item

**C. WILLIAMS, JERRY, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 422 PRINTZ MILL RD

City LURAY	State VA	Zip Code 22835-7533
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) US Army	Occupation (for Individual) Retired
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
206.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		16		2017

**Transaction ID : 76752507**

Amount of Each Receipt this Period  
25.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	125.00
<b>TOTAL</b> This Period (last page this line number only).....	



**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 273 OF 485
	<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. BARKER, SANDRA G, , MS,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 115 QUIET LN

City HAZEL GREEN	State AL	Zip Code 35750-7623
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) QWEST COMMUNICATIONS	Occupation (for Individual) RETIRED
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1025.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		10		2017

**Transaction ID : 76752512**

Amount of Each Receipt this Period  
200.00

Memo Item

**B. ROBERTS, CLYDE R, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 1194

City BELFAIR	State WA	Zip Code 98528-1194
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
335.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		12		2017

**Transaction ID : 76752520**

Amount of Each Receipt this Period  
50.00

Memo Item

**C. ROVERTSON, TOM, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 19450 ARABIAN LN

City FRENCHTOWN	State MT	Zip Code 59834-9552
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) MANAGEMENT CONSULTANT
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
350.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		20		2017

**Transaction ID : 76752578**

Amount of Each Receipt this Period  
100.00

Memo Item

<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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 274 OF 485
	<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. CONNER, WILBUR C, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 185

City OLDWICK	State NJ	Zip Code 08858-0185
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
211.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		16		2017

**Transaction ID : 76752591**

Amount of Each Receipt this Period  
25.00

Memo Item

**B. JACKSON, CHARLES, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 773 CASE TRL NW

City BROOKHAVEN	State MS	Zip Code 39601-9059
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
227.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		10		2017

**Transaction ID : 76752595**

Amount of Each Receipt this Period  
25.00

Memo Item

**C. FISCHER, CLEMENS, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 205 PALM DR

City BEAVER FALLS	State PA	Zip Code 15010-5127
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Retired	Occupation (for Individual) Retired
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
323.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		03		2017

**Transaction ID : 76752597**

Amount of Each Receipt this Period  
37.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	87.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 275 OF 485
	<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. CAPPS, DON, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 16 DENISE PL

City LONGMONT	State CO	Zip Code 80501-3107
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CAPPS WELDING	Occupation (for Individual) WELDER
--	---------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
299.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		16		2017

**Transaction ID : 76752600**

Amount of Each Receipt this Period  
25.00

Memo Item

**B. LONERGAN, KEVIN E, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 610

City N SCITUATE	State RI	Zip Code 02857-0610
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
225.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		16		2017

**Transaction ID : 76752611**

Amount of Each Receipt this Period  
75.00

Memo Item

**C. SELLNER, ELLIOTT, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1809 PRAIRIE AVE SW

City FARIBAULT	State MN	Zip Code 55021-5514
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) C.P.A.
--	---------------------------------------

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
235.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		11		2017

**Transaction ID : 76752616**

Amount of Each Receipt this Period  
50.00

Memo Item

<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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 276 OF 485
	<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. WASSON, PAUL D, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4709 ROYAL OAK DR

City OKLAHOMA CITY	State OK	Zip Code 73135-2029
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) AFFINIA GROUP	Occupation (for Individual) MAINTENANCE
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
214.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2017

**Transaction ID : 76752635**

Amount of Each Receipt this Period  
25.00

Memo Item

**B. KRAUSE, DAVID C, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 904 SCOTT DR

City ELGIN	State IL	Zip Code 60123-2027
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
310.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		10		2017

**Transaction ID : 76752661**

Amount of Each Receipt this Period  
25.00

Memo Item

**C. RUCH, GLEN W, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7525 HONNEN DR N

City INDIANAPOLIS	State IN	Zip Code 46256-3227
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual) INVENTOR
-----------------------------------	---

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
600.09

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		17		2017

**Transaction ID : 76752679**

Amount of Each Receipt this Period  
200.03

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	250.03
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 277 OF 485  
(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. SCHNEIDER, GUY, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 215 ECHO AVE  
 City MILLER PLACE State NY Zip Code 11764-2307  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) FDNY Occupation (for Individual) Retired Firefighter  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 326.00

Date of Receipt 10 / 05 / 2017  
**Transaction ID : 76752685**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**B. GILLEN, THOMAS, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1015 SUMMER RIDGE CT  
 City MURRYSVILLE State PA Zip Code 15668-8513  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 23 / 2017  
**Transaction ID : 76752691**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**C. MURPHY, MATT, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3714 S 182ND ST  
 City OMAHA State NE Zip Code 68130-4208  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PINNACLE CONSTRUCTION Occupation (for Individual) CONSTRUCTION PROJECT MANAGE  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 273.00

Date of Receipt 10 / 05 / 2017  
**Transaction ID : 76752701**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 278 OF 485
	<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. KORPAN, ROBERT, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 135 PINE AVE

City RUNNEMEDE	State NJ	Zip Code 08078-1849
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SWIFT TRANSPORTATION	Occupation (for Individual) TRUCK DRIVER
---	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
420.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		06		2017

**Transaction ID : 76752707**

Amount of Each Receipt this Period  
25.00

Memo Item

**B. BROWNELL, PETER J, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5922 GARLOW RD

City NIAGARA FALLS	State NY	Zip Code 14304-1017
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GOODYEAR TIRE & RUBBER	Occupation (for Individual) RETIRED
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
240.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		04		2017

**Transaction ID : 76752720**

Amount of Each Receipt this Period  
25.00

Memo Item

**C. DEWELL, REX L, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 269 E LYNWOOD ST

City GRAND JCT	State CO	Zip Code 81503-3802
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) U.S. NAVY	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
470.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		11		2017

**Transaction ID : 76752726**

Amount of Each Receipt this Period  
55.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	105.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 279 OF 485
	<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. ROBB, ROBERT L, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 17006 CHALET DR

City BELLEVUE	State NE	Zip Code 68123-4219
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
310.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		20		2017

**Transaction ID : 76752731**

Amount of Each Receipt this Period  
55.00

Memo Item

**B. GOODE, BETTY M, , MRS,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 319 MOUNT GILEAD CHURCH RD

City MILLS RIVER	State NC	Zip Code 28759-3870
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Retired	Occupation (for Individual) Retired - Teacher
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
340.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		03		2017

**Transaction ID : 76752742**

Amount of Each Receipt this Period  
55.00

Memo Item

**C. OWENS, DAVID L, , MR, SR**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 834

City HARVEY	State LA	Zip Code 70059-0834
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Retired	Occupation (for Individual) Retired
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
320.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		10		2017

**Transaction ID : 76752755**

Amount of Each Receipt this Period  
40.00

Memo Item

<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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 280 OF 485
	<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. CROSS, DUANE, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7560 ORLEANS RD

City ORLEANS	State MI	Zip Code 48865-9761
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) SALES - SNAP-ON TOOLS
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		11		2017

**Transaction ID : 76752781**

Amount of Each Receipt this Period  
15.00

Memo Item

**B. MAUTON, DENIS, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 105 NE 59TH TER APT D

City GLADSTONE	State MO	Zip Code 64118-4227
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) DISABILITY
---	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
215.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		16		2017

**Transaction ID : 76752797**

Amount of Each Receipt this Period  
25.00

Memo Item

**C. MCKINLEY, DANNY, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1000 HUBBARD ST

City MOUNTAIN GROVE	State MO	Zip Code 65711-1271
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) FMC TRANSPORT	Occupation (for Individual) TRUCK DRIVER
--	---

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
334.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		10		2017

**Transaction ID : 76752843**

Amount of Each Receipt this Period  
25.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	65.00
<b>TOTAL</b> This Period (last page this line number only).....	



**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 281 OF 485
	<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. STEELE, THOMAS, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 351 DECKMAN HOLLOW RD

City WILLIAMSPORT	State PA	Zip Code 17701-8813
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		16		2017

**Transaction ID : 76752868**

Amount of Each Receipt this Period  
50.00

Memo Item

**B. FULLER, DANIEL, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 135 AMBER WOODS DR

City FORT MILL	State SC	Zip Code 29708-6421
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CHENIERE ENERGY	Occupation (for Individual) DIRECTOR MARINE OPERATIONS
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
600.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		23		2017

**Transaction ID : 76752869**

Amount of Each Receipt this Period  
60.00

Memo Item

**C. LAUER, AMBROSE, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8101 W MACARTHUR RD

City WICHITA	State KS	Zip Code 67215-8438
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED - FARMER
--	---

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
243.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		04		2017

**Transaction ID : 76752870**

Amount of Each Receipt this Period  
55.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	165.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 282 OF 485
	<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. SMITH, CHARLES H, , MR, I**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 13 N PELICAN DR  
 City KEY LARGO State FL Zip Code 33037-5309  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Point-North, Ltd Occupation (for Individual) Self Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt 10 / 12 / 2017  
**Transaction ID : 76752895**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**B. ERMIS, DAVID S, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 10304 COUNTY ROAD 2253  
 City TYLER State TX Zip Code 75707-3210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SAFELITE AUTOGLASS Occupation (for Individual) STORE MANAGER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 219.00

Date of Receipt 10 / 06 / 2017  
**Transaction ID : 76752900**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**C. YAGER, JOSEPH, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 771 7TH AVE  
 City EAST LIVERPOOL State OH Zip Code 43920-3707  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 10 / 03 / 2017  
**Transaction ID : 76752941**  
 Amount of Each Receipt this Period 55.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional).....▶ 105.00  
**TOTAL** This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 283 OF 485
	<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. LANG, THOMAS R, , MR, II**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6654 12TH TER N  
 City ST PETERSBURG State FL Zip Code 33710-6122  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PINELLAS COUNTY SCHOOLS Occupation (for Individual) RESEARCH MANAGER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 285.00

Date of Receipt 10 / 04 / 2017  
**Transaction ID : 76752980**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**B. MASSAGLIA, TOM, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO BOX 111  
 City CARMEL VALLEY State CA Zip Code 93924-0111  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt 10 / 11 / 2017  
**Transaction ID : 76752992**  
 Amount of Each Receipt this Period 120.00  
 Memo Item

**C. WOOD, JAMES, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 530 ROSEMARIE DR  
 City ARCADIA State CA Zip Code 91007-8318  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Unemployed Occupation (for Individual) Unemployed  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 304.00

Date of Receipt 10 / 23 / 2017  
**Transaction ID : 76752999**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	245.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 284 OF 485
	<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. STATEN, DONALD L, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1456 PEKIN DR SE  
 City EAST CANTON State OH Zip Code 44730-9574  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt 10 / 06 / 2017  
**Transaction ID : 76753029**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**B. GRAY, KEVIN T, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1005 CALLE GARZA NE  
 City ALBUQUERQUE State NM Zip Code 87113-1249  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SIGMA SCIENCE, INC. Occupation (for Individual) CONSULTING ENGINEER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 431.00

Date of Receipt 10 / 04 / 2017  
**Transaction ID : 76753033**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**C. SIERANT, LEON, , MR, JR**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 725 SUMMIT AVE  
 City KENILWORTH State NJ Zip Code 07033-1711  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 365.00

Date of Receipt 10 / 10 / 2017  
**Transaction ID : 76753039**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

<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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 285 OF 485
	<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. KLOWETTER, ROBERT, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 829 E DONALD ST

City SOUTH BEND	State IN	Zip Code 46613-2918
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) United Parcel Service	Occupation (for Individual) Retired
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
600.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		04		2017

**Transaction ID : 76753053**

Amount of Each Receipt this Period  
50.00

Memo Item

**B. BEIER, JERRY L, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 612 1/2 E CHESTNUT ST

City BLOOMINGTON	State IL	Zip Code 61701-3228
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ELECTROLUX HCPNA	Occupation (for Individual) LAB TECH
---	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
264.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		03		2017

**Transaction ID : 76753061**

Amount of Each Receipt this Period  
37.00

Memo Item

**C. KING, WILLIAM R, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1402 22ND ST NE UNIT 258

City AUBURN	State WA	Zip Code 98002-3400
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) retired
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
455.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2017

**Transaction ID : 76753063**

Amount of Each Receipt this Period  
100.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	187.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 286 OF 485
	<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. CALDERONE, DAVID R, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 120 N WINDING RD

City WELLSVILLE	State PA	Zip Code 17365-9754
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Retired	Occupation (for Individual) Retired
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
620.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		13		2017

**Transaction ID : 76753070**

Amount of Each Receipt this Period  
55.00

Memo Item

**B. RASMUSSEN, DON, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3720 BRANT ST

City RENO	State NV	Zip Code 89508-8895
--------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Retired	Occupation (for Individual) Retired
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
231.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2017

**Transaction ID : 76753077**

Amount of Each Receipt this Period  
25.00

Memo Item

**C. RASMUSSEN, DON, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3720 BRANT ST

City RENO	State NV	Zip Code 89508-8895
--------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Retired	Occupation (for Individual) Retired
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
206.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2017

**Transaction ID : 76753078**

Amount of Each Receipt this Period  
25.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	105.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 287 OF 485
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**National Rifle Association of America Political Victory Fund**

**A. ARMSTRONG, JOHN D, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO BOX 870186  
 City WASILLA State AK Zip Code 99687-0186  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) US NAVY Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 321.00

Date of Receipt 10 / 17 / 2017  
**Transaction ID : 76753080**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**B. ARMSTRONG, JOHN D, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO BOX 870186  
 City WASILLA State AK Zip Code 99687-0186  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) US NAVY Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 296.00

Date of Receipt 10 / 03 / 2017  
**Transaction ID : 76753081**  
 Amount of Each Receipt this Period 24.00  
 Memo Item

**C. WILLIAMS, MORRIS, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 144 OAKRIDGE DR  
 City KERRVILLE State TX Zip Code 78028-7249  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) JAMES AVERY CRAFTSMAN Occupation (for Individual) BENCH TECH  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 281.00

Date of Receipt 10 / 04 / 2017  
**Transaction ID : 76753082**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	74.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 288 OF 485
	<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. LONG, LARRY, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 80 N PORTAGE PATH APT 14B7

City AKRON	State OH	Zip Code 44303-2526
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BABLOCK & WILCOX	Occupation (for Individual) RETIRED-SENIOR BUYER
---	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
242.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2017

**Transaction ID : 76753096**

Amount of Each Receipt this Period  
55.00

Memo Item

**B. STOCKWELL, DAVID, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1918 DANUBE WAY

City BOLINGBROOK	State IL	Zip Code 60490-6501
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		12		2017

**Transaction ID : 76753115**

Amount of Each Receipt this Period  
100.00

Memo Item

**C. DEERBERG, DARRELL D, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 31386

City INDEPENDENCE	State OH	Zip Code 44131-0386
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Retired	Occupation (for Individual) Retired
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
274.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		06		2017

**Transaction ID : 76753169**

Amount of Each Receipt this Period  
25.00

Memo Item

<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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 289 OF 485
	<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. LUPO, ARTHUR, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1512 BEACH AVE APT 19

City BRONX	State NY	Zip Code 10460-6353
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NYC Transit Authority	Occupation (for Individual) Line Supervisor 1
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
238.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		05		2017

**Transaction ID : 76753171**

Amount of Each Receipt this Period  
37.00

Memo Item

**B. ALEXANDER, DOUGLAS, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3001 SCHERER DR

City NORTH CHESTERFIELD	State VA	Zip Code 23235-2401
----------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) AIRECO SUPPLY, INC.	Occupation (for Individual) VP FACILITIES
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
210.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2017

**Transaction ID : 76753189**

Amount of Each Receipt this Period  
55.00

Memo Item

**C. NUFFER, DANIEL C, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1661 MCGREGOR AVE

City WICHITA FALLS	State TX	Zip Code 76301-5720
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) DynCorp International	Occupation (for Individual) Aircraft Mechanic
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		18		2017

**Transaction ID : 76753190**

Amount of Each Receipt this Period  
25.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	117.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 290 OF 485
	<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. ROMANS, RUSSELL E, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 713 MADISON ST

City FORT CALHOUN	State NE	Zip Code 68023-3519
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Retired	Occupation (for Individual) Retired
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
232.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		06		2017

**Transaction ID : 76753193**

Amount of Each Receipt this Period  
25.00

Memo Item

**B. NAUMANN, JOAN W, , MRS,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2061 ARROYO VISTA LN

City KINGMAN	State AZ	Zip Code 86401-8770
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Retired	Occupation (for Individual) Retired
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
230.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2017

**Transaction ID : 76753199**

Amount of Each Receipt this Period  
55.00

Memo Item

**C. WALSH, ROBERT E, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 12 JOHNSON RD

City LAGRANGEVILLE	State NY	Zip Code 12540-5708
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
318.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		04		2017

**Transaction ID : 76753205**

Amount of Each Receipt this Period  
37.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	117.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 291 OF 485
	<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"/>	<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. LAYING, ROBERT M, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 915E GEORGE ST  
 City EASTON State PA Zip Code 18042-1445  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Lafayette College Occupation (for Individual) Machinist/Engineering Technician  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 284.00

Date of Receipt 10 / 02 / 2017  
**Transaction ID : 76753249**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**B. BARDWELL, SIDNEY C, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 403 ORIN RICE RD  
 City COLVILLE State WA Zip Code 99114-8518  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) VAAGEN BROS. LUMBER COMPANY Occupation (for Individual) EQUIPMENT OPERATOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 253.00

Date of Receipt 10 / 16 / 2017  
**Transaction ID : 76753262**  
 Amount of Each Receipt this Period 55.00  
 Memo Item

**C. BALLOU, ROY, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 40 ROSEWOOD LN  
 City BAXLEY State GA Zip Code 31513-6565  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Stucco Contractor Occupation (for Individual) Stucco Mason  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 285.00

Date of Receipt 10 / 16 / 2017  
**Transaction ID : 76753267**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional).....▶ 105.00  
**TOTAL** This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 292 OF 485
	<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. POLLIE, MICHAEL, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 702 LYON BROOK RD

City NORWICH	State NY	Zip Code 13815-3429
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Retired	Occupation (for Individual) Retired
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
478.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		06		2017

**Transaction ID : 76753268**

Amount of Each Receipt this Period  
48.00

Memo Item

**B. RINALDI, RONALD, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 39C PINECREST AVE

City SABATTUS	State ME	Zip Code 04280-4316
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
223.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		10		2017

**Transaction ID : 76753272**

Amount of Each Receipt this Period  
25.00

Memo Item

**C. THORESON, FRED A, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2302 ADAMS CT

City NORTH WALES	State PA	Zip Code 19454-1060
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Retired	Occupation (for Individual) Retired
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
272.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		03		2017

**Transaction ID : 76753284**

Amount of Each Receipt this Period  
25.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	98.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 293 OF 485
	(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"/> 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. DAY, TODD, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **PO BOX 141**

City <b>ENTERPRISE</b>	State <b>KS</b>	Zip Code <b>67441-0141</b>
---------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) <b>BRIERTON ENGINEERING</b>	Occupation (for Individual) <b>CNC OPERATOR</b>
--	--

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**210.00**

Date of Receipt  
**10 / 25 / 2017**

**Transaction ID : 76753286**

Amount of Each Receipt this Period  
**40.00**

Memo Item

**B. HUSTON, TRAVIS A, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **5025 BIRCH HOLLOW LN**

City <b>FORT WORTH</b>	State <b>TX</b>	Zip Code <b>76132-3715</b>
---------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) <b>S&amp;H LONE STAR ELECTRIC INC.</b>	Occupation (for Individual) <b>ELECTRICIAN</b>
---	---

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**230.00**

Date of Receipt  
**10 / 03 / 2017**

**Transaction ID : 76753291**

Amount of Each Receipt this Period  
**100.00**

Memo Item

**C. ALBERS, MIKE, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **7005 LOGAN AVE S**

City <b>RICHFIELD</b>	State <b>MN</b>	Zip Code <b>55423-2955</b>
--------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) <b>MINNETONKA PUBLIC SCHOOLS</b>	Occupation (for Individual) <b>BUILDING MAINTENANCE</b>
---	--

Receipt For:  
 Primary     General  
 Other (specify)

Aggregate Year-to-Date ▼  
**223.00**

Date of Receipt  
**10 / 03 / 2017**

**Transaction ID : 76753297**

Amount of Each Receipt this Period  
**37.00**

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>177.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 294 OF 485
	<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. MARTIN, GARRETT R, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2188 260TH RD  
 City STRONG CITY State KS Zip Code 66869-9858  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) BLUESTEM TRANSPORTATION Occupation (for Individual) TRUCK BROKER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 17 / 2017  
**Transaction ID : 76753343**  
 Amount of Each Receipt this Period 300.00  
 Memo Item

**B. RIVERA ASTACIO, JOSE E, , MR, JR**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 677 G ST SPC 126  
 City CHULA VISTA State CA Zip Code 91910-3452  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt 10 / 17 / 2017  
**Transaction ID : 76753368**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**C. MAYFIELD, MYLES B, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3021 INDIAN ST  
 City VERNON State TX Zip Code 76384-5920  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) AEP Occupation (for Individual) Energy Production  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 370.00

Date of Receipt 10 / 23 / 2017  
**Transaction ID : 76753410**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	425.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 295 OF 485
	<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. BELL, ROBERT, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 51 S 12TH AVE

City COATESVILLE	State PA	Zip Code 19320-3529
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
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Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
171.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		05		2017

**Transaction ID : 76753419**

Amount of Each Receipt this Period  
37.00

Memo Item

**B. BELL, ROBERT, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 51 S 12TH AVE

City COATESVILLE	State PA	Zip Code 19320-3529
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
208.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		05		2017

**Transaction ID : 76753420**

Amount of Each Receipt this Period  
37.00

Memo Item

**C. JACKSON, TOMMY, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 301 N KELSEY ST APT 105

City STURGIS	State KY	Zip Code 42459-1662
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
246.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		02		2017

**Transaction ID : 76753461**

Amount of Each Receipt this Period  
55.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	129.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 296 OF 485
	(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"/> 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. MURPHY, TIMOTHY P, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7 CARRIAGE HILL LN

City HUDSON	State MA	Zip Code 01749-3251
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RSA	Occupation (for Individual) SOFTWARE ENGINEER
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
320.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		16		2017

**Transaction ID : 76753487**

Amount of Each Receipt this Period  
40.00

Memo Item

**B. BEYERS, WILLIAM F, , MR, JR**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8086 HAZELWOOD AVE

City CLARKSBURG	State WV	Zip Code 26301-8056
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED-AEROSPACE ENGINEER
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
205.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		03		2017

**Transaction ID : 76753490**

Amount of Each Receipt this Period  
55.00

Memo Item

**C. WEINSHEIMER, ANDREW, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 295

City TALLMADGE	State OH	Zip Code 44278-0295
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NORTHEAST LASER	Occupation (for Individual) MANAGER
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
205.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		06		2017

**Transaction ID : 76753498**

Amount of Each Receipt this Period  
55.00

Memo Item

<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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 297 OF 485
	<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. HOLMQVIST, PETER B, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 444 NICKEL CREEK CIR

City CARY	State NC	Zip Code 27519-6964
--------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED	Occupation (for Individual) DECLINED
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
435.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		05		2017

**Transaction ID : 76753542**

Amount of Each Receipt this Period  
100.00

Memo Item

**B. OWENS, WILLIAM P, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 21008 DENISE AVE

City PORT CHARLOTTE	State FL	Zip Code 33952-1410
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) WALMART	Occupation (for Individual) STOCKING ASSOCIATE
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
211.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		10		2017

**Transaction ID : 76753553**

Amount of Each Receipt this Period  
25.00

Memo Item

**C. COLLUM, JOHN, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1491 THORNTON ST

City GREENVILLE	State MS	Zip Code 38703-2443
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) COLLUM TOOL COMPANY, INC.	Occupation (for Individual) OWNER
--	--------------------------------------

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		11		2017

**Transaction ID : 76753566**

Amount of Each Receipt this Period  
500.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	625.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 298 OF 485
	<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. VAUGHAN, JAMES, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 2544

City CASPER	State WY	Zip Code 82602-2544
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
298.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		16		2017

**Transaction ID : 76753571**

Amount of Each Receipt this Period  
25.00

Memo Item

**B. MASSEY, JIM R, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 215 COUNTY ROAD 7812

City NATALIA	State TX	Zip Code 78059-2053
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Devine ISD	Occupation (for Individual) Bus Driver
---	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
240.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		06		2017

**Transaction ID : 76753598**

Amount of Each Receipt this Period  
25.00

Memo Item

**C. MEDLEY, SCOTT J, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 227 GINN RD

City SNOW HILL	State NC	Zip Code 28580-8132
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
214.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		03		2017

**Transaction ID : 76753610**

Amount of Each Receipt this Period  
27.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	77.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 299 OF 485
	(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"/> 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. LYMAN, CHARLES J, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4753 34TH AVE N

City ST PETERSBURG	State FL	Zip Code 33713-1009
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) DTZ, Inc.	Occupation (for Individual) Maintenance
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
412.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		10		2017

**Transaction ID : 76753611**

Amount of Each Receipt this Period  
100.00

Memo Item

**B. LOVEDAY, TED, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 764 CHERRY ST

City POCATELLO	State ID	Zip Code 83201-5606
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) US Postal Service	Occupation (for Individual) Retired-Letter Carrier
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
255.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		16		2017

**Transaction ID : 76753622**

Amount of Each Receipt this Period  
100.00

Memo Item

**C. STALLBAUM, TED, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 114 W WAYNE ST

City PAULDING	State OH	Zip Code 45879-1504
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
292.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		02		2017

**Transaction ID : 76753663**

Amount of Each Receipt this Period  
25.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	225.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 300 OF 485
	<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. FULMER, OREN V, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 948 MILL RD

City LITTLE MTN	State SC	Zip Code 29075-9282
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Retired	Occupation (for Individual) Retired
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
262.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		10		2017

**Transaction ID : 76753676**

Amount of Each Receipt this Period  
25.00

Memo Item

**B. LOCKWOOD, JAMES R, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 12509 TIMBERWOOD DR

City WALKER	State LA	Zip Code 70785-5744
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) B & D PLUMBING	Occupation (for Individual) LICENSED MED GAS INSTALLER / P
---	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
298.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		23		2017

**Transaction ID : 76753678**

Amount of Each Receipt this Period  
48.00

Memo Item

**C. ZAIFERT, MICHAEL, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 467 SANTEE DR

City SANTEE	State SC	Zip Code 29142-9304
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Party City	Occupation (for Individual) Manager
---	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
625.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		23		2017

**Transaction ID : 76753693**

Amount of Each Receipt this Period  
250.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	323.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 301 OF 485
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**National Rifle Association of America Political Victory Fund**

**A. STALKER, DAVID, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11370 S 300 W

City GENEVA	State IN	Zip Code 46740-9224
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Retired	Occupation (for Individual) Retired
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		06		2017

**Transaction ID : 76753698**

Amount of Each Receipt this Period  
25.00

Memo Item

**B. GRAVES, RONALD, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 3528

City COOKEVILLE	State TN	Zip Code 38502-3528
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
405.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		23		2017

**Transaction ID : 76753711**

Amount of Each Receipt this Period  
50.00

Memo Item

**C. HYNE, BARRY K, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1346 TRUCHARD LN

City LINCOLN	State CA	Zip Code 95648-8144
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
215.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		17		2017

**Transaction ID : 76753712**

Amount of Each Receipt this Period  
55.00

Memo Item

<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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 302 OF 485
	<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. KIMBLE, CHARLES, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4800 BERKSFORD ST

City SACRAMENTO	State CA	Zip Code 95841-3505
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
455.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		04		2017

**Transaction ID : 76753725**

Amount of Each Receipt this Period  
100.00

Memo Item

**B. SALAZAR, GEORGE, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 1

City HANCOCK	State NH	Zip Code 03449-0001
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
225.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		10		2017

**Transaction ID : 76753735**

Amount of Each Receipt this Period  
100.00

Memo Item

**C. LAZER, STEVE W, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3454 21ST AVE S

City MINNEAPOLIS	State MN	Zip Code 55407-2414
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) State of Minnesota	Occupation (for Individual) Electronic Tech
---	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
235.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		03		2017

**Transaction ID : 76753782**

Amount of Each Receipt this Period  
50.00

Memo Item

<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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 303 OF 485
	<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. YOSHIOKA, BRYCE M, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5061 LYNN CIR

City LA PALMA	State CA	Zip Code 90623-1408
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) PRO-TECH DEIGN & MANUFACTURING, INC	Occupation (for Individual) LABEL TECHNICIAN
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
336.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		05		2017

**Transaction ID : 76753800**

Amount of Each Receipt this Period  
25.00

Memo Item

**B. BURCH, DEAN B, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 294 STATE ROAD 327

City HUDSON	State IN	Zip Code 46747-9405
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CONTECH CASTINGS	Occupation (for Individual) ENGINEERING TECH
---	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
322.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		10		2017

**Transaction ID : 76753811**

Amount of Each Receipt this Period  
25.00

Memo Item

**C. PARSON, WELDON, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 395 COUNTY ROAD 36680

City ARTHUR CITY	State TX	Zip Code 75411-4101
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Retired	Occupation (for Individual) Retired
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
351.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		03		2017

**Transaction ID : 76753818**

Amount of Each Receipt this Period  
25.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	75.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 304 OF 485
	<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. SARVER, RONALD J, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 13188 WAVERLY AVE

City CORONA	State CA	Zip Code 92879-5330
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED - PAINTER
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
342.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		16		2017

**Transaction ID : 76753851**

Amount of Each Receipt this Period  
25.00

Memo Item

**B. SARVER, RONALD J, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 13188 WAVERLY AVE

City CORONA	State CA	Zip Code 92879-5330
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED - PAINTER
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
367.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2017

**Transaction ID : 76753852**

Amount of Each Receipt this Period  
25.00

Memo Item

**C. SARVER, RONALD J, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 13188 WAVERLY AVE

City CORONA	State CA	Zip Code 92879-5330
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED - PAINTER
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
317.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		04		2017

**Transaction ID : 76753853**

Amount of Each Receipt this Period  
24.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	74.00
<b>TOTAL</b> This Period (last page this line number only).....▶	



**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 305 OF 485
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**National Rifle Association of America Political Victory Fund**

**A. MEMERY, ROBERT, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 79 HINTZ DR  
 City WALLINGFORD State CT Zip Code 06492-2001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CARABETTA MGMT, CO. Occupation (for Individual) PURCHASING MANAGER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 232.00

Date of Receipt 10 / 12 / 2017  
**Transaction ID : 76753884**  
 Amount of Each Receipt this Period 37.00  
 Memo Item

**B. MEDFORD, JEFFREY L, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 802 ROCKLYN DR  
 City ROCK HILL State SC Zip Code 29730-6935  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Medford Enviromental Solutions Occupation (for Individual) HVAC Contractor  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 317.00

Date of Receipt 10 / 02 / 2017  
**Transaction ID : 76753885**  
 Amount of Each Receipt this Period 37.00  
 Memo Item

**C. BARONE, ANTHONY B, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 16384 BRAEBURN RIDGE TRL  
 City DELRAY BEACH State FL Zip Code 33446-9508  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 23 / 2017  
**Transaction ID : 76753893**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	174.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 306 OF 485
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<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. RICE, PAUL, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 32166 MACHADO ST  
 City LAKE ELSINORE State CA Zip Code 92530-5211  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 291.00

Date of Receipt 10 / 12 / 2017  
**Transaction ID : 76753897**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**B. GOSS, DEAN L, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 21 RIDGE ST  
 City GREENWICH State CT Zip Code 06830-6305  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 10 / 03 / 2017  
**Transaction ID : 76753898**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**C. SIMPKINS, MICHAEL, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4117 NATIVE GARDEN DR  
 City PLANT CITY State FL Zip Code 33565-2426  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 10 / 27 / 2017  
**Transaction ID : 76753909**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	175.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 307 OF 485
	<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. JOHNSON, GARY T, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 265 N GILBERT RD APT 1183

City MESA	State AZ	Zip Code 85203-8255
--------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1094.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
10		10		2017

**Transaction ID : 76753923**

Amount of Each Receipt this Period  
100.00

Memo Item

**B. SEEVERS, ROBERT E, , MR, SR**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4613 ARROWSMITH RD

City HICKSVILLE	State OH	Zip Code 43526-9757
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
325.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
10		10		2017

**Transaction ID : 76753924**

Amount of Each Receipt this Period  
100.00

Memo Item

**C. HARRISON, ROBERT, , , JR**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4131 CHARDONNAY DR

City VIERA	State FL	Zip Code 32955-5132
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
219.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
10		04		2017

**Transaction ID : 76753965**

Amount of Each Receipt this Period  
37.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	237.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 308 OF 485
	<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. SPARKS, META M, , MS,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8959 E STATE HIGHWAY 72

City RUNGE	State TX	Zip Code 78151-4278
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
800.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		06		2017

**Transaction ID : 76753970**

Amount of Each Receipt this Period  
150.00

Memo Item

**B. PERRY, CHARLES, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1740 W BERTRAND RD

City NILES	State MI	Zip Code 49120-8774
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) WTMC	Occupation (for Individual) Sr Vice President
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
205.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2017

**Transaction ID : 76753971**

Amount of Each Receipt this Period  
55.00

Memo Item

**C. STANSBERRY, JACKIE D, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3931 COPPER RIDGE RD

City MORRISTOWN	State TN	Zip Code 37814-6363
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
359.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		06		2017

**Transaction ID : 76753997**

Amount of Each Receipt this Period  
100.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	305.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 309 OF 485
	<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. BANASIK, LAWRENCE, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3815 MAJOR AVE N

City MINNEAPOLIS	State MN	Zip Code 55422-2104
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
323.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		03		2017

**Transaction ID : 76754001**

Amount of Each Receipt this Period  
25.00

Memo Item

**B. BINGHAM, SUSAN M, , MS,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3678 SILVERSTONE DR

City IDAHO FALLS	State ID	Zip Code 83401-3583
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
324.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2017

**Transaction ID : 76754016**

Amount of Each Receipt this Period  
100.00

Memo Item

**C. BRANT, RANDALL W, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 314

City VAN BUREN	State AR	Zip Code 72957-0314
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SHELL RAPID LUBE	Occupation (for Individual) OWNER / MANAGER
---	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
375.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		16		2017

**Transaction ID : 76754020**

Amount of Each Receipt this Period  
100.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	225.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 310 OF 485
	<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. WEEKS, SHELTON E, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 102 FARM DR

City ELIZABETH CTY	State NC	Zip Code 27909-9697
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Retired	Occupation (for Individual) Retired
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
296.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		02		2017

**Transaction ID : 76754026**

Amount of Each Receipt this Period  
25.00

Memo Item

**B. WEEKS, SHELTON E, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 102 FARM DR

City ELIZABETH CTY	State NC	Zip Code 27909-9697
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Retired	Occupation (for Individual) Retired
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
321.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		23		2017

**Transaction ID : 76754027**

Amount of Each Receipt this Period  
25.00

Memo Item

**C. DELLAQUILA, BERNARD J, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3524 RED TAILED HAWK DR

City PORT ST LUCIE	State FL	Zip Code 34952-3022
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) None	Occupation (for Individual) Unemployed
---	---

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
310.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		12		2017

**Transaction ID : 76754036**

Amount of Each Receipt this Period  
25.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	75.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 311 OF 485
	<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. JOHN, GLENN D, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 28 HOLCOMB ST

City ROCHESTER	State NY	Zip Code 14612-5418
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Retired	Occupation (for Individual) Retired
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
333.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		03		2017

**Transaction ID : 76754055**

Amount of Each Receipt this Period  
25.00

Memo Item

**B. SCHAMBERGER, JACOB, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9094 HILL RD

City SWARTZ CREEK	State MI	Zip Code 48473-7600
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Genesee County	Occupation (for Individual) Retired - Civil Engineer & Director
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
260.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		06		2017

**Transaction ID : 76754075**

Amount of Each Receipt this Period  
25.00

Memo Item

**C. REYNOLDS, JOE C, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 113832 S 4670 RD

City GANS	State OK	Zip Code 74936-5036
--------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
270.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		02		2017

**Transaction ID : 76754086**

Amount of Each Receipt this Period  
37.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	87.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 312 OF 485
	<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. GILBERT, RICHARD D, , MR, SR**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3550 SW 52ND TER

City OCALA	State FL	Zip Code 34474-9489
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Retired	Occupation (for Individual) Retired
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2017

**Transaction ID : 76754115**

Amount of Each Receipt this Period  
100.00

Memo Item

**B. BACON, RAYMOND C, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 14108 RUCKER ST

City AZLE	State TX	Zip Code 76020-7124
--------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) TARRANT COUNTY COLLEGE	Occupation (for Individual) INSTRUCTOR
---	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
330.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2017

**Transaction ID : 76754119**

Amount of Each Receipt this Period  
55.00

Memo Item

**C. LEGAULT, ROGER, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 19 PINE ORCHARD RD

City WEST WARWICK	State RI	Zip Code 02893-3301
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SUPERIOR AUTO BODY INC.	Occupation (for Individual) OWNER - COLLISION REPAIR
--	---

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
324.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		06		2017

**Transaction ID : 76754140**

Amount of Each Receipt this Period  
100.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	255.00
<b>TOTAL</b> This Period (last page this line number only).....▶	



**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 313 OF 485
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**National Rifle Association of America Political Victory Fund**

**A. SILVA, ROBERT J., MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 17628 HAWTHORNE AVE  
 City ANDERSON State CA Zip Code 96007-9518  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 10 / 20 / 2017  
**Transaction ID : 76754143**  
 Amount of Each Receipt this Period 37.00  
 Memo Item

**B. ROMANOWSKI, RICHARD, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 18 DEER RUN RD  
 City ORION State IL Zip Code 61273-9746  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt 10 / 17 / 2017  
**Transaction ID : 76754145**  
 Amount of Each Receipt this Period 120.00  
 Memo Item

**C. COLVIN, DAVID, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7 CEDAR CIR  
 City MORGANTOWN State WV Zip Code 26508-9151  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 348.00

Date of Receipt 10 / 16 / 2017  
**Transaction ID : 76754168**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	257.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 314 OF 485
	<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. IAVARONE, ANTHONY, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 839 ADAMS ST # 3

City ALBANY	State CA	Zip Code 94706-1613
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) University of California	Occupation (for Individual) Scientist
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
311.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		10		2017

**Transaction ID : 76754185**

Amount of Each Receipt this Period  
37.00

Memo Item

**B. MILLER, DONALD F, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4761 WILSON BURT RD

City WILSON	State NY	Zip Code 14172-9653
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Retired	Occupation (for Individual) Retired
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
226.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		02		2017

**Transaction ID : 76754192**

Amount of Each Receipt this Period  
25.00

Memo Item

**C. SOISETH, CHARLES D, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 53

City FORT YATES	State ND	Zip Code 58538-0053
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		02		2017

**Transaction ID : 76754209**

Amount of Each Receipt this Period  
100.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	162.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 315 OF 485
	<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. BUCKINGHAM, RAY, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 98038

City SEATTLE	State WA	Zip Code 98198-0038
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
460.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	30	/	2017

**Transaction ID : 76754225**

Amount of Each Receipt this Period  
100.00

Memo Item

**B. POWELL, ROBERT, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 103 EAGLE RD

City LAURENS	State SC	Zip Code 29360-6368
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Retired	Occupation (for Individual) Retired
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Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
376.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	02	/	2017

**Transaction ID : 76754273**

Amount of Each Receipt this Period  
55.00

Memo Item

**C. GODFREY, THOMAS J, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 1785

City OVERTON	State NV	Zip Code 89040-1785
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
253.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	16	/	2017

**Transaction ID : 76754295**

Amount of Each Receipt this Period  
25.00

Memo Item

<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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 316 OF 485
	<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. GARCIA, OSCAR J, , MR, JR**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 170 MALKOWSKI RD  
 City CLARKSVILLE State TN Zip Code 37043-6233  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 10 / 12 / 2017  
**Transaction ID : 76754332**  
 Amount of Each Receipt this Period 55.00  
 Memo Item

**B. SHAW, JOHN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 841 N OAK GROVE AVE  
 City SPRINGFIELD State MO Zip Code 65802-2392  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) LEGACY INC. Occupation (for Individual) TRUCK DRIVER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 242.00

Date of Receipt 10 / 16 / 2017  
**Transaction ID : 76754361**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**C. GRIGSBY, JOE C, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 913 HACKBERRY RD  
 City SALADO State TX Zip Code 76571-5208  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) DEPARTMENT OF DEFENSE Occupation (for Individual) RETIRED-CIVIL SERVICE  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 03 / 2017  
**Transaction ID : 76754374**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

<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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 317 OF 485
	<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. ELMORE, PAUL, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 720 BUSH DR

City ALLEN	State TX	Zip Code 75013-1544
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Retired	Occupation (for Individual) Retired
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
356.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		03		2017

**Transaction ID : 76754375**

Amount of Each Receipt this Period  
37.00

Memo Item

**B. SMITKO, KURT, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5624 S MERRIMAC AVE

City CHICAGO	State IL	Zip Code 60638-3418
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) sao	Occupation (for Individual) lawyer
--	---------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
222.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		10		2017

**Transaction ID : 76754384**

Amount of Each Receipt this Period  
24.00

Memo Item

**C. REDMOND, GAIL, , MS,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address N5025 COUNTY ROAD J

City KENNAN	State WI	Zip Code 54537-9173
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
225.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		03		2017

**Transaction ID : 76754396**

Amount of Each Receipt this Period  
50.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	111.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 318 OF 485
	<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. HAVEL, KEN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 993 STATE RD  
 City GENEVA State OH Zip Code 44041-8313  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Unemployed Occupation (for Individual) Unemployed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 10 / 23 / 2017  
**Transaction ID : 76754448**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**B. FEREBEE, RICHARD, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 96 GLENMERE HOMESITES RD  
 City FLORIDA State NY Zip Code 10921-1918  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 16 / 2017  
**Transaction ID : 76754455**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**C. THOMAS, PATRICIA M, , MS,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 24249 CALLE ARTINO  
 City MURRIETA State CA Zip Code 92562-5577  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 301.00

Date of Receipt 10 / 19 / 2017  
**Transaction ID : 76754477**  
 Amount of Each Receipt this Period 201.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	276.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 319 OF 485  
(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**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. JACOBS, SHELDON, , MR,**

Mailing Address 632 VISTA VALINDA

City SAN CLEMENTE    State CA    Zip Code 92672-2358

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)    Occupation (for Individual)

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 11 / 2017

**Transaction ID : 76754505**

Amount of Each Receipt this Period  
 100.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. BROOKINS, THOMAS M, , ,**

Mailing Address 4522 CEDARFIELD RD

City KATY    State TX    Zip Code 77494-3378

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)    Occupation (for Individual)  
 RETIRED    Retired

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 247.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 02 / 2017

**Transaction ID : 76754524**

Amount of Each Receipt this Period  
 24.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. BROOKINS, THOMAS M, , ,**

Mailing Address 4522 CEDARFIELD RD

City KATY    State TX    Zip Code 77494-3378

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)    Occupation (for Individual)  
 RETIRED    Retired

Receipt For:  
 Primary     General  
 Other (specify)

Aggregate Year-to-Date ▼  
 272.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 20 / 2017

**Transaction ID : 76754525**

Amount of Each Receipt this Period  
 25.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 149.00

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 320 OF 485
	<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. GONYO, PETER J, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 310 N WISCONSIN ST

City BERLIN	State WI	Zip Code 54923-1153
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BEMIS	Occupation (for Individual) FACTORY WORKER
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
234.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		06		2017

**Transaction ID : 76754541**

Amount of Each Receipt this Period  
20.00

Memo Item

**B. ALLMAN, JAMES R, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2330 DEER TRAIL LN

City ASHLAND	State OH	Zip Code 44805-8502
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ASHLAND OB/GYN, LTD	Occupation (for Individual) PHYSICIAN
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
975.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		06		2017

**Transaction ID : 76754550**

Amount of Each Receipt this Period  
100.00

Memo Item

**C. KARASCH, GARY, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 34567 MOUNTAIN ASH DR

City HILL CITY	State MN	Zip Code 55748-1551
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
340.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		12		2017

**Transaction ID : 76754568**

Amount of Each Receipt this Period  
55.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	175.00
<b>TOTAL</b> This Period (last page this line number only).....▶	



**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 321 OF 485
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**National Rifle Association of America Political Victory Fund**

**A. DAUGHERTY, NANCY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO BOX 70

City ELLERBE	State NC	Zip Code 28338-0070
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
268.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 06 / 2017

**Transaction ID : 76754569**

Amount of Each Receipt this Period  
25.00

Memo Item

**B. AHNGER, DONALD C, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2505 ANTHEM VILLAGE DR STE E

City HENDERSON	State NV	Zip Code 89052-5529
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MIDWAY FORD TRUCK CENTER INC	Occupation (for Individual) TRUCK DEALER
---	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
445.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 17 / 2017

**Transaction ID : 76754570**

Amount of Each Receipt this Period  
120.00

Memo Item

**C. FINDSEN, BOB, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7 CEDAR ST

City COLEBROOK	State NH	Zip Code 03576-3106
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
295.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 12 / 2017

**Transaction ID : 76754572**

Amount of Each Receipt this Period  
37.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	182.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 322 OF 485
	<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. HUDSPETH, BRAD, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3011 LOGANCREST CV CU

City MEMPHIS	State TN	Zip Code 38119-9023
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) AMERICAN STAIRWAYS, INC.	Occupation (for Individual) MANUFACTURING EXECUTIVE
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
445.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		11		2017

**Transaction ID : 76754575**

Amount of Each Receipt this Period  
100.00

Memo Item

**B. CYRA, LINDA R, , MRS,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5873 HAVENWOOD HILLS DR

City LITTLE SUAMICO	State WI	Zip Code 54141-8657
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) UNEMPLOYED	Occupation (for Individual) UNEMPLOYED
---	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
326.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		04		2017

**Transaction ID : 76754579**

Amount of Each Receipt this Period  
37.00

Memo Item

**C. WALLACE, GARY, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 131 W TISBURY LN

City POOLER	State GA	Zip Code 31322-8266
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) International Longshoreman Assoc	Occupation (for Individual) Longshoreman
---	---

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
230.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		12		2017

**Transaction ID : 76754606**

Amount of Each Receipt this Period  
25.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	162.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 323 OF 485
	<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. MCCRAY, J MICHAEL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 207 ELKINS ST  
 City BECKLEY State WV Zip Code 25801-3808  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 06 / 2017  
**Transaction ID : 76754608**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**B. FAHEY, GERALD R, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1617 FOREST AVE  
 City WILMETTE State IL Zip Code 60091-1529  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 19 / 2017  
**Transaction ID : 76754619**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**C. HAWKINS, JAMES D, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 15120 E COACHMAN DR  
 City COLORADO SPRINGS State CO Zip Code 80908-2204  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) LOCKHEED MARTIN Occupation (for Individual) SYSTEM TEST ENGINEER  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 252.00

Date of Receipt 10 / 12 / 2017  
**Transaction ID : 76754621**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 324 OF 485
	<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. ISENHART, RONALD, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4788 E 100 S  
 City MARION State IN Zip Code 46953-9674  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 11 / 2017  
**Transaction ID : 76754633**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**B. DAVIS, GARLAND D, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3016 DELANO PL  
 City SHELBY State NC Zip Code 28152-7509  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 RETIRED RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 258.00

Date of Receipt 10 / 03 / 2017  
**Transaction ID : 76754641**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**C. REEVES, JOSHUA, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5563 LINER CREEK RD  
 City CLYDE State NC Zip Code 28721-8929  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 Town of Weaverville Fire Dept Firefighter  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 374.00

Date of Receipt 10 / 06 / 2017  
**Transaction ID : 76754643**  
 Amount of Each Receipt this Period 37.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	587.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 325 OF 485
	<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. STRBAC, TERRY, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7528 COUNTY LINE RD

City HOBART	State IN	Zip Code 46342-7087
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
540.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		04		2017

**Transaction ID : 76754647**

Amount of Each Receipt this Period  
100.00

Memo Item

**B. DUBBE, GENE, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 46470 INCA DR

City HARTFORD	State SD	Zip Code 57033-6932
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
273.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		16		2017

**Transaction ID : 76754656**

Amount of Each Receipt this Period  
25.00

Memo Item

**C. BENNETT, WAYNE L, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2408 WICKLOW DR

City GRAND ISLAND	State NE	Zip Code 68801-7390
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
498.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		21		2017

**Transaction ID : 76754661**

Amount of Each Receipt this Period  
25.00

Memo Item

<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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 326 OF 485
	<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. MCMILLAN, JIM, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 487 8TH ST  
 PO BOX 265  
 City CRAWFORD State TX Zip Code 76638-0265  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 223.00

Date of Receipt 10 / 03 / 2017  
**Transaction ID : 76754662**  
 Amount of Each Receipt this Period 24.00  
 Memo Item

**B. MCMILLAN, JIM, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 487 8TH ST  
 PO BOX 265  
 City CRAWFORD State TX Zip Code 76638-0265  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 248.00

Date of Receipt 10 / 11 / 2017  
**Transaction ID : 76754663**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**C. WEBER, BOB, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 855 DIAMOND DR  
 City GAITHERSBURG State MD Zip Code 20878-1804  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) DEA Occupation (for Individual) computer programmer  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 257.00

Date of Receipt 10 / 20 / 2017  
**Transaction ID : 76754665**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 59.00  
**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 327 OF 485
	<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. KAMONDY, MICK, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 90 SEBASTOPOL RD STE F

City SANTA ROSA	State CA	Zip Code 95407-5832
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		03		2017

**Transaction ID : 76754675**

Amount of Each Receipt this Period  
50.00

Memo Item

**B. SCHOEN, WILLIAM H, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6785 NEW MDLTWN ELIZABTH RD SE

City ELIZABETH	State IN	Zip Code 47117-7501
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
520.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		06		2017

**Transaction ID : 76754683**

Amount of Each Receipt this Period  
50.00

Memo Item

**C. NEUGEBAUER, ROBERT L, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 157 GREENLEA DR

City CORAOPOLIS	State PA	Zip Code 15108-2647
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Retired	Occupation (for Individual) Retired
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
272.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		06		2017

**Transaction ID : 76754735**

Amount of Each Receipt this Period  
25.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	125.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 328 OF 485
	<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. TUBB, JOE A, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1112 MAPLE ST APT D

City S PASADENA	State CA	Zip Code 91030-4378
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) THIRTY METER TELESCOPE	Occupation (for Individual) OPTO MECHANICAL ENGINEER
---	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1395.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		12		2017

**Transaction ID : 76754753**

Amount of Each Receipt this Period  
150.00

Memo Item

**B. NORRIS, JOHN E, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 409

City MILLIGAN COLLEGE	State TN	Zip Code 37682-0409
--------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Retired	Occupation (for Individual) Retired
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
205.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2017

**Transaction ID : 76754758**

Amount of Each Receipt this Period  
55.00

Memo Item

**C. WHITBY, THOMAS R, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 203 APPLE BLOSSOM CT

City DELMONT	State PA	Zip Code 15626-1563
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
275.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		06		2017

**Transaction ID : 76754761**

Amount of Each Receipt this Period  
100.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	305.00
<b>TOTAL</b> This Period (last page this line number only).....▶	



**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 329 OF 485
	<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. CLEARY, MAURICE F, , MR, JR**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 23845 OLD WAGON RD

City ESCONDIDO	State CA	Zip Code 92027-6411
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Anderson Brothers Construction	Occupation (for Individual) Retired - Carpenter
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
255.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 03 / 2017

**Transaction ID : 76754762**

Amount of Each Receipt this Period  
50.00

Memo Item

**B. CLEARY, MAURICE F, , MR, JR**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 23845 OLD WAGON RD

City ESCONDIDO	State CA	Zip Code 92027-6411
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Anderson Brothers Construction	Occupation (for Individual) Retired - Carpenter
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
310.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 12 / 2017

**Transaction ID : 76754763**

Amount of Each Receipt this Period  
55.00

Memo Item

**C. DWYER, DAVID R, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 425 5TH ST NW

City CHISHOLM	State MN	Zip Code 55719-1523
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) US Steel	Occupation (for Individual) Mechanic
---	---

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
312.52

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 02 / 2017

**Transaction ID : 76754770**

Amount of Each Receipt this Period  
25.00

Memo Item

<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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 330 OF 485
	<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. DWYER, DAVID R, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 425 5TH ST NW

City CHISHOLM	State MN	Zip Code 55719-1523
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) US Steel	Occupation (for Individual) Mechanic
---	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
332.52

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		30		2017

**Transaction ID : 76754771**

Amount of Each Receipt this Period  
20.00

Memo Item

**B. CAIN, CHARLES W, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 32 S BARKLEY LOT 30

City MESA	State AZ	Zip Code 85204-1234
--------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) Retired
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
222.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		09		2017

**Transaction ID : 76754789**

Amount of Each Receipt this Period  
25.00

Memo Item

**C. SCHULER, CHRIS M, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1331 ANDERSON AVE APT 18

City FORT LEE	State NJ	Zip Code 07024-1755
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) WANG TECHNOLOGY, LLC	Occupation (for Individual) LAND SURVEYOR
---	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
205.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		02		2017

**Transaction ID : 76754814**

Amount of Each Receipt this Period  
55.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	100.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 331 OF 485
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**National Rifle Association of America Political Victory Fund**

**A. BAILEY, VINCENT R, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 15 LITTLE RD  
 City BRISTOL State ME Zip Code 04539-3409  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 272.00

Date of Receipt 10 / 11 / 2017  
**Transaction ID : 76754816**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**B. ELMLINGER, DOUGLAS E, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 748 THRALL AVE  
 City SUFFIELD State CT Zip Code 06078-2340  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Bombardier/Lear Occupation (for Individual) Avionics/Electrical Systems Qu  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 23 / 2017  
**Transaction ID : 76754822**  
 Amount of Each Receipt this Period 30.00  
 Memo Item

**C. OMAN, CANDICE L, , MS,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8078 CREEKSIDE DR  
 City WINDSOR State CA Zip Code 95492-8754  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) DR. DAN SULLIVAN Occupation (for Individual) DENTIST  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 16 / 2017  
**Transaction ID : 76754839**  
 Amount of Each Receipt this Period 55.00  
 Memo Item

<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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 332 OF 485
	<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. KERLIN, EDWARD L., MR, JR**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 228 HAVILAND RD  
 City CHESAPEAKE State VA Zip Code 23320-4701  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 10 / 02 / 2017  
**Transaction ID : 76754856**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**B. GASLOW, LAWRENCE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2659 SPANISH RIVER RD  
 City BOCA RATON State FL Zip Code 33432-8132  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) EMPIRE OFFICE, INC. Occupation (for Individual) CHAIRMAN  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 625.00

Date of Receipt 10 / 30 / 2017  
**Transaction ID : 76754865**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**C. LEPPKE, DAVE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 411 S 9TH ST  
 City HUMBOLDT State KS Zip Code 66748-1919  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 233.00

Date of Receipt 10 / 06 / 2017  
**Transaction ID : 76754878**  
 Amount of Each Receipt this Period 37.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	562.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 333 OF 485
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<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. BANISTER, THOMAS P, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5012 BERKSHIRE DR  
 City NORTH PRINCE GEORGE State VA Zip Code 23860-7565  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) OT TRAINING SOLUTIONS Occupation (for Individual) OVERSEAS CONTRACTOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 224.00

Date of Receipt 10 / 19 / 2017  
**Transaction ID : 76754881**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**B. SHERWELL, ANTHONY C, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1971 WESTERN AVE # 228  
 City ALBANY State NY Zip Code 12203-5066  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt 10 / 16 / 2017  
**Transaction ID : 76754887**  
 Amount of Each Receipt this Period 40.00  
 Memo Item

**C. SIPE, VERL W, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8837 WINCHESTER RD  
 City FORT WAYNE State IN Zip Code 46819-2253  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) P H D INC. Occupation (for Individual) RETIRED-WELDER  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 214.00

Date of Receipt 10 / 10 / 2017  
**Transaction ID : 76754916**  
 Amount of Each Receipt this Period 55.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	195.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 334 OF 485
	<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. TEW, TED, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 109 ARROWHEAD LN  
 City BEDFORD State PA Zip Code 15522-6375  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) BEDFORD ELKS COUNTY CLUB Occupation (for Individual) GROUNDS CREW  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 222.00

Date of Receipt 10 / 10 / 2017  
**Transaction ID : 76754931**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**B. HARTMAN, FRED, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 10873 BONO RD  
 City TERRE HAUTE State IN Zip Code 47802-8654  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 363.00

Date of Receipt 10 / 12 / 2017  
**Transaction ID : 76754949**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**C. HENKEN, LOU E, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 16918 CROCHERON AVE  
 City FLUSHING State NY Zip Code 11358-2211  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Employed Occupation (for Individual) Financial Analyst  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt 10 / 03 / 2017  
**Transaction ID : 76754959**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	225.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 335 OF 485
	<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. ROBERTS, FRANKLIN D, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 12004 MAPLE PARK DR  
 City FORT SMITH State AR Zip Code 72916-9307  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt 10 / 23 / 2017  
**Transaction ID : 76754970**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**B. SHIPP, GWENDOLYN N, , MISS,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1142 INDIANA AVE  
 City TRENTON State NJ Zip Code 08638-3329  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 10 / 03 / 2017  
**Transaction ID : 76754979**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**C. COLDWATER, ELDON E, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 211550 E 640 RD  
 City VICI State OK Zip Code 73859-5253  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) J&R TRANSPORT, INC. Occupation (for Individual) DRIVER  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 211.00

Date of Receipt 10 / 03 / 2017  
**Transaction ID : 76755011**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	225.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 336 OF 485
	<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. PERRY, PHILLIP D, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3325 HIGHWAY 39 W

City ATHENS	State TN	Zip Code 37303-6135
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED - DESIGN ENGINEER
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
305.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		20		2017

**Transaction ID : 76755012**

Amount of Each Receipt this Period  
55.00

Memo Item

**B. PITTMAN, LELAND F, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2215 US HIGHWAY 211 W

City LURAY	State VA	Zip Code 22835-5240
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Retired	Occupation (for Individual) Retired
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
227.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		10		2017

**Transaction ID : 76755024**

Amount of Each Receipt this Period  
55.00

Memo Item

**C. BURRY, LINDA L, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 510 3RD ST

City BENNETT	State CO	Zip Code 80102-8110
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
210.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		11		2017

**Transaction ID : 76755027**

Amount of Each Receipt this Period  
25.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	135.00
<b>TOTAL</b> This Period (last page this line number only).....	



**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 337 OF 485
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**National Rifle Association of America Political Victory Fund**

**A. PAIGE, BERNARD P, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2485 THISTLE POINTE  
 City BLOOMFIELD HILLS State MI Zip Code 48304-1403  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 225.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 23 / 2017  
**Transaction ID : 76755039**  
 Amount of Each Receipt this Period  
 100.00  
 Memo Item

**B. SWEENEY, MICHAEL L, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3401 W 123RD ST  
 City ALSIP State IL Zip Code 60803-1007  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 255.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 20 / 2017  
**Transaction ID : 76755045**  
 Amount of Each Receipt this Period  
 55.00  
 Memo Item

**C. FRANZONE, JOHN V, , MR, JR**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 369 STOBE AVE  
 City STATEN ISLAND State NY Zip Code 10306-5235  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 Fire Marshal  
 Receipt For:  
 Primary  General  
 Other (specify)  
 Aggregate Year-to-Date ▼  
 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 03 / 2017  
**Transaction ID : 76755046**  
 Amount of Each Receipt this Period  
 100.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	255.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 338 OF 485  
(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**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. FRANZONE, JOHN V, , MR, JR**

Mailing Address 369 STOBE AVE

City STATEN ISLAND    State NY    Zip Code 10306-5235

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)    Occupation (for Individual)  
 Fire Marshal

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 19 / 2017

**Transaction ID : 76755047**

Amount of Each Receipt this Period  
 100.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. TRETTER, RICHARD, , ,**

Mailing Address P.O. BOX 6300

City PAHRUMP    State NV    Zip Code 89041-6300

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)    Occupation (for Individual)  
 Retired    Retired

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 18 / 2017

**Transaction ID : 76755077**

Amount of Each Receipt this Period  
 100.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. POE, TERRY, , ,**

Mailing Address PO BOX 2170

City YUCCA VALLEY    State CA    Zip Code 92286-2170

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)    Occupation (for Individual)  
 Retired    Retired

Receipt For:  
 Primary     General  
 Other (specify)

Aggregate Year-to-Date ▼  
 900.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 16 / 2017

**Transaction ID : 76755096**

Amount of Each Receipt this Period  
 300.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 500.00

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 339 OF 485
	<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. LANGFORD, CALVIN P, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4720 WATER PARK DR UNIT D

City BELCAMP	State MD	Zip Code 21017-1445
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ODYSSEY CONSULTING	Occupation (for Individual) ENGINEER
---	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
225.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2017

**Transaction ID : 76755118**

Amount of Each Receipt this Period  
25.00

Memo Item

**B. BAUER, ROBERT, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 22491 E HORSESHOE BEND RD

City PARK HILL	State OK	Zip Code 74451-4203
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Retired	Occupation (for Individual) Retired
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
235.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		03		2017

**Transaction ID : 76755121**

Amount of Each Receipt this Period  
25.00

Memo Item

**C. MILLER, SHARON Y, , MS,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 334 MOSSYROCK RD E

City MOSSYROCK	State WA	Zip Code 98564-9511
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		16		2017

**Transaction ID : 76755129**

Amount of Each Receipt this Period  
500.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	550.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 340 OF 485
	<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. EILER, ROBERT P, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 136 EVERGREEN DR

City ALIQUIPPA	State PA	Zip Code 15001-1427
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
216.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		06		2017

**Transaction ID : 76755138**

Amount of Each Receipt this Period  
25.00

Memo Item

**B. WHITE, WALTER H, , MR, JR**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2049 HUNT CLUB DR

City GROSSE POINTE WOODS	State MI	Zip Code 48236-1703
-----------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Retired	Occupation (for Individual) Retired - Engineer
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
373.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		12		2017

**Transaction ID : 76755154**

Amount of Each Receipt this Period  
50.00

Memo Item

**C. MEDINA, FELIX, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1102 S CLINTON AVE

City SAINT JOHNS	State MI	Zip Code 48879-2330
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Retired	Occupation (for Individual) Retired
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
246.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		10		2017

**Transaction ID : 76755160**

Amount of Each Receipt this Period  
25.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	100.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 341 OF 485
	<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. HINCHCLIFF, GEORGE T, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 104 FOXTAIL LN

City MAGNOLIA	State DE	Zip Code 19962-1598
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) retired
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
371.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		03		2017

**Transaction ID : 76755163**

Amount of Each Receipt this Period  
37.00

Memo Item

**B. LUKACH, THEODOR, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 311 ROUNDHOUSE DR

City PERRYVILLE	State MD	Zip Code 21903-3040
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SIEGWERK PRINTING INKS	Occupation (for Individual) INK CHEMIST
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
225.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		05		2017

**Transaction ID : 76755168**

Amount of Each Receipt this Period  
100.00

Memo Item

**C. JOSKOW, EDWARD B, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 270 BIGELOW LAKE RD

City PLEASANT MOUNT	State PA	Zip Code 18453-4517
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) DEWITT REHABILITATION & Nursing Ctr.	Occupation (for Individual) Facility Manager
---	---

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		12		2017

**Transaction ID : 76755184**

Amount of Each Receipt this Period  
200.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	337.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 342 OF 485
	<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. SWANN, GENE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 31 RIDGE CROSS RD  
 City TAYLORSVILLE State GA Zip Code 30178-1302  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 309.00

Date of Receipt 10 / 10 / 2017  
**Transaction ID : 76755191**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**B. SHORTSLEEVE, RICHARD H, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2531 N 2500 EAST RD  
 City WATSEKA State IL Zip Code 60970-8753  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt 10 / 03 / 2017  
**Transaction ID : 76755197**  
 Amount of Each Receipt this Period 55.00  
 Memo Item

**C. BROWN, THOMAS, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 22303 TOWNSHIP ROAD 51  
 City BLUFFTON State OH Zip Code 45817-9650  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Ford Motor Company Occupation (for Individual) Powerhouse Machinist  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 333.00

Date of Receipt 10 / 06 / 2017  
**Transaction ID : 76755198**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional).....▶ 180.00  
**TOTAL** This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 343 OF 485
	<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. CARTER, JOHN C, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 31955 KENNEDY RD

City RICHLAND	State MO	Zip Code 65556-8515
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
260.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		10		2017

**Transaction ID : 76755238**

Amount of Each Receipt this Period  
55.00

Memo Item

**B. THIRY, JULIUS, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 26035 NE 34TH ST

City REDMOND	State WA	Zip Code 98053-3005
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
205.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		23		2017

**Transaction ID : 76755239**

Amount of Each Receipt this Period  
55.00

Memo Item

**C. SIMCHICK, CARL T, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6694 STONEBROOK DR

City CLIFTON	State VA	Zip Code 20124-2538
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		05		2017

**Transaction ID : 76755244**

Amount of Each Receipt this Period  
100.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	210.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 344 OF 485  
(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. FAIRBURN, PAUL D, , MR, JR**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2224 LAMP POST LN  
 City FREDERICK State MD Zip Code 21701-3219  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt 10 / 23 / 2017  
**Transaction ID : 76755260**  
 Amount of Each Receipt this Period 20.00  
 Memo Item

**B. LUNDIN, BRIAN C, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7905 YALE RD  
 City ATWATER State OH Zip Code 44201-9541  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 10 / 10 / 2017  
**Transaction ID : 76755261**  
 Amount of Each Receipt this Period 37.00  
 Memo Item

**C. QUICK, CRISLER, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6800 JERICHO TPKE STE 111E  
 City SYOSSET State NY Zip Code 11791-4401  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 05 / 2017  
**Transaction ID : 76755305**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 307.00  
**TOTAL** This Period (last page this line number only)..... ▶



**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 345 OF 485
	<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. WHITE, JANIS L, , MS,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 148 TAYLOR DR

City JONESBOROUGH	State TN	Zip Code 37659-5808
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		03		2017

**Transaction ID : 76755329**

Amount of Each Receipt this Period  
125.00

Memo Item

**B. HAIUM, JEFFREY L, , DR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 104 HOMEWOOD CT

City ROSEVILLE	State CA	Zip Code 95747-8707
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		06		2017

**Transaction ID : 76755332**

Amount of Each Receipt this Period  
250.00

Memo Item

**C. HOWERTON, DAVID, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 232 N ALAMO DR

City VACAVILLE	State CA	Zip Code 95688-2424
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) retired
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
263.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		05		2017

**Transaction ID : 76755341**

Amount of Each Receipt this Period  
55.00

Memo Item

<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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 346 OF 485
	<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. ANDRAE, MARK R, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 223 ROAD 2800

City AZTEC	State NM	Zip Code 87410-9709
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Retired	Occupation (for Individual) Retired
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
447.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		03		2017

**Transaction ID : 76755342**

Amount of Each Receipt this Period  
55.00

Memo Item

**B. DEBLOIS, RICHARD, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1430 MAIN RD

City GRANVILLE	State MA	Zip Code 01034-9722
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
255.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		16		2017

**Transaction ID : 76755355**

Amount of Each Receipt this Period  
55.00

Memo Item

**C. DENKMANN, DARYL, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9 OLDE WARWICK CT

City SAINT CHARLES	State MO	Zip Code 63304-6984
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		23		2017

**Transaction ID : 76755380**

Amount of Each Receipt this Period  
25.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	135.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 347 OF 485
	<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. HAMILTON, MARK A, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 11151 MANOR VIEW DR  
 City MECHANICSVILLE State VA Zip Code 23116-5857  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual) Information Technology  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 257.00

Date of Receipt 10 / 19 / 2017  
**Transaction ID : 76755397**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**B. BARBOUR, MICHAEL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 843 DUNES ST  
 City OXNARD State CA Zip Code 93035-1138  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 284.00

Date of Receipt 10 / 06 / 2017  
**Transaction ID : 76755410**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**C. BENDER, CHRIS, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 241 PIPER RD  
 City GASSAWAY State WV Zip Code 26624-7672  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 511.00

Date of Receipt 10 / 16 / 2017  
**Transaction ID : 76755419**  
 Amount of Each Receipt this Period 55.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	105.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 348 OF 485
	<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. TOMLIN, LARRY C, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1118 MOURNING DOVE LN  
 City RUSSELLVILLE State AR Zip Code 72801-7627  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt 10 / 04 / 2017  
**Transaction ID : 76755424**  
 Amount of Each Receipt this Period 40.00  
 Memo Item

**B. PARSONS, HUGH, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 18855 COUNTY ROAD 8260  
 City ROLLA State MO Zip Code 65401-5290  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) ARCHER ELGIN ENGINEER & SURVEYING, LLC Occupation (for Individual) LAND SURVEYOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 257.00

Date of Receipt 10 / 12 / 2017  
**Transaction ID : 76755428**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**C. SIMMONS, RALPH W, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO BOX 6452  
 City NORCO State CA Zip Code 92860-8048  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired - Toolmaker  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 294.00

Date of Receipt 10 / 16 / 2017  
**Transaction ID : 76755460**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

<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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 349 OF 485
	<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. LAWRYNOWICZ, BARRY, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3150 W 400 N

City COLUMBIA CITY	State IN	Zip Code 46725-9512
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GENERAL MOTORS COMPANY	Occupation (for Individual) RETIRED
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
222.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		12		2017

**Transaction ID : 76755481**

Amount of Each Receipt this Period  
25.00

Memo Item

**B. PROVENCE, BILL, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 715 S EL MOLINO AVE

City PASADENA	State CA	Zip Code 91106-3825
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
225.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		16		2017

**Transaction ID : 76755493**

Amount of Each Receipt this Period  
100.00

Memo Item

**C. KENNEDY, JERRY, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 23491 N RIVER RD

City ALVA	State FL	Zip Code 33920-3363
--------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Retired	Occupation (for Individual) Retired
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
270.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		11		2017

**Transaction ID : 76755516**

Amount of Each Receipt this Period  
30.00

Memo Item

<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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 350 OF 485
	<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. HENDRICKS, DALE, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2986 SUBSTATION RD

City MEDINA	State OH	Zip Code 44256-8313
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
225.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		10		2017

**Transaction ID : 76755520**

Amount of Each Receipt this Period  
100.00

Memo Item

**B. DEHN, JOHN, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 128 LAUMER AVE

City SAN JOSE	State CA	Zip Code 95127-2430
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Self Employed	Occupation (for Individual) Mechanic
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
645.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		11		2017

**Transaction ID : 76755529**

Amount of Each Receipt this Period  
100.00

Memo Item

**C. BAKER, RAYMOND W, , , III**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 34

City GILMAN	State CT	Zip Code 06336-0034
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RAYMOND BAKER MASONRY	Occupation (for Individual) STONE MASON
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
311.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		03		2017

**Transaction ID : 76755552**

Amount of Each Receipt this Period  
24.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	224.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 351 OF 485
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**National Rifle Association of America Political Victory Fund**

**A. BAKER, RAYMOND W, , , III**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO BOX 34

City GILMAN	State CT	Zip Code 06336-0034
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RAYMOND BAKER MASONRY	Occupation (for Individual) STONE MASON
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
331.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 10 / 2017  
**Transaction ID : 76755553**

Amount of Each Receipt this Period  
20.00

Memo Item

**B. ANDERSON, KEN D, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 618 RIVER RD

City WESTMORELAND	State NH	Zip Code 03467-4423
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
243.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 16 / 2017  
**Transaction ID : 76755575**

Amount of Each Receipt this Period  
25.00

Memo Item

**C. WOLF, GREG, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 770 ERIC LOOP

City GRANTS PASS	State OR	Zip Code 97526-8819
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) OREILLY AUTO PARTS	Occupation (for Individual) DELIVERY DRIVER
---	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
257.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 03 / 2017  
**Transaction ID : 76755589**

Amount of Each Receipt this Period  
25.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	70.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 352 OF 485
	<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. HUTCHINS, JOHN G, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4396 CASCO WAY NW  
 City LILBURN State GA Zip Code 30047-3516  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) JOHN DEERE COMPANY Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 10 / 10 / 2017  
**Transaction ID : 76755609**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**B. LUCARELLI, NICK, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 536 GERHARD DR  
 City EDGEWOOD State KY Zip Code 41017-3282  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt 10 / 11 / 2017  
**Transaction ID : 76755628**  
 Amount of Each Receipt this Period 55.00  
 Memo Item

**C. DAME, DENNIS, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 20 KATELYN PL  
 City EAST GREENBUSH State NY Zip Code 12061-1755  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 462.00

Date of Receipt 10 / 11 / 2017  
**Transaction ID : 76755630**  
 Amount of Each Receipt this Period 55.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	210.00
<b>TOTAL</b> This Period (last page this line number only).....	



**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 353 OF 485
	<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. DEMARS, RICHARD L, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1291 VICENTE DR APT 258

City SUNNYVALE	State CA	Zip Code 94086-7269
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
450.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		03		2017

**Transaction ID : 76755638**

Amount of Each Receipt this Period  
55.00

Memo Item

**B. CULPEPPER, RANDY, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11221 ROAD 210

City PHILADELPHIA	State MS	Zip Code 39350-2989
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
293.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		23		2017

**Transaction ID : 76755651**

Amount of Each Receipt this Period  
55.00

Memo Item

**C. CHOY, RODNEY, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 916 VAN GERT DR

City WINTERVILLE	State NC	Zip Code 28590-7914
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) US Air Force	Occupation (for Individual) RETIRED
---	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
225.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		30		2017

**Transaction ID : 76755660**

Amount of Each Receipt this Period  
25.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	135.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 354 OF 485
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**National Rifle Association of America Political Victory Fund**

**A. SHORT, TERRY R, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 13389 COUNTY ROAD 94  
 City ELBERT State CO Zip Code 80106-9127  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Employed Occupation (for Individual) Handyman  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 11 / 2017  
**Transaction ID : 76755667**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**B. GILBERT, DUANE M, , MR, SR**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2422 S LOUISVILLE AVE  
 City TULSA State OK Zip Code 74114-3424  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) OLD DOMINION FREIGHT COMPANY Occupation (for Individual) TRUCK DRIVER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 10 / 03 / 2017  
**Transaction ID : 76755668**  
 Amount of Each Receipt this Period 200.00  
 Memo Item

**C. HAZEKAMP, DONALD, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO BOX 265  
 City INKOM State ID Zip Code 83245-0265  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt 10 / 03 / 2017  
**Transaction ID : 76755678**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	325.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 355 OF 485
	<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. NARLOCH, JOYCE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 12500 CULVER BLVD APT 315  
 City LOS ANGELES State CA Zip Code 90066-6650  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt 10 / 11 / 2017  
**Transaction ID : 76755687**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**B. LIMBERG, TIMOTHY C, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8477 KEISTER RD  
 City GERMANTOWN State OH Zip Code 45327-7551  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt 10 / 31 / 2017  
**Transaction ID : 76755693**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**C. RANUM, KEITH, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7367 S STEELE CIR  
 City CENTENNIAL State CO Zip Code 80122-1953  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 23 / 2017  
**Transaction ID : 76755701**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	375.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 356 OF 485
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<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. KINCAID, ALICE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6748 KIRKWOOD RD  
 City FORT WORTH State TX Zip Code 76116-7216  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 825.00

Date of Receipt 10 / 19 / 2017  
**Transaction ID : 76755704**  
 Amount of Each Receipt this Period 150.00  
 Memo Item

**B. MACKAY, DONALD R, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2210 N SIOUX DR  
 City CHINO VALLEY State AZ Zip Code 86323-8683  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 224.00

Date of Receipt 10 / 30 / 2017  
**Transaction ID : 76755720**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**C. RAGUSA, MICHAEL, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6245 RENWICK DR APT 4213  
 City HOUSTON State TX Zip Code 77081-3805  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) ANDON SPECIALTIES, INC. Occupation (for Individual) SERVICE MANAGER  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 10 / 24 / 2017  
**Transaction ID : 76755724**  
 Amount of Each Receipt this Period 150.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	325.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 357 OF 485
	<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. JACOB, LOUIS B, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 31711 WHISPERING PALMS TRL

City CATHEDRAL CITY	State CA	Zip Code 92234-5294
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
575.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		18		2017

**Transaction ID : 76755782**

Amount of Each Receipt this Period  
150.00

Memo Item

**B. SCHANBACHER, CARL, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 40 ISABELLA ST APT 2W

City BOSTON	State MA	Zip Code 02116-5265
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Self Employed	Occupation (for Individual) Physician
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		11		2017

**Transaction ID : 76755794**

Amount of Each Receipt this Period  
1000.00

Memo Item

**C. BLANKENSHIP, WILLIAM S, , , JR**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1129 BROOKLINE CIR

City ROSEVILLE	State CA	Zip Code 95747-7543
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) PACIFIC GAS & ELECTRIC COMPANY	Occupation (for Individual) SYSTEM DISPATCHER
---	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
255.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2017

**Transaction ID : 76755824**

Amount of Each Receipt this Period  
100.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1250.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 358 OF 485
	<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. ZINS, SIMON J, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3565 COUNTY ROAD 139

City NEW SALEM	State ND	Zip Code 58563-9744
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SIMON ZINS FARMING	Occupation (for Individual) FARMING
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
615.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 10 / 2017  
**Transaction ID : 76755841**

Amount of Each Receipt this Period  
 40.00

Memo Item

**B. ZINS, SIMON J, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3565 COUNTY ROAD 139

City NEW SALEM	State ND	Zip Code 58563-9744
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SIMON ZINS FARMING	Occupation (for Individual) FARMING
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
640.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 20 / 2017  
**Transaction ID : 76755842**

Amount of Each Receipt this Period  
 25.00

Memo Item

**C. HART, BILLY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1311 INDIAN TRAIL RD S

City SANDERSVILLE	State GA	Zip Code 31082-9112
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
386.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 10 / 2017  
**Transaction ID : 76755854**

Amount of Each Receipt this Period  
 37.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	102.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 359 OF 485
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**National Rifle Association of America Political Victory Fund**

**A. RAPACH, THOMAS, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 111 MYLES LN  
 City BONAIRE State GA Zip Code 31005-3138  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RAYTHEON Occupation (for Individual) PROGRAM MANAGER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 212.00

Date of Receipt 10 / 22 / 2017  
**Transaction ID : 76755868**  
 Amount of Each Receipt this Period 30.00  
 Memo Item

**B. HIEMER, JOHN W, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7037 S VALDAI ST  
 City AURORA State CO Zip Code 80016-2367  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) The Summit Group, Inc. Occupation (for Individual) Property Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 20 / 2017  
**Transaction ID : 76755878**  
 Amount of Each Receipt this Period 150.00  
 Memo Item

**C. MAHONEY, DANIEL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 316 PARK ST  
 City OGDENSBURG State NY Zip Code 13669-1826  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) MED-ENG LLC Occupation (for Individual) ASSEMBLER  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 319.00

Date of Receipt 10 / 03 / 2017  
**Transaction ID : 76755906**  
 Amount of Each Receipt this Period 37.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	217.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 360 OF 485
	<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 of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. MCCAGUE, MATTHEW, , ,**

Mailing Address 10730 SE SHELFER AVE

City ARCADIA	State FL	Zip Code 34266-3187
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Lommis	Occupation (for Individual) Retired
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Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
296.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		03		2017

**Transaction ID : 76755928**

Amount of Each Receipt this Period  
25.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. GUNDAL, EDWARD F, , MR,**

Mailing Address 5125 LATHAM TER

City PORT CHARLOTTE	State FL	Zip Code 33981-1813
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) COASTAL HYDRAULICS INC.	Occupation (for Individual) PRESIDENT / OWNER
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
205.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		23		2017

**Transaction ID : 76755932**

Amount of Each Receipt this Period  
55.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. FERRANTE, ANDREW M, , MR,**

Mailing Address PO BOX 805

City DENVER	State NC	Zip Code 28037-0805
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
325.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		13		2017

**Transaction ID : 76755933**

Amount of Each Receipt this Period  
25.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	105.00
<b>TOTAL</b> This Period (last page this line number only).....	



**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 361 OF 485
	<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. BROWN, DUANE H, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 855B MENNO VLG  
 City CHAMBERSBURG State PA Zip Code 17201-4141  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 207.00

Date of Receipt 10 / 02 / 2017  
**Transaction ID : 76755937**  
 Amount of Each Receipt this Period 20.00  
 Memo Item

**B. GUTKNECHT, RICHARD, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4305 AUTUMN RIDGE RD UNIT 205  
 City CEDAR FALLS State IA Zip Code 50613-8913  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Deere and Company Occupation (for Individual) Retired - Inspector  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 285.00

Date of Receipt 10 / 11 / 2017  
**Transaction ID : 76755949**  
 Amount of Each Receipt this Period 30.00  
 Memo Item

**C. WOODWARD, DANIEL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 117 E KENRAY LAKE RD  
 City BEDFORD State IN Zip Code 47421-7724  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Employed Occupation (for Individual) Retired-Lawn Mower  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 251.00

Date of Receipt 10 / 06 / 2017  
**Transaction ID : 76755956**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	75.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 362 OF 485
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**National Rifle Association of America Political Victory Fund**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. ROSENBAUM, KENNETH E, , MR,**

Mailing Address 4 KOURTNEY LN

City MATAWAN	State NJ	Zip Code 07747-3367
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ADR ELECTRIC SER.	Occupation (for Individual) ELECTRICIAN
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
220.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		17		2017

**Transaction ID : 76755963**

Amount of Each Receipt this Period  
55.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. SOWDER, FREDDY A, , ,**

Mailing Address 4916 CARMICHAEL AVE

City LAS VEGAS	State NV	Zip Code 89110-3528
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
325.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		20		2017

**Transaction ID : 76755997**

Amount of Each Receipt this Period  
100.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. ANTHONY, BAILEY, , ,**

Mailing Address PO BOX 59

City LAKE BUTLER	State FL	Zip Code 32054-0059
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BAILEYS REPAIR SERVICE, INC.	Occupation (for Individual) MECHANIC & WELDER
---	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
212.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		06		2017

**Transaction ID : 76756000**

Amount of Each Receipt this Period  
100.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	255.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 363 OF 485
	<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. WONG, DOUGLAS K, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4065 TROPICO WAY

City LOS ANGELES	State CA	Zip Code 90065-3326
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
323.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	16	/	2017

**Transaction ID : 76756005**

Amount of Each Receipt this Period  
25.00

Memo Item

**B. BEELER, JUDITH C, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1257 STALLION ST

City RANSON	State WV	Zip Code 25438-5721
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
675.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	06	/	2017

**Transaction ID : 76756038**

Amount of Each Receipt this Period  
100.00

Memo Item

**C. TOTH, ROBERT L, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 25 ALEXANDER AVE

City HICKSVILLE	State NY	Zip Code 11801-6301
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
355.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	02	/	2017

**Transaction ID : 76756043**

Amount of Each Receipt this Period  
55.00

Memo Item

<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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 364 OF 485
	<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**

**A. WALSH, DENNIS E, , MR, JR**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 326 UNION ST

City LODI	State NJ	Zip Code 07644-3230
--------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) PARSONS CORPORATION	Occupation (for Individual) MOTORVEHICLE INSPECTOR
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
221.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		21		2017

**Transaction ID : 76756050**

Amount of Each Receipt this Period  
25.00

Memo Item

**B. BLANCHARD, KENNETH, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 384

City GRISWOLD	State IA	Zip Code 51535-0384
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
205.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		03		2017

**Transaction ID : 76756058**

Amount of Each Receipt this Period  
100.00

Memo Item

**C. WROBLEWSKI, FRANK J, , MR, SR**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1435 N US HIGHWAY 421

City MICHIGAN CITY	State IN	Zip Code 46360-9429
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) UNEMPLOYED	Occupation (for Individual) UNEMPLOYED
---	---

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
260.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		23		2017

**Transaction ID : 76756071**

Amount of Each Receipt this Period  
100.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	225.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 365 OF 485
	<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. WEBB, DERRICK D, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2767 BELLAR RD

City GREENBRIER	State TN	Zip Code 37073-4703
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SERVICE ELECTRIC COMPANY	Occupation (for Individual) JOURNEYMAN LINEMAN
---	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		03		2017

**Transaction ID : 76756083**

Amount of Each Receipt this Period  
100.00

Memo Item

**B. BRADLEY, PHYLLIS A, , MRS,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 831 CAMBRIA ST

City CRESSON	State PA	Zip Code 16630-1712
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BRADLEY & SONS, INC.	Occupation (for Individual) SECRETARY
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
350.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		05		2017

**Transaction ID : 76756092**

Amount of Each Receipt this Period  
50.00

Memo Item

**C. HOPKINS, GARY L, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 405 APPLE ORCHARD RD

City GATE CITY	State VA	Zip Code 24251-2638
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED - BOILERMAKER
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
476.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		06		2017

**Transaction ID : 76756099**

Amount of Each Receipt this Period  
25.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	175.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 366 OF 485
	<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. GRIMESTAD, WAYNE, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2575 STATES BLVD

City DICKINSON	State ND	Zip Code 58601-8833
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		12		2017

**Transaction ID : 76756100**

Amount of Each Receipt this Period  
200.00

Memo Item

**B. YOUNG, BRIAN G, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 26 WILLIAMS AVE

City NEWTOWN	State PA	Zip Code 18940-3612
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
278.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		10		2017

**Transaction ID : 76756122**

Amount of Each Receipt this Period  
25.00

Memo Item

**C. WRAY, KEITH, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 104

City NORTH SALEM	State IN	Zip Code 46165-0104
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual) overhead crane operator
-----------------------------------	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		21		2017

**Transaction ID : 76756140**

Amount of Each Receipt this Period  
100.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	325.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 367 OF 485
	<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. SINCOCK, JESSE T, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 404 SILO DR  
 City NEW CASTLE State DE Zip Code 19720-5614  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) US Navy Occupation (for Individual) Culinary Specialist  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1425.00

Date of Receipt 10 / 24 / 2017  
**Transaction ID : 76756177**  
 Amount of Each Receipt this Period 150.00  
 Memo Item

**B. OLAUGHLIN, MIKE, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 611 E PARK ST  
 City RUSHFORD State MN Zip Code 55971-9145  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 10 / 12 / 2017  
**Transaction ID : 76756209**  
 Amount of Each Receipt this Period 55.00  
 Memo Item

**C. HARRIS, CHARLES H, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3134 CLIFFSIDE RD  
 City SHELBY State NC Zip Code 28152-9688  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 238.00

Date of Receipt 10 / 02 / 2017  
**Transaction ID : 76756216**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

<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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 368 OF 485
	<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. MCANNALLY, KAREN A, , MRS,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 433 CAMBRIDGE WAY

City BLOOMFIELD HILLS	State MI	Zip Code 48304-3815
--------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		20		2017

**Transaction ID : 76756242**

Amount of Each Receipt this Period  
100.00

Memo Item

**B. RUTH, RICHARD, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3103 WISCONSIN AVE

City JOPLIN	State MO	Zip Code 64804-2874
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
202.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		13		2017

**Transaction ID : 76756262**

Amount of Each Receipt this Period  
25.00

Memo Item

**C. BIRD, KENNETH, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 498 SHERWOOD PL APT C1

City STRATFORD	State CT	Zip Code 06615-6546
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) US GOVERNMENT	Occupation (for Individual) ENGINEER
--	---

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
350.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		13		2017

**Transaction ID : 76756278**

Amount of Each Receipt this Period  
30.00

Memo Item

<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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 369 OF 485
	<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. CHILDERS, MARTIN K, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 881 BLUE HERON RD

City TOPPENISH	State WA	Zip Code 98948-9600
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
435.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		12		2017

**Transaction ID : 76756281**

Amount of Each Receipt this Period  
150.00

Memo Item

**B. KACZMARCZYK, ROBERT, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10777 SUNSET RIDGE DR

City SAN DIEGO	State CA	Zip Code 92131-2391
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
323.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		16		2017

**Transaction ID : 76756285**

Amount of Each Receipt this Period  
25.00

Memo Item

**C. FLETCHER, JAMES, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 111

City NAGS HEAD	State NC	Zip Code 27959-0111
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
550.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		03		2017

**Transaction ID : 76756290**

Amount of Each Receipt this Period  
200.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	375.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 370 OF 485
	<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. EDWARDS, JAMES A, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 410 SOUTHERN WALK DR

City MILLEDGEVILLE	State GA	Zip Code 31061-7786
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
214.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		06		2017

**Transaction ID : 76756291**

Amount of Each Receipt this Period  
50.00

Memo Item

**B. FREZZA, JOHN J, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 212 W KEY PALM RD

City BOCA RATON	State FL	Zip Code 33432-7924
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		12		2017

**Transaction ID : 76756300**

Amount of Each Receipt this Period  
300.00

Memo Item

**C. OWEN, ANTHONY J, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3052 CARSON AVE

City INDIANAPOLIS	State IN	Zip Code 46227-3175
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) AMAZON	Occupation (for Individual) INBOUND STOW
---	---

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
482.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		11		2017

**Transaction ID : 76756303**

Amount of Each Receipt this Period  
40.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	390.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 371 OF 485
	<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. BAIN, MARION J, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 908 CERRO GORDO ST

City ACKLEY	State IA	Zip Code 50601-1324
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MARTIN MARIETTA MATERIALS	Occupation (for Individual) LOADER OPERATOR
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
202.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		03		2017

**Transaction ID : 76756318**

Amount of Each Receipt this Period  
25.00

Memo Item

**B. NUNES, JAMES, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2136 HOLLOWRIDGE DR

City ORANGE CITY	State FL	Zip Code 32763-9236
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
235.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		20		2017

**Transaction ID : 76756326**

Amount of Each Receipt this Period  
25.00

Memo Item

**C. STEININGER, PAUL, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 420 SWEETFLAG AVE

City FOND DU LAC	State WI	Zip Code 54935-1875
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) QUAD GRAPHICS	Occupation (for Individual) PRINTING
--	---

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
271.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		06		2017

**Transaction ID : 76756327**

Amount of Each Receipt this Period  
25.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	75.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 372 OF 485
	<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. MARTIN, KENNTH J, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2901 FISH HATCHERY RD  
 City GRANTS PASS State OR Zip Code 97527-9511  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt 10 / 06 / 2017  
**Transaction ID : 76756331**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**B. KOHLENBERG, KARL F, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 341 RIDGE RD  
 City LANSING State NY Zip Code 14882-8924  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) AUTOWORKS Occupation (for Individual) AUTO REPAIR & SALES  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 256.00

Date of Receipt 10 / 03 / 2017  
**Transaction ID : 76756342**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**C. KRETZ, MICHAEL W, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2900 KILCAIRN LN  
 City ALLISON PARK State PA Zip Code 15101-1322  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) UNIVERSITY OF PITTSBURGH MEDICAL CENTE Occupation (for Individual) ACCOUNTANT  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 575.00

Date of Receipt 10 / 20 / 2017  
**Transaction ID : 76756344**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 373 OF 485
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**National Rifle Association of America Political Victory Fund**

**A. SPORICH, JEROME M, , III**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2221 LORRAINE DR  
 City CARROLLTON State TX Zip Code 75006-4323  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) J.MICHAEL & CO. Occupation (for Individual) SALES  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 05 / 2017  
**Transaction ID : 76756368**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**B. HAIG, THOMAS R, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1119 DE MOLL DR  
 City REDDING State CA Zip Code 96002-3223  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 385.00

Date of Receipt 10 / 10 / 2017  
**Transaction ID : 76756370**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**C. HAIG, THOMAS R, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1119 DE MOLL DR  
 City REDDING State CA Zip Code 96002-3223  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 335.00

Date of Receipt 10 / 03 / 2017  
**Transaction ID : 76756371**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	200.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 374 OF 485
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**National Rifle Association of America Political Victory Fund**

**A. MORRIS, DONALD O, , JR**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 39W063 PLEASANT DR  
 City ELGIN State IL Zip Code 60124-7937  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 19 / 2017  
**Transaction ID : 76756386**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**B. BEESLEY, GARY S, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5841 EULA AVE  
 City COLUMBUS State GA Zip Code 31909-3990  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 374.00

Date of Receipt 10 / 19 / 2017  
**Transaction ID : 76756410**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**C. LADD, SHAWN M, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6815 JADEITE AVE  
 City RANCHO CUCAMONGA State CA Zip Code 91701-5023  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) AVID BUDGET GROUP, INC Occupation (for Individual) RENTAL SALES ASSOCIATE  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 279.00

Date of Receipt 10 / 11 / 2017  
**Transaction ID : 76756457**  
 Amount of Each Receipt this Period 55.00  
 Memo Item

<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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 375 OF 485
	<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. FRANKS, FRANCIS C, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9677 WEBB ST

City ELK GROVE	State CA	Zip Code 95624-2422
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
415.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		06		2017

**Transaction ID : 76756472**

Amount of Each Receipt this Period  
50.00

Memo Item

**B. OBERHOLTZER, RONALD B, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 900 RIDGEWOOD TER

City ARLINGTON	State TX	Zip Code 76012-3120
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		11		2017

**Transaction ID : 76756474**

Amount of Each Receipt this Period  
150.00

Memo Item

**C. MAIOLINO, CHARLES, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 646 GOOD INTENT RD

City BLACKWOOD	State NJ	Zip Code 08012-3000
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
262.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		03		2017

**Transaction ID : 76756503**

Amount of Each Receipt this Period  
25.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	225.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 376 OF 485
	<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. AMMONDSON, MARK, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 907 W PORPHYRY ST  
 City BUTTE State MT Zip Code 59701-2225  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual) Teacher  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 85.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 10 / 2017  
**Transaction ID : 76756511**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**B. HOPPER, HERBERT H, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 34470 BOND RD  
 City LEBANON State OR Zip Code 97355-9448  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 317.25

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 10 / 2017  
**Transaction ID : 76756527**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**C. CANNON, DAVID R, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 721 GAISSERT RD  
 City NEWBORN State GA Zip Code 30056-2890  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 23 / 2017  
**Transaction ID : 76756547**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	75.00
<b>TOTAL</b> This Period (last page this line number only).....▶	



**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 377 OF 485
	<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. FIELDS, PAUL, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 241 GOLF DR

City ABERDEEN	State MD	Zip Code 21001-4339
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) PETE'S CYCLE COMPANY	Occupation (for Individual) ASSEMBLER
---	--

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
422.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		13		2017

**Transaction ID : 76756550**

Amount of Each Receipt this Period  
25.00

Memo Item

**B. BOURAUIN, LEE, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5816 COUNTY LINE RD

City KANSAS CITY	State KS	Zip Code 66106-3108
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) CONSTRUCTION
--	---

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
230.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		12		2017

**Transaction ID : 76756568**

Amount of Each Receipt this Period  
25.00

Memo Item

**C. DROST, ROBERT, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4 ELMWOOD ST

City ALBANY	State NY	Zip Code 12203-3602
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ELLIS MEDICINE	Occupation (for Individual) BOILER OPERATOR
---	--

Receipt For:  
 Primary     General  
 Other (specify)

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		12		2017

**Transaction ID : 76756571**

Amount of Each Receipt this Period  
100.00

Memo Item

<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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 378 OF 485
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**National Rifle Association of America Political Victory Fund**

**A. UVACEK, BOHUMIR, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1622 WELFORD CIR  
 City HAYWARD State CA Zip Code 94544-3293  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) ECS Occupation (for Individual) ENGINEER/CONSULTANT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 385.00

Date of Receipt 10 / 10 / 2017  
**Transaction ID : 76756581**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**B. BLOUNT, FRED W, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 905 E TYLER ST  
 City MEXIA State TX Zip Code 76667-3486  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 10 / 03 / 2017  
**Transaction ID : 76756586**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**C. MAYHORN, JAMES, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO BOX 631  
 City COLLINSVILLE State VA Zip Code 24078-0631  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SHEET METAL LOCAL #100 Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 287.00

Date of Receipt 10 / 03 / 2017  
**Transaction ID : 76756589**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	225.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 379 OF 485
	<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. BUNCH, DAVID, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1756 PRINCE ALBERT DR

City RIVERSIDE	State CA	Zip Code 92507-5851
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
238.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
10		16		2017

**Transaction ID : 76756617**

Amount of Each Receipt this Period  
37.00

Memo Item

**B. RARIG, DALE, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1120 NUMIDIA DR TRLR B5

City CATAWISSA	State PA	Zip Code 17820-8682
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
10		10		2017

**Transaction ID : 76756642**

Amount of Each Receipt this Period  
50.00

Memo Item

**C. BENNICA, BRYAN C, , MR, JR**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 40 AUGUR RD

City NORTHFORD	State CT	Zip Code 06472-1508
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MEDTRONIC	Occupation (for Individual) INSPECTOR I
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
201.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
10		19		2017

**Transaction ID : 76756647**

Amount of Each Receipt this Period  
10.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	97.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 380 OF 485
	<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. POST, STEVEN, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 12 OTIS ST

City MEDFORD	State MA	Zip Code 02155-4029
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF-EMPLOYED/ SUBCONTRACTOR	Occupation (for Individual) CARPENTER
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
925.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		16		2017

**Transaction ID : 76756654**

Amount of Each Receipt this Period  
100.00

Memo Item

**B. JOSS, GREG A, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 129

City CANBY	State CA	Zip Code 96015-0129
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual) Ranch Manager
-----------------------------------	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
217.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		20		2017

**Transaction ID : 76756666**

Amount of Each Receipt this Period  
37.00

Memo Item

**C. KEYES, JAMES T, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3152 SANDAL CT NE

City SALEM	State OR	Zip Code 97305-2782
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
303.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		10		2017

**Transaction ID : 76756708**

Amount of Each Receipt this Period  
55.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	192.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 381 OF 485
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**National Rifle Association of America Political Victory Fund**

**A. SPARKS, MARVIN E, , MR, JR**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 507 LAKOTA LN  
 City HARKER HEIGHTS State TX Zip Code 76548-2658  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt 10 / 06 / 2017  
**Transaction ID : 76756709**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**B. FIORELLA, DAVID, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO BOX 3111  
 City CARSON CITY State NV Zip Code 89702-3111  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 GENERAL TELEPHONE / VERIZON RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 337.00

Date of Receipt 10 / 10 / 2017  
**Transaction ID : 76756715**  
 Amount of Each Receipt this Period 35.00  
 Memo Item

**C. SPRYN, CHRISTOPHER, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 800 E PEARL ST  
 City BUTLER State PA Zip Code 16001-5014  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 BUTLER MEMORIAL HOSPITAL DIETITIAN  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt 10 / 22 / 2017  
**Transaction ID : 76756739**  
 Amount of Each Receipt this Period 40.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	85.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 382 OF 485
	<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. NEAL, JIM H, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 23874 STATE HIGHWAY 1E

City ADA	State OK	Zip Code 74820-0747
-------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) RANCHER
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
228.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		02		2017

**Transaction ID : 76756758**

Amount of Each Receipt this Period  
25.00

Memo Item

**B. MAROSZEK, KENNETH, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 191 HILLVIEW LN

City SHEPHERDSVILLE	State KY	Zip Code 40165-9704
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ADVANCED PAYROLL SYSTEMS, INC	Occupation (for Individual) PANEL TECHNICIAN
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
272.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2017

**Transaction ID : 76756761**

Amount of Each Receipt this Period  
25.00

Memo Item

**C. KNAPP, CHARLES H, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 31 MAPLE SHADE RD

City RIDGEFIELD	State CT	Zip Code 06877-3828
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) TOWN OF RIDGEFIELD	Occupation (for Individual) PARKS DEPARTMENT MAINTENANCE
---	---

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
429.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		03		2017

**Transaction ID : 76756824**

Amount of Each Receipt this Period  
55.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	105.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 383 OF 485
	<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. BERNDTSON, TYLER M, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9219 2ND AVE S  
 City MINNEAPOLIS State MN Zip Code 55420-3735  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) NELSON STAMPINGS Occupation (for Individual) PRESS OPERATOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 322.00

Date of Receipt 10 / 10 / 2017  
**Transaction ID : 76756825**  
 Amount of Each Receipt this Period 37.00  
 Memo Item

**B. RUDE, CHRIS N, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1309 13TH ST S  
 City VIRGINIA State MN Zip Code 55792-3341  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) US ARMY Occupation (for Individual) DISABLED VETERAN  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 203.00

Date of Receipt 10 / 02 / 2017  
**Transaction ID : 76756829**  
 Amount of Each Receipt this Period 20.00  
 Memo Item

**C. THOMPSON, RAYMOND, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 206 SPRING CT  
 City ROSELLE State IL Zip Code 60172-2206  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 513.00

Date of Receipt 10 / 10 / 2017  
**Transaction ID : 76756835**  
 Amount of Each Receipt this Period 55.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	112.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 384 OF 485
	<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. JUNKERMEIER, JORDAN, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 819 5TH AVE S APT B4

City SAINT CLOUD	State MN	Zip Code 56301-4547
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
341.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		04		2017

**Transaction ID : 76756847**

Amount of Each Receipt this Period  
25.00

Memo Item

**B. DOUGLASS, STANLEY, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 28800 SHINGLE CREEK LN

City SHINGLETOWN	State CA	Zip Code 96088-9658
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
201.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		03		2017

**Transaction ID : 76756867**

Amount of Each Receipt this Period  
36.00

Memo Item

**C. KITTRELL, IRVIN, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1 VETERANS WAY

City MEXICO	State MO	Zip Code 65265-3379
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
1400.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		10		2017

**Transaction ID : 76756873**

Amount of Each Receipt this Period  
100.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	161.00
<b>TOTAL</b> This Period (last page this line number only).....	



**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 385 OF 485
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<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. STAMOS, PETER J, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 404 W ELM ST  
 City SAINT MARYS State KS Zip Code 66536-1300  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) THE ONYX COLLECTION Occupation (for Individual) LABOURER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 296.00

Date of Receipt 10 / 20 / 2017  
**Transaction ID : 76756883**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**B. MILLS, DUSTIN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1701 LOTUS LN  
 City LUFKIN State TX Zip Code 75904-2661  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt 10 / 19 / 2017  
**Transaction ID : 76757028**  
 Amount of Each Receipt this Period 55.00  
 Memo Item

**C. HOLBROOK, EDWARD, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3 CORTES ST APT 31  
 City BOSTON State MA Zip Code 02116-5351  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Restaurant Ass Occupation (for Individual) Food Service  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 228.00

Date of Receipt 10 / 23 / 2017  
**Transaction ID : 76757115**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	255.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 386 OF 485
	<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. NABORS, CHARLES D, , DR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1260 GAINSBOROUGH DR

City SUNNYVALE	State CA	Zip Code 94087-2713
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Lumentum	Occupation (for Individual) Engineer
---	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		04		2017

**Transaction ID : 76757144**

Amount of Each Receipt this Period  
500.00

Memo Item

**B. STONE, WILLIAM O, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2464 HEDIGHAM BLVD

City WIXOM	State MI	Zip Code 48393-1720
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) FORD MOTOR CO.	Occupation (for Individual) RETIRED-TOOLMAKER
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
220.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		06		2017

**Transaction ID : 76757167**

Amount of Each Receipt this Period  
100.00

Memo Item

**C. BAUM, ROBERT, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6811 NE 121ST AVE APT LL319

City VANCOUVER	State WA	Zip Code 98682-5587
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) UNITED AIRLINES	Occupation (for Individual) MECHANIC
--	---

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
330.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		11		2017

**Transaction ID : 76757202**

Amount of Each Receipt this Period  
100.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	700.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 387 OF 485
	<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. BYSINGER, JAY, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5050 OAKMONT BEND DR

City ALPHARETTA	State GA	Zip Code 30004-3938
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		04		2017

**Transaction ID : 76757203**

Amount of Each Receipt this Period  
100.00

Memo Item

**B. KEGLEY, THOMAS DANIEL, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1370 HUCKLEBERRY RD

City CROCKETT	State VA	Zip Code 24323-3103
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
308.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		11		2017

**Transaction ID : 76757212**

Amount of Each Receipt this Period  
150.00

Memo Item

**C. DELARM, JUSTIN, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 92 WINDSOR AVENUE

City VERNON	State CT	Zip Code 06066-2434
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		06		2017

**Transaction ID : 76757455**

Amount of Each Receipt this Period  
250.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	500.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 388 OF 485  
(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 of Individual (Last, First, Middle Initial) or Full Organization Name  
 DIAS, MARY VICTORIA, , ,

Mailing Address 24892 GOLDEN VIS

City LAGUNA NIGUEL    State CA    Zip Code 92677-7461

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)    Occupation (for Individual)

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 23 / 2017

**Transaction ID : 76757457**

Amount of Each Receipt this Period  
 250.00

Memo Item

**B.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City    State    Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)    Occupation (for Individual)

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

**C.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City    State    Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)    Occupation (for Individual)

Receipt For:  
 Primary     General  
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	250.00
<b>TOTAL</b> This Period (last page this line number only).....▶	82407.28

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 389 OF 485
<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

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NAME OF COMMITTEE (In Full)  
**National Rifle Association of America Political Victory Fund**

**A.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**Starboard Strategic, Inc.**

Mailing Address 705 Melvin Avenue, #105

City Annapolis	State MD	Zip Code 21401
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
217616.07

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	23	/	2017

**Transaction ID : 76757465**

Amount of Each Receipt this Period  
208044.82

Memo Item

Refund Unused Media

**B.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City	State	Zip Code
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
-------	---	-------	---	-------------

Amount of Each Receipt this Period

Memo Item

**C.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City	State	Zip Code
------	-------	----------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
-------	---	-------	---	-------------

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	208044.82
<b>TOTAL</b> This Period (last page this line number only).....	208044.82

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 390 OF 485  
(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. BB&T Bank**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 11230 Waples Mill Road  
 City Fairfax State VA Zip Code 22030  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 0.50

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 31 / 2017  
**Transaction ID : 76758480**  
 Amount of Each Receipt this Period  
 0.05  
 Memo Item  
 Interest Income

**B.**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address  
 City State Zip Code  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 Amount of Each Receipt this Period  
 Memo Item

**C.**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address  
 City State Zip Code  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  
 Primary  General  
 Other (specify)  
 Aggregate Year-to-Date ▼

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 Amount of Each Receipt this Period  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	0.05
<b>TOTAL</b> This Period (last page this line number only).....▶	0.05

**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"/> 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. National Rifle Association of America**

Mailing Address 11250 Waples Mill Road

City Fairfax State VA Zip Code 22030

Purpose of Disbursement Website Hosting / Service Fee

Category/Type

Candidate Name

Office Sought:  House  Senate  President  
 Disbursement For:  Primary  General  Other (specify) ▼  
 State: District:

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : 76483289**  
 Amount of Each Disbursement this Period  
  
 Website Hosting / Service Fee  
 Memo Item

Full Name (Last, First, Middle Initial)

**B. BB&T Bank**

Mailing Address 11230 Waples Mill Road

City Fairfax State VA Zip Code 22030

Purpose of Disbursement Bank Service Fee

Category/Type

Candidate Name

Office Sought:  House  Senate  President  
 Disbursement For:  Primary  General  Other (specify) ▼  
 State: District:

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : 76758481**  
 Amount of Each Disbursement this Period  
  
 Bank Service Fee  
 Memo Item

Full Name (Last, First, Middle Initial)

**C. Wells Fargo Bank, N.A.**

Mailing Address 1300 Chain Bridge Road

City McLean State VA Zip Code 22101

Purpose of Disbursement Account Analysis Fee

Category/Type

Candidate Name

Office Sought:  House  Senate  President  
 Disbursement For:  Primary  General  Other (specify) ▼  
 State: District:

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : 76758482**  
 Amount of Each Disbursement this Period  
  
 Account Analysis Fee  
 Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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. Wells Fargo Bank, N.A.**

Mailing Address 1300 Chain Bridge Road

City McLean State VA Zip Code 22101

Purpose of Disbursement  
Account Analysis Fee

001  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
10 / 11 / 2017

FEC Identification Number

C   
**Transaction ID : 76758483**  
Amount of Each Disbursement this Period  
 217.62

Memo Item  
Account Analysis Fee

Full Name (Last, First, Middle Initial)

**B. Wells Fargo Bank, N.A.**

Mailing Address 1300 Chain Bridge Road

City McLean State VA Zip Code 22101

Purpose of Disbursement  
Account Analysis Fee

001  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
10 / 11 / 2017

FEC Identification Number

C   
**Transaction ID : 76758484**  
Amount of Each Disbursement this Period  
 1423.51

Memo Item  
Account Analysis Fee

Full Name (Last, First, Middle Initial)

**C. American Express Company**

Mailing Address P.O. Box 53852

City Phoenix State AZ Zip Code 85072

Purpose of Disbursement  
Credit Card Fees

001  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
10 / 31 / 2017

FEC Identification Number

C   
**Transaction ID : 76758485**  
Amount of Each Disbursement this Period  
 190.30

Memo Item  
Credit Card Fees

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

1831.43

**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"/> 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

001

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			31			2017			

FEC Identification Number

C [REDACTED]

**Transaction ID : 76758486**

Amount of Each Disbursement this Period

[REDACTED] 1911.34

Credit Card Fees

Memo Item

Full Name (Last, First, Middle Initial)

**B. PayPal**

Mailing Address 2211 North First Street

City  
San Jose

State  
CA

Zip Code  
95131

Purpose of Disbursement  
Credit Card Fees

001

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			31			2017			

FEC Identification Number

C [REDACTED]

**Transaction ID : 76758487**

Amount of Each Disbursement this Period

[REDACTED] 667.04

Credit Card Fees

Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

[REDACTED]

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

FEC Identification Number

C [REDACTED]

Amount of Each Disbursement this Period

[REDACTED]

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

[REDACTED] 2578.38

[REDACTED] 6433.70

**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"/> 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. Rodney For Congress**

Mailing Address PO Box 344

City  
Taylorville

State  
IL

Zip Code  
62568

Purpose of Disbursement

011

Category/  
Type

Candidate Name

**Davis, Rodney, , ,**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼

State: IL District: 13

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			05			2017			

FEC Identification Number

C00521948

**Transaction ID : 76483456**

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Ron Estes For Congress**

Mailing Address 12224 E Bracken Ct

City  
Wichita

State  
KS

Zip Code  
67206

Purpose of Disbursement

011

Category/  
Type

Candidate Name

**Estes, Ron, , ,**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2018  
 Primary  General  
 Other (specify)

State: KS District: 04

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			05			2017			

FEC Identification Number

C00632067

**Transaction ID : 76483457**

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Ann Wagner For Congress**

Mailing Address PO Box 50

City  
Ballwin

State  
MO

Zip Code  
63022

Purpose of Disbursement

011

Category/  
Type

Candidate Name

**Wagner, Ann, , ,**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼

State: MO District: 02

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			05			2017			

FEC Identification Number

C00495846

**Transaction ID : 76483458**

Amount of Each Disbursement this Period

1000.00

Memo Item

**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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<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. Joe Wilson For Congress**

Mailing Address PO Box 2145

City  
West Columbia

State  
SC

Zip Code  
29171

Purpose of Disbursement

011

Category/  
Type

Candidate Name

**Wilson, Joe, , ,**

Office Sought:

House  
 Senate  
 President

Disbursement For: 2018

Primary  General  
 Other (specify) ▼

State: SC

District: 00

Date of Disbursement

MM / DD / YYYY  
10 / 05 / 2017

FEC Identification Number

C00368522

**Transaction ID : 76483459**

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Loudermilk For Congress**

Mailing Address PO Box 447

City  
Cassville

State  
GA

Zip Code  
30123

Purpose of Disbursement

011

Category/  
Type

Candidate Name

**Loudermilk, Barry, , Rep.,**

Office Sought:

House  
 Senate  
 President

Disbursement For: 2018

Primary  General  
 Other (specify) ▼

State: GA

District: 11

Date of Disbursement

MM / DD / YYYY  
10 / 27 / 2017

FEC Identification Number

C00543892

**Transaction ID : 76629957**

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Graves For Congress**

Mailing Address PO Box 335

City  
Calhoun

State  
GA

Zip Code  
30703

Purpose of Disbursement

011

Category/  
Type

Candidate Name

**Graves, Tom, , Rep.,**

Office Sought:

House  
 Senate  
 President

Disbursement For: 2018

Primary  General  
 Other (specify) ▼

State: GA

District: 14

Date of Disbursement

MM / DD / YYYY  
10 / 27 / 2017

FEC Identification Number

C00462556

**Transaction ID : 76629958**

Amount of Each Disbursement this Period

1000.00

Memo Item

**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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<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. Randy Hultgren For Congress**

Mailing Address PO Box 717

City  
St Charles

State  
IL

Zip Code  
60174

Purpose of Disbursement

011

Category/  
Type

Candidate Name

**Hultgren, Randy, , ,**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼

State: IL District: 14

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			27			2017			

FEC Identification Number

**C** C00467522

**Transaction ID : 76629959**

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Friends Of Paul Mitchell**

Mailing Address 4068 Hough Rd

City  
Dryden

State  
MI

Zip Code  
48428

Purpose of Disbursement

011

Category/  
Type

Candidate Name

**Mitchell, Paul, , Rep.,**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2018  
 Primary  General  
 Other (specify)

State: MI District: 10

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			27			2017			

FEC Identification Number

**C** C00581090

**Transaction ID : 76629960**

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Graves For Congress**

Mailing Address 2345 Grand Blvd, Suite 2400

City  
Kansas City

State  
MO

Zip Code  
64108

Purpose of Disbursement

011

Category/  
Type

Candidate Name

**Graves, Samuel, B., Rep., Jr.**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼

State: MO District: 06

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			27			2017			

FEC Identification Number

**C** C00359034

**Transaction ID : 76629961**

Amount of Each Disbursement this Period

1000.00

Memo Item

**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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<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. Jason Smith For Congress**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		27		2017

Mailing Address PO Box 1324

City Cape Girardeau State MO Zip Code 63702

FEC Identification Number

**C** C00541862

**Transaction ID : 76629962**

Amount of Each Disbursement this Period

1500.00

Memo Item

Purpose of Disbursement

011  
Category/  
Type

Candidate Name

**Smith, Jason, , ,**

Office Sought:  House  Senate  President

Disbursement For: 2018  Primary  General  Other (specify) ▼

State: MO District: 08

Full Name (Last, First, Middle Initial)

**B. Faso For Congress**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		27		2017

Mailing Address PO Box 448

City Kinderhook State NY Zip Code 12106

FEC Identification Number

**C** C00580415

**Transaction ID : 76629963**

Amount of Each Disbursement this Period

2000.00

Memo Item

Purpose of Disbursement

011  
Category/  
Type

Candidate Name

**Faso, John, , ,**

Office Sought:  House  Senate  President

Disbursement For: 2018  Primary  General  Other (specify) ▼

State: NY District: 19

Full Name (Last, First, Middle Initial)

**C. Collins For Congress**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		27		2017

Mailing Address PO Box 386

City Clarence State NY Zip Code 14031

FEC Identification Number

**C** C00520379

**Transaction ID : 76629964**

Amount of Each Disbursement this Period

1000.00

Memo Item

Purpose of Disbursement

011  
Category/  
Type

Candidate Name

**Collins, Christopher, , Rep.,**

Office Sought:  House  Senate  President

Disbursement For: 2018  Primary  General  Other (specify) ▼

State: NY District: 27

**SUBTOTAL** of Disbursements This Page (optional).....▶

4500.00

**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"/> 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. Jim Jordan For Congress**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		27		2017

Mailing Address 1709 State Route 560 South

FEC Identification Number

**C** C00416594

**Transaction ID : 76629965**

Amount of Each Disbursement this Period

1000.00

Memo Item

City Urbana State OH Zip Code 43078

Purpose of Disbursement

011  
Category/Type

Candidate Name  
**Jordan, Jim, , Rep.,**

Office Sought:  House  Senate  President  
Disbursement For: 2018  Primary  General  Other (specify) ▼  
State: OH District: 04

Full Name (Last, First, Middle Initial)  
**B. Smucker for Congress**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		27		2017

Mailing Address 548 Steel Way

FEC Identification Number

**C** C00599464

**Transaction ID : 76629966**

Amount of Each Disbursement this Period

1000.00

Memo Item

City Lancaster State PA Zip Code 17604

Purpose of Disbursement

011  
Category/Type

Candidate Name  
**Smucker, Lloyd, , ,**

Office Sought:  House  Senate  President  
Disbursement For: 2018  Primary  General  Other (specify) ▼  
State: PA District: 16

Full Name (Last, First, Middle Initial)  
**C. Ralph Norman For Congress**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		27		2017

Mailing Address P O Box 36518

FEC Identification Number

**C** C00416461

**Transaction ID : 76629967**

Amount of Each Disbursement this Period

1000.00

Memo Item

City Rock Hill State SC Zip Code 29732

Purpose of Disbursement

011  
Category/Type

Candidate Name  
**Norman, Ralph, , Mr.,**

Office Sought:  House  Senate  President  
Disbursement For: 2018  Primary  General  Other (specify) ▼  
State: SC District: 05

**SUBTOTAL** of Disbursements This Page (optional).....▶

**TOTAL** This Period (last page this line number only).....▶

3000.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<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. Ted Cruz For Senate**

Mailing Address 815 A Brazos Street  
PMB 550

City Austin State TX Zip Code 78701

Purpose of Disbursement

011

Category/  
Type

Candidate Name

**Cruz, Rafael, , ,**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼

State: TX District:

Date of Disbursement

MM / DD / YYYY  
10 / 27 / 2017

FEC Identification Number

C C00492785

**Transaction ID : 76629968**

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Tom Garrett For Congress**

Mailing Address P.O. Box 209

City Ruckersville State VA Zip Code 22968

Purpose of Disbursement

011

Category/  
Type

Candidate Name

**Garrett, Thomas, , , Jr.**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼

State: VA District: 05

Date of Disbursement

MM / DD / YYYY  
10 / 27 / 2017

FEC Identification Number

C C00607101

**Transaction ID : 76629969**

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Mooney For Congress**

Mailing Address P.O. Box 1863

City Martinsburg State WV Zip Code 25402

Purpose of Disbursement

011

Category/  
Type

Candidate Name

**Mooney, Alexander, , ,**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼

State: WV District: 02

Date of Disbursement

MM / DD / YYYY  
10 / 27 / 2017

FEC Identification Number

C C00506774

**Transaction ID : 76629970**

Amount of Each Disbursement this Period

1000.00

Memo Item

**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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<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. Mike Rogers For Congress</b>		Date of Disbursement MM / DD / YYYY 10 / 31 / 2017
Mailing Address 123 East 13th Street		FEC Identification Number C00367862 <b>Transaction ID : 76678770</b>
City Anniston	State AL	Zip Code 36201
Purpose of Disbursement	Category/Type 011	Amount of Each Disbursement this Period 1000.00
Candidate Name <b>Rogers, Mike, D., Rep.,</b>	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: AL District: 03	

Full Name (Last, First, Middle Initial) <b>B. VoteTipton.Com</b>		Date of Disbursement MM / DD / YYYY 10 / 31 / 2017
Mailing Address PO Box 1582		FEC Identification Number C00470757 <b>Transaction ID : 76678771</b>
City Cortez	State CO	Zip Code 81321
Purpose of Disbursement	Category/Type 011	Amount of Each Disbursement this Period 1000.00
Candidate Name <b>Tipton, Scott, , ,</b>	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<input type="checkbox"/> Memo Item
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: CO District: 03	

Full Name (Last, First, Middle Initial) <b>C. Sanford Bishop For Congress</b>		Date of Disbursement MM / DD / YYYY 10 / 31 / 2017
Mailing Address P O Box 909		FEC Identification Number C00266940 <b>Transaction ID : 76678772</b>
City Columbus	State GA	Zip Code 31902
Purpose of Disbursement	Category/Type 011	Amount of Each Disbursement this Period 2500.00
Candidate Name <b>Bishop, Sanford, D., Rep., Jr.</b>	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: GA District: 02	

**SUBTOTAL** of Disbursements This Page (optional).....▶

**TOTAL** This Period (last page this line number only).....▶

4500.00



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<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. Austin Scott For Congress Inc**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2017

Mailing Address PO Box 2530

FEC Identification Number

**C** C00482737

**Transaction ID : 76678774**

Amount of Each Disbursement this Period

1000.00

Memo Item

City Tifton State GA Zip Code 31793

Purpose of Disbursement

**011**  
Category/  
Type

Candidate Name

**Scott, Austin, , Rep.,**

Office Sought:  House  Senate  President  
State: GA District: 08

Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼

Full Name (Last, First, Middle Initial)

**B. Poliquin For Congress**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2017

Mailing Address PO Box 50

FEC Identification Number

**C** C00518654

**Transaction ID : 76678775**

Amount of Each Disbursement this Period

2000.00

Memo Item

City Oakland State ME Zip Code 04963

Purpose of Disbursement

**011**  
Category/  
Type

Candidate Name

**Poliquin, Bruce, , ,**

Office Sought:  House  Senate  President  
State: ME District: 02

Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼

Full Name (Last, First, Middle Initial)

**C. Jeff Duncan For Congress**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2017

Mailing Address PO Box 845

FEC Identification Number

**C** C00460550

**Transaction ID : 76678776**

Amount of Each Disbursement this Period

1000.00

Memo Item

City Laurens State SC Zip Code 29360

Purpose of Disbursement

**011**  
Category/  
Type

Candidate Name

**Duncan, Jeff, , Rep.,**

Office Sought:  House  Senate  President  
State: SC District: 03

Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

4000.00

**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"/> 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. McKinley For Congress**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
10			31			2017					

Mailing Address PO Box 642

City  
Morgantown

State  
WV

Zip Code  
26507

FEC Identification Number

**C** C00473132

**Transaction ID : 76678778**

Amount of Each Disbursement this Period

1000.00

Purpose of Disbursement

011  
Category/  
Type

Candidate Name

**McKinley, David, , ,**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼

State: WV District: 01

Memo Item

Full Name (Last, First, Middle Initial)

**B.**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y

Mailing Address

City

State

Zip Code

FEC Identification Number

**C**

Amount of Each Disbursement this Period

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify)

State: District:

Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y

Mailing Address

City

State

Zip Code

FEC Identification Number

**C**

Amount of Each Disbursement this Period

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

1000.00

**TOTAL** This Period (last page this line number only)..... ▶

29000.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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. Winding Brook Indoor Shooting Range, LLC**

Date of Disbursement: 10 / 04 / 2017

Mailing Address: 13552 Heritage Farms Drive

City: Gainesville, State: VA, Zip Code: 20155

Purpose of Disbursement: Independent Expenditure - Meeting Room Rental

Candidate Name: Gillespie, Edward, , ,

Office Sought:  House,  Senate,  President

Disbursement For:  Primary,  General,  Other (specify) ▼

State: District:

FEC Identification Number: C [redacted]  
Transaction ID : 76483292  
Amount of Each Disbursement this Period: 62.50  
Memo Item:  Independent Expenditure - Meeting Room Rental

Full Name (Last, First, Middle Initial)  
**B. Winding Brook Indoor Shooting Range, LLC**

Date of Disbursement: 10 / 04 / 2017

Mailing Address: 13552 Heritage Farms Drive

City: Gainesville, State: VA, Zip Code: 20155

Purpose of Disbursement: Independent Expenditure - Meeting Room Rental

Candidate Name: Vogel, Jill, , ,

Office Sought:  House,  Senate,  President

Disbursement For:  Primary,  General,  Other (specify) ▼

State: District:

FEC Identification Number: C [redacted]  
Transaction ID : 76483293  
Amount of Each Disbursement this Period: 62.50  
Memo Item:  Independent Expenditure - Meeting Room Rental

Full Name (Last, First, Middle Initial)  
**C. Winding Brook Indoor Shooting Range, LLC**

Date of Disbursement: 10 / 04 / 2017

Mailing Address: 13552 Heritage Farms Drive

City: Gainesville, State: VA, Zip Code: 20155

Purpose of Disbursement: Independent Expenditure - Meeting Room Rental

Candidate Name: Adams, John, , ,

Office Sought:  House,  Senate,  President

Disbursement For:  Primary,  General,  Other (specify) ▼

State: District:

FEC Identification Number: C [redacted]  
Transaction ID : 76483294  
Amount of Each Disbursement this Period: 62.50  
Memo Item:  Independent Expenditure - Meeting Room Rental

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 187.50

**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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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. Winding Brook Indoor Shooting Range, LLC**

Mailing Address 13552 Heritage Farms Drive

City Gainesville State VA Zip Code 20155

Purpose of Disbursement  
Independent Expenditure - Meeting Room Rental

004

Candidate Name  
**Northam, Ralph, S., ,**

Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 04 / 2017

FEC Identification Number

C [REDACTED]

Transaction ID : 76483355

Amount of Each Disbursement this Period

[REDACTED] 62.50

Memo Item Independent Expenditure - Meeting Room Rental

Full Name (Last, First, Middle Initial)

**B. Winding Brook Indoor Shooting Range, LLC**

Mailing Address 13552 Heritage Farms Drive

City Gainesville State VA Zip Code 20155

Purpose of Disbursement  
Independent Expenditure - Meeting Room Rental

004

Candidate Name  
**Fairfax, Justin, , ,**

Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 04 / 2017

FEC Identification Number

C [REDACTED]

Transaction ID : 76483356

Amount of Each Disbursement this Period

[REDACTED] 62.50

Memo Item Independent Expenditure - Meeting Room Rental

Full Name (Last, First, Middle Initial)

**C. Winding Brook Indoor Shooting Range, LLC**

Mailing Address 13552 Heritage Farms Drive

City Gainesville State VA Zip Code 20155

Purpose of Disbursement  
Independent Expenditure - Meeting Room Rental

004

Candidate Name  
**Herring, Mark, , ,**

Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 04 / 2017

FEC Identification Number

C [REDACTED]

Transaction ID : 76483396

Amount of Each Disbursement this Period

[REDACTED] 62.50

Memo Item Independent Expenditure - Meeting Room Rental

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

[REDACTED] 187.50

[REDACTED]

**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"/> 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. Master Print, Inc.**

Date of Disbursement  
MM / DD / YYYY  
10 / 04 / 2017

Mailing Address P.O. Box 1467

City Newington State VA Zip Code 22122

Purpose of Disbursement  
Independent Expenditure - Print 4 Color Door Hangers

Candidate Name  
**Gillespie, Edward, , ,**

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

State: District:

FEC Identification Number  
**C**

**Transaction ID : 76483442**

Amount of Each Disbursement this Period  
375.69

Memo Item Independent Expenditure - Print 4 Color Door Hangers

Full Name (Last, First, Middle Initial)  
**B. Master Print, Inc.**

Date of Disbursement  
MM / DD / YYYY  
10 / 04 / 2017

Mailing Address P.O. Box 1467

City Newington State VA Zip Code 22122

Purpose of Disbursement  
Independent Expenditure - Print 4 Color Door Hangers

Candidate Name  
**Northam, Ralph, S., ,**

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

State: District:

FEC Identification Number  
**C**

**Transaction ID : 76483443**

Amount of Each Disbursement this Period  
375.69

Memo Item Independent Expenditure - Print 4 Color Door Hangers

Full Name (Last, First, Middle Initial)  
**C. Master Print, Inc.**

Date of Disbursement  
MM / DD / YYYY  
10 / 04 / 2017

Mailing Address P.O. Box 1467

City Newington State VA Zip Code 22122

Purpose of Disbursement  
Independent Expenditure - Print 4 Color Door Hangers

Candidate Name  
**Vogel, Jill, , ,**

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

State: District:

FEC Identification Number  
**C**

**Transaction ID : 76483444**

Amount of Each Disbursement this Period  
375.69

Memo Item Independent Expenditure - Print 4 Color Door Hangers

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 1127.07

**TOTAL** This Period (last page this line number only)..... ▶

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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. Master Print, Inc.

Mailing Address P.O. Box 1467

City  
Newington

State  
VA

Zip Code  
22122

Purpose of Disbursement  
Independent Expenditure - Print 4 Color Door Hangers

001  
 002  
 003  
 004  
Category/  
Type

Candidate Name  
**Fairfax, Justin, , ,**

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		04		2017

FEC Identification Number

**C** [Redacted]

**Transaction ID : 76483445**

Amount of Each Disbursement this Period

[Redacted]	375.69
------------	--------

Memo Item Independent Expenditure - Print 4  
Color Door Hangers

Full Name (Last, First, Middle Initial)

### B. Master Print, Inc.

Mailing Address P.O. Box 1467

City  
Newington

State  
VA

Zip Code  
22122

Purpose of Disbursement  
Independent Expenditure - Print 4 Color Door Hangers

001  
 002  
 003  
 004  
Category/  
Type

Candidate Name  
**Adams, John, , ,**

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		04		2017

FEC Identification Number

**C** [Redacted]

**Transaction ID : 76483446**

Amount of Each Disbursement this Period

[Redacted]	375.69
------------	--------

Memo Item Independent Expenditure - Print 4  
Color Door Hangers

Full Name (Last, First, Middle Initial)

### C. Master Print, Inc.

Mailing Address P.O. Box 1467

City  
Newington

State  
VA

Zip Code  
22122

Purpose of Disbursement  
Independent Expenditure - Print 4 Color Door Hangers

001  
 002  
 003  
 004  
Category/  
Type

Candidate Name  
**Herring, Mark, , ,**

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		04		2017

FEC Identification Number

**C** [Redacted]

**Transaction ID : 76483447**

Amount of Each Disbursement this Period

[Redacted]	375.69
------------	--------

Memo Item Independent Expenditure - Print 4  
Color Door Hangers

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

[Redacted]	1127.07
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**TOTAL** This Period (last page this line number only)..... ▶

[Redacted]	
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**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"/> 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. Master Print, Inc.</b>		Date of Disbursement MM / DD / YYYY 10 / 04 / 2017	
Mailing Address P.O. Box 1467		FEC Identification Number C [REDACTED] <b>Transaction ID : 76483448</b>	
City Newington	State VA	Zip Code 22122	Amount of Each Disbursement this Period 41.74
Purpose of Disbursement Independent Expenditure - Print 4 Color Door Hangers		Category/Type 004	Independent Expenditure - Print 4 Color Door Hangers
Candidate Name <b>Makee, Mike, , ,</b>		Memo Item <input type="checkbox"/>	
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. Master Print, Inc.</b>		Date of Disbursement MM / DD / YYYY 10 / 04 / 2017	
Mailing Address P.O. Box 1467		FEC Identification Number C [REDACTED] <b>Transaction ID : 76483449</b>	
City Newington	State VA	Zip Code 22122	Amount of Each Disbursement this Period 41.74
Purpose of Disbursement Independent Expenditure - Print 4 Color Door Hangers		Category/Type 004	Independent Expenditure - Print 4 Color Door Hangers
Candidate Name <b>Villanueva, Ronald, , ,</b>		Memo Item <input type="checkbox"/>	
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. Master Print, Inc.</b>		Date of Disbursement MM / DD / YYYY 10 / 04 / 2017	
Mailing Address P.O. Box 1467		FEC Identification Number C [REDACTED] <b>Transaction ID : 76483450</b>	
City Newington	State VA	Zip Code 22122	Amount of Each Disbursement this Period 41.74
Purpose of Disbursement Independent Expenditure - Print 4 Color Door Hangers		Category/Type 004	Independent Expenditure - Print 4 Color Door Hangers
Candidate Name <b>Robinson, Roxann, , VA Del.,</b>		Memo Item <input type="checkbox"/>	
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).....	125.22
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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. Master Print, Inc.**

Mailing Address P.O. Box 1467

City  
Newington

State  
VA

Zip Code  
22122

Purpose of Disbursement  
Independent Expenditure - Print 4 Color Door Hangers

**004**

Category/  
Type

Candidate Name

**Lingamfelter, L. Scott, , Del.,**

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		04		2017

FEC Identification Number

**C**

**Transaction ID : 76483451**

Amount of Each Disbursement this Period

**41.74**

Memo Item Independent Expenditure - Print 4  
Color Door Hangers

Full Name (Last, First, Middle Initial)

**B. Master Print, Inc.**

Mailing Address P.O. Box 1467

City  
Newington

State  
VA

Zip Code  
22122

Purpose of Disbursement  
Independent Expenditure - Print 4 Color Door Hangers

**004**

Category/  
Type

Candidate Name

**Whitlock, Edward, , ,**

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify)

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		04		2017

FEC Identification Number

**C**

**Transaction ID : 76483452**

Amount of Each Disbursement this Period

**41.75**

Memo Item Independent Expenditure - Print 4  
Color Door Hangers

Full Name (Last, First, Middle Initial)

**C. Master Print, Inc.**

Mailing Address P.O. Box 1467

City  
Newington

State  
VA

Zip Code  
22122

Purpose of Disbursement  
Independent Expenditure - Print 4 Color Door Hangers

**004**

Category/  
Type

Candidate Name

**Bloxom, Robert, , Delegate,**

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		04		2017

FEC Identification Number

**C**

**Transaction ID : 76483454**

Amount of Each Disbursement this Period

**41.75**

Memo Item Independent Expenditure - Print 4  
Color Door Hangers

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

**125.24**



**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"/> 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. National Rifle Association of America**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
10			05			2017					

Mailing Address 11250 Waples Mill Road

City Fairfax State VA Zip Code 22030

FEC Identification Number

C [REDACTED]

**Transaction ID : 76504663**

Amount of Each Disbursement this Period

[REDACTED] 1949.64

Purpose of Disbursement Independent Expenditure - Salary / Benefits

001  
Category/Type

Candidate Name Gillespie, Edward, , ,

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Memo Item Independent Expenditure - Salary / Benefits

Full Name (Last, First, Middle Initial)

**B. National Rifle Association of America**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
10			05			2017					

Mailing Address 11250 Waples Mill Road

City Fairfax State VA Zip Code 22030

FEC Identification Number

C [REDACTED]

**Transaction ID : 76504664**

Amount of Each Disbursement this Period

[REDACTED] 1949.64

Purpose of Disbursement Independent Expenditure - Salary / Benefits

001  
Category/Type

Candidate Name Vogel, Jill, , ,

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Memo Item Independent Expenditure - Salary / Benefits

Full Name (Last, First, Middle Initial)

**C. National Rifle Association of America**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
10			05			2017					

Mailing Address 11250 Waples Mill Road

City Fairfax State VA Zip Code 22030

FEC Identification Number

C [REDACTED]

**Transaction ID : 76504665**

Amount of Each Disbursement this Period

[REDACTED] 1949.64

Purpose of Disbursement Independent Expenditure - Salary / Benefits

001  
Category/Type

Candidate Name Adams, John, , ,

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Memo Item Independent Expenditure - Salary / Benefits

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

[REDACTED] 5848.92

[REDACTED]

**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"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**National Rifle Association of America Political Victory Fund**

**A. Starboard Strategic, Inc.**

Full Name (Last, First, Middle Initial)

Mailing Address 705 Melvin Avenue, #105

City Annapolis State MD Zip Code 21401

Purpose of Disbursement Independent Expenditure - TV & Internet Ads

Candidate Name Northam, Ralph, S., ,

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement 10 / 13 / 2017

FEC Identification Number C

Transaction ID : 76525612

Amount of Each Disbursement this Period 1120375.54

Memo Item Independent Expenditure - TV & Internet Ads

**B. Starboard Strategic, Inc.**

Full Name (Last, First, Middle Initial)

Mailing Address 705 Melvin Avenue, #105

City Annapolis State MD Zip Code 21401

Purpose of Disbursement Independent Expenditure - TV & Internet Ads

Candidate Name Northam, Ralph, S., ,

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement 10 / 13 / 2017

FEC Identification Number C

Transaction ID : 76525614

Amount of Each Disbursement this Period 100613.93

Memo Item Independent Expenditure - TV & Internet Ads

**C. Starboard Strategic, Inc.**

Full Name (Last, First, Middle Initial)

Mailing Address 705 Melvin Avenue, #105

City Annapolis State MD Zip Code 21401

Purpose of Disbursement Independent Expenditure - TV & Internet Ads

Candidate Name Gillespie, Edward, , ,

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement 10 / 13 / 2017

FEC Identification Number C

Transaction ID : 76525615

Amount of Each Disbursement this Period 100613.93

Memo Item Independent Expenditure - TV & Internet Ads

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 1321603.40

**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"/> 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. Master Print, Inc.**

Mailing Address P.O. Box 1467

City Newington State VA Zip Code 22122

Purpose of Disbursement Independent Expenditure - Print 4 Color Door Hangers

004  
Category/Type

Candidate Name Guadagno, Kim, , ,

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
10 / 13 / 2017

FEC Identification Number

C  
Transaction ID : 76587783  
Amount of Each Disbursement this Period  
732.15

Memo Item Independent Expenditure - Print 4 Color Door Hangers

Full Name (Last, First, Middle Initial)

**B. Master Print, Inc.**

Mailing Address P.O. Box 1467

City Newington State VA Zip Code 22122

Purpose of Disbursement Independent Expenditure - Print 4 Color Door Hangers

004  
Category/Type

Candidate Name Murphy, Phil, , ,

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
10 / 13 / 2017

FEC Identification Number

C  
Transaction ID : 76587784  
Amount of Each Disbursement this Period  
732.14

Memo Item Independent Expenditure - Print 4 Color Door Hangers

Full Name (Last, First, Middle Initial)

**C. i360, LLC**

Mailing Address 29374 Network Place

City Chicago State IL Zip Code 60673-1293

Purpose of Disbursement Independent Expenditure - Phone Bank

004  
Category/Type

Candidate Name Gillespie, Edward, , ,

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
10 / 13 / 2017

FEC Identification Number

C  
Transaction ID : 76587911  
Amount of Each Disbursement this Period  
213.58

Memo Item Independent Expenditure - Phone Bank

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

1677.87

**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"/> 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. i360, LLC**

Mailing Address 29374 Network Place

City Chicago State IL Zip Code 60673-1293

Purpose of Disbursement Independent Expenditure - Phone Bank

001  
 002  
 003  
 004  
 005  
Category/Type

Candidate Name Northam, Ralph, S., ,

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
10 / 13 / 2017

FEC Identification Number

C  
**Transaction ID : 76587913**  
Amount of Each Disbursement this Period  
213.57

Memo Item Bank Independent Expenditure - Phone Bank

Full Name (Last, First, Middle Initial)

**B. i360, LLC**

Mailing Address 29374 Network Place

City Chicago State IL Zip Code 60673-1293

Purpose of Disbursement Independent Expenditure - Phone Bank

001  
 002  
 003  
 004  
 005  
Category/Type

Candidate Name Vogel, Jill, , ,

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
10 / 13 / 2017

FEC Identification Number

C  
**Transaction ID : 76587914**  
Amount of Each Disbursement this Period  
213.57

Memo Item Bank Independent Expenditure - Phone Bank

Full Name (Last, First, Middle Initial)

**C. i360, LLC**

Mailing Address 29374 Network Place

City Chicago State IL Zip Code 60673-1293

Purpose of Disbursement Independent Expenditure - Phone Bank

001  
 002  
 003  
 004  
 005  
Category/Type

Candidate Name Fairfax, Justin, , ,

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
10 / 13 / 2017

FEC Identification Number

C  
**Transaction ID : 76587915**  
Amount of Each Disbursement this Period  
213.57

Memo Item Bank Independent Expenditure - Phone Bank

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

640.71

**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"/> 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. i360, LLC**

Mailing Address 29374 Network Place

City Chicago State IL Zip Code 60673-1293

Purpose of Disbursement Independent Expenditure - Phone Bank

001  
 002  
 003  
 004  
 005  
Category/Type

Candidate Name Adams, John, , ,

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
10 / 13 / 2017

FEC Identification Number

C  
**Transaction ID : 76587916**  
Amount of Each Disbursement this Period  
213.57

Memo Item Bank Independent Expenditure - Phone Bank

Full Name (Last, First, Middle Initial)

**B. i360, LLC**

Mailing Address 29374 Network Place

City Chicago State IL Zip Code 60673-1293

Purpose of Disbursement Independent Expenditure - Phone Bank

001  
 002  
 003  
 004  
 005  
Category/Type

Candidate Name Herring, Mark, R., ,

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
10 / 13 / 2017

FEC Identification Number

C  
**Transaction ID : 76587917**  
Amount of Each Disbursement this Period  
213.57

Memo Item Bank Independent Expenditure - Phone Bank

Full Name (Last, First, Middle Initial)

**C. i360, LLC**

Mailing Address 29374 Network Place

City Chicago State IL Zip Code 60673-1293

Purpose of Disbursement Independent Expenditure - Phone Bank

001  
 002  
 003  
 004  
 005  
Category/Type

Candidate Name Guadagno, Kim, , ,

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
10 / 13 / 2017

FEC Identification Number

C  
**Transaction ID : 76587938**  
Amount of Each Disbursement this Period  
0.75

Memo Item Bank Independent Expenditure - Phone Bank

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

427.89

**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"/> 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. i360, LLC</b>		Date of Disbursement MM / DD / YYYY 10 / 13 / 2017	
Mailing Address 29374 Network Place		FEC Identification Number C [REDACTED] <b>Transaction ID : 76587939</b>	
City Chicago	State IL	Zip Code 60673-1293	Amount of Each Disbursement this Period [REDACTED] 0.75
Purpose of Disbursement Independent Expenditure - Phone Bank		Category/Type 004	Independent Expenditure - Phone Bank <input type="checkbox"/> Memo Item Bank
Candidate Name <b>Murphy, Phil, , ,</b>			
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. i360, LLC</b>		Date of Disbursement MM / DD / YYYY 10 / 13 / 2017	
Mailing Address 29374 Network Place		FEC Identification Number C [REDACTED] <b>Transaction ID : 76587940</b>	
City Chicago	State IL	Zip Code 60673-1293	Amount of Each Disbursement this Period [REDACTED] 0.75
Purpose of Disbursement Independent Expenditure - Phone Bank		Category/Type 004	Independent Expenditure - Phone Bank <input type="checkbox"/> Memo Item Bank
Candidate Name <b>Simon, Donna, , NJ Asm.,</b>			
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. i360, LLC</b>		Date of Disbursement MM / DD / YYYY 10 / 13 / 2017	
Mailing Address 29374 Network Place		FEC Identification Number C [REDACTED] <b>Transaction ID : 76587941</b>	
City Chicago	State IL	Zip Code 60673-1293	Amount of Each Disbursement this Period [REDACTED] 0.75
Purpose of Disbursement Independent Expenditure - Phone Bank		Category/Type 004	Independent Expenditure - Phone Bank <input type="checkbox"/> Memo Item Bank
Candidate Name <b>Zwicker, Andrew, , NJ Asm.,</b>			
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).....▶	[REDACTED] 2.25
<b>TOTAL</b> This Period (last page this line number only).....▶	[REDACTED]



**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"/> 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. Starboard Strategic, Inc.**

Mailing Address 705 Melvin Avenue, #105

City Annapolis State MD Zip Code 21401

Purpose of Disbursement Independent Expenditure - TV & Internet Ads

004

Category/Type

Candidate Name Herring, Mark, R., ,

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 17 / 2017

FEC Identification Number

C [REDACTED]

Transaction ID : 76587991

Amount of Each Disbursement this Period

[REDACTED] 306669.36

Memo Item Independent Expenditure - TV & Internet Ads

Full Name (Last, First, Middle Initial)

**B. Woodinville Hotel Investors, LLC**

Mailing Address Hampton Inn & Suites Woodinville  
19211 Woodinville Snohomish Road,

City Woodinville State WA Zip Code 98072

Purpose of Disbursement Independent Expenditure - Meeting Room Rental

004

Category/Type

Candidate Name Dhingra, Manka, , ,

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 20 / 2017

FEC Identification Number

C [REDACTED]

Transaction ID : 76602296

Amount of Each Disbursement this Period

[REDACTED] 375.00

Memo Item Independent Expenditure - Meeting Room Rental

Full Name (Last, First, Middle Initial)

**C. Woodinville Hotel Investors, LLC**

Mailing Address Hampton Inn & Suites Woodinville  
19211 Woodinville Snohomish Road,

City Woodinville State WA Zip Code 98072

Purpose of Disbursement Independent Expenditure - Meeting Room Rental

004

Category/Type

Candidate Name Englund, Jinyoung, , ,

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 20 / 2017

FEC Identification Number

C [REDACTED]

Transaction ID : 76602303

Amount of Each Disbursement this Period

[REDACTED] 125.00

Memo Item Independent Expenditure - Meeting Room Rental

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

[REDACTED] 307169.36

[REDACTED]



**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"/> 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. Committee to Elect a Republican Senate**

Mailing Address P.O. Box 2741

City  
Madison

State  
WI

Zip Code  
53701

Purpose of Disbursement

011

Category/  
Type

Candidate Name

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) ▼

State:

District:

Date of Disbursement

MM / DD / YYYY  
10 / 23 / 2017

FEC Identification Number

C [REDACTED]

Transaction ID : 76605005

Amount of Each Disbursement this Period

[REDACTED] 1500.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. National Rifle Association of America**

Mailing Address 11250 Waples Mill Road

City  
Fairfax

State  
VA

Zip Code  
22030

Purpose of Disbursement  
Independent Expenditure - E-Mail Invitation

004

Category/  
Type

Candidate Name

**Dhingra, Manka, , ,**

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) ▼

State:

District:

Date of Disbursement

MM / DD / YYYY  
10 / 20 / 2017

FEC Identification Number

C [REDACTED]

Transaction ID : 76605036

Amount of Each Disbursement this Period

[REDACTED] 25.81

Independent Expenditure - E-Mail Invitation

Memo Item

Full Name (Last, First, Middle Initial)

**C. National Rifle Association of America**

Mailing Address 11250 Waples Mill Road

City  
Fairfax

State  
VA

Zip Code  
22030

Purpose of Disbursement  
Independent Expenditure - E-Mail Invitation

004

Category/  
Type

Candidate Name

**Englund, Jinyoung, , ,**

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) ▼

State:

District:

Date of Disbursement

MM / DD / YYYY  
10 / 20 / 2017

FEC Identification Number

C [REDACTED]

Transaction ID : 76605037

Amount of Each Disbursement this Period

[REDACTED] 8.60

Independent Expenditure - E-Mail Invitation

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

[REDACTED] 1534.41

[REDACTED]

**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"/> 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. Prolist Inc.**

Mailing Address 4510 Buckeystown Pike, Suite M

City  
Frederick

State  
MD

Zip Code  
21704-7539

Purpose of Disbursement  
Independent Expenditure - Postage

004

Category/  
Type

Candidate Name

**Makee, Mike, , ,**

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		20		2017

FEC Identification Number

C [REDACTED]

**Transaction ID : 76609097**

Amount of Each Disbursement this Period

[REDACTED] 183.23

Independent Expenditure - Postage

Memo Item

Full Name (Last, First, Middle Initial)

**B. Prolist Inc.**

Mailing Address 4510 Buckeystown Pike, Suite M

City  
Frederick

State  
MD

Zip Code  
21704-7539

Purpose of Disbursement  
Independent Expenditure - Postage

004

Category/  
Type

Candidate Name

**Minchew, Randy, , ,**

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		20		2017

FEC Identification Number

C [REDACTED]

**Transaction ID : 76609098**

Amount of Each Disbursement this Period

[REDACTED] 260.98

Independent Expenditure - Postage

Memo Item

Full Name (Last, First, Middle Initial)

**C. Prolist Inc.**

Mailing Address 4510 Buckeystown Pike, Suite M

City  
Frederick

State  
MD

Zip Code  
21704-7539

Purpose of Disbursement  
Independent Expenditure - Postage

004

Category/  
Type

Candidate Name

**Yost, Joseph, Ryan, ,**

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		20		2017

FEC Identification Number

C [REDACTED]

**Transaction ID : 76609099**

Amount of Each Disbursement this Period

[REDACTED] 314.82

Independent Expenditure - Postage

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

[REDACTED] 759.03

[REDACTED]

**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"/> 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. Prolist Inc.**

Mailing Address 4510 Buckeystown Pike, Suite M

City Frederick State MD Zip Code 21704-7539

Purpose of Disbursement  
Independent Expenditure - Postage

**004**  
Category/  
Type

Candidate Name  
**MARSHALL, ROBERT, , ,**

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

/  /

FEC Identification Number

**C**  
**Transaction ID : 76609100**  
Amount of Each Disbursement this Period  
**115.58**

Memo Item Independent Expenditure - Postage

Full Name (Last, First, Middle Initial)

**B. Prolist Inc.**

Mailing Address 4510 Buckeystown Pike, Suite M

City Frederick State MD Zip Code 21704-7539

Purpose of Disbursement  
Independent Expenditure - Postage

**004**  
Category/  
Type

Candidate Name  
**Villanueva, Ronald, , ,**

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

/  /

FEC Identification Number

**C**  
**Transaction ID : 76609101**  
Amount of Each Disbursement this Period  
**152.32**

Memo Item Independent Expenditure - Postage

Full Name (Last, First, Middle Initial)

**C. Prolist Inc.**

Mailing Address 4510 Buckeystown Pike, Suite M

City Frederick State MD Zip Code 21704-7539

Purpose of Disbursement  
Independent Expenditure - Postage

**004**  
Category/  
Type

Candidate Name  
**Thomas, Robert, , ,**

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

/  /

FEC Identification Number

**C**  
**Transaction ID : 76609103**  
Amount of Each Disbursement this Period  
**375.61**

Memo Item Independent Expenditure - Postage

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

**643.51**

**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"/> 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. Prolist Inc.</b>		Date of Disbursement MM / DD / YYYY 10 / 20 / 2017	
Mailing Address 4510 Buckeystown Pike, Suite M		FEC Identification Number C [REDACTED] <b>Transaction ID : 76609105</b>	
City Frederick	State MD	Zip Code 21704-7539	Amount of Each Disbursement this Period [REDACTED] 288.50
Purpose of Disbursement Independent Expenditure - Postage		Category/ Type 004	Independent Expenditure - Postage <input type="checkbox"/> Memo Item
Candidate Name <b>Lingamfelter, L. Scott, , Del.,</b>			
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. Prolist Inc.</b>		Date of Disbursement MM / DD / YYYY 10 / 20 / 2017	
Mailing Address 4510 Buckeystown Pike, Suite M		FEC Identification Number C [REDACTED] <b>Transaction ID : 76609107</b>	
City Frederick	State MD	Zip Code 21704-7539	Amount of Each Disbursement this Period [REDACTED] 126.42
Purpose of Disbursement Independent Expenditure - Postage		Category/ Type 004	Independent Expenditure - Postage <input type="checkbox"/> Memo Item
Candidate Name <b>Greason, Thomas, A, ,</b>			
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. Prolist Inc.</b>		Date of Disbursement MM / DD / YYYY 10 / 20 / 2017	
Mailing Address 4510 Buckeystown Pike, Suite M		FEC Identification Number C [REDACTED] <b>Transaction ID : 76609108</b>	
City Frederick	State MD	Zip Code 21704-7539	Amount of Each Disbursement this Period [REDACTED] 190.08
Purpose of Disbursement Independent Expenditure - Postage		Category/ Type 004	Independent Expenditure - Postage <input type="checkbox"/> Memo Item
Candidate Name <b>Hugo, Timothy, , VA Del.,</b>			
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).....▶	[REDACTED] 605.00
<b>TOTAL</b> This Period (last page this line number only).....▶	[REDACTED]

**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"/> 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. Prolist Inc.**

Mailing Address 4510 Buckeystown Pike, Suite M

City  
Frederick

State  
MD

Zip Code  
21704-7539

Purpose of Disbursement  
Independent Expenditure - Postage

004

Candidate Name

**Miller, Jackson, , VA Del.,**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 20 / 2017

FEC Identification Number

C [REDACTED]

**Transaction ID : 76609110**

Amount of Each Disbursement this Period

[REDACTED] 109.71

Independent Expenditure - Postage

Memo Item

Full Name (Last, First, Middle Initial)

**B. Prolist Inc.**

Mailing Address 4510 Buckeystown Pike, Suite M

City  
Frederick

State  
MD

Zip Code  
21704-7539

Purpose of Disbursement  
Independent Expenditure - Postage

004

Candidate Name

**Anderson, Richard, , VA Del.,**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 20 / 2017

FEC Identification Number

C [REDACTED]

**Transaction ID : 76609111**

Amount of Each Disbursement this Period

[REDACTED] 164.32

Independent Expenditure - Postage

Memo Item

Full Name (Last, First, Middle Initial)

**C. Prolist Inc.**

Mailing Address 4510 Buckeystown Pike, Suite M

City  
Frederick

State  
MD

Zip Code  
21704-7539

Purpose of Disbursement  
Independent Expenditure - Postage

004

Candidate Name

**Ingram, Riley, , Delegate,**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 20 / 2017

FEC Identification Number

C [REDACTED]

**Transaction ID : 76609112**

Amount of Each Disbursement this Period

[REDACTED] 309.54

Independent Expenditure - Postage

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

[REDACTED] 583.57

[REDACTED]

**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"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**National Rifle Association of America Political Victory Fund**

**A. Prolist Inc.**

Full Name (Last, First, Middle Initial)

Mailing Address 4510 Buckeystown Pike, Suite M

City Frederick State MD Zip Code 21704-7539

Purpose of Disbursement Independent Expenditure - Postage

Candidate Name Whitlock, Edward, , ,

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement 10 / 20 / 2017

FEC Identification Number C

Transaction ID : 76609113

Amount of Each Disbursement this Period 410.45

Independent Expenditure - Postage

Memo Item

**B. Prolist Inc.**

Full Name (Last, First, Middle Initial)

Mailing Address 4510 Buckeystown Pike, Suite M

City Frederick State MD Zip Code 21704-7539

Purpose of Disbursement Independent Expenditure - Postage

Candidate Name Stolle, Chris, , ,

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement 10 / 20 / 2017

FEC Identification Number C

Transaction ID : 76609114

Amount of Each Disbursement this Period 275.20

Independent Expenditure - Postage

Memo Item

**C. Prolist Inc.**

Full Name (Last, First, Middle Initial)

Mailing Address 4510 Buckeystown Pike, Suite M

City Frederick State MD Zip Code 21704-7539

Purpose of Disbursement Independent Expenditure - Postage

Candidate Name Davis, Glenn, , ,

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement 10 / 20 / 2017

FEC Identification Number C

Transaction ID : 76609115

Amount of Each Disbursement this Period 216.85

Independent Expenditure - Postage

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 902.50

**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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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. Prolist Inc.**

Mailing Address 4510 Buckeystown Pike, Suite M

City Frederick State MD Zip Code 21704-7539

Purpose of Disbursement Independent Expenditure - Postage

001  
 002  
 003  
 004  
 005  
Category/Type

Candidate Name Holcomb, N.D. 'Rocky', , VA Del., III

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 20 / 2017

FEC Identification Number

C [REDACTED]

Transaction ID : 76609116

Amount of Each Disbursement this Period

[REDACTED] 221.03

Independent Expenditure - Postage

Memo Item

Full Name (Last, First, Middle Initial)

**B. Prolist Inc.**

Mailing Address 4510 Buckeystown Pike, Suite M

City Frederick State MD Zip Code 21704-7539

Purpose of Disbursement Independent Expenditure - Postage

001  
 002  
 003  
 004  
 005  
Category/Type

Candidate Name Kolla, Subba, , ,

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 20 / 2017

FEC Identification Number

C [REDACTED]

Transaction ID : 76609117

Amount of Each Disbursement this Period

[REDACTED] 100.64

Independent Expenditure - Postage

Memo Item

Full Name (Last, First, Middle Initial)

**C. Prolist Inc.**

Mailing Address 4510 Buckeystown Pike, Suite M

City Frederick State MD Zip Code 21704-7539

Purpose of Disbursement Independent Expenditure - Postage

001  
 002  
 003  
 004  
 005  
Category/Type

Candidate Name Cordasco, Heather, , ,

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 20 / 2017

FEC Identification Number

C [REDACTED]

Transaction ID : 76609118

Amount of Each Disbursement this Period

[REDACTED] 199.93

Independent Expenditure - Postage

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

[REDACTED] 521.60

[REDACTED]

**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"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**National Rifle Association of America Political Victory Fund**

**A. Prolist Inc.**

Full Name (Last, First, Middle Initial)

Mailing Address 4510 Buckeystown Pike, Suite M

City Frederick State MD Zip Code 21704-7539

Purpose of Disbursement Independent Expenditure - Postage

Candidate Name Yancey, David, , ,

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement 10 / 20 / 2017

FEC Identification Number C

Transaction ID : 76609119

Amount of Each Disbursement this Period 211.30

Independent Expenditure - Postage

Memo Item

**B. Prolist Inc.**

Full Name (Last, First, Middle Initial)

Mailing Address 4510 Buckeystown Pike, Suite M

City Frederick State MD Zip Code 21704-7539

Purpose of Disbursement Independent Expenditure - Postage

Candidate Name Bloxom, Robert, , Delegate,

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement 10 / 20 / 2017

FEC Identification Number C

Transaction ID : 76609120

Amount of Each Disbursement this Period 362.49

Independent Expenditure - Postage

Memo Item

**C. Prolist Inc.**

Full Name (Last, First, Middle Initial)

Mailing Address 4510 Buckeystown Pike, Suite M

City Frederick State MD Zip Code 21704-7539

Purpose of Disbursement Independent Expenditure - Postage

Candidate Name Gillespie, Edward, , ,

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement 10 / 20 / 2017

FEC Identification Number C

Transaction ID : 76609121

Amount of Each Disbursement this Period 655.57

Independent Expenditure - Postage

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 1229.36

**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"/> 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. Prolist Inc.**

Mailing Address 4510 Buckeystown Pike, Suite M

City  
Frederick

State  
MD

Zip Code  
21704-7539

Purpose of Disbursement  
Independent Expenditure - Postcards

004

Candidate Name

**Minchew, Randy, , ,**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		20		2017

FEC Identification Number

C [REDACTED]

**Transaction ID : 76609128**

Amount of Each Disbursement this Period

[REDACTED] 170.77

Memo Item Independent Expenditure - Postcards

Full Name (Last, First, Middle Initial)

**B. Prolist Inc.**

Mailing Address 4510 Buckeystown Pike, Suite M

City  
Frederick

State  
MD

Zip Code  
21704-7539

Purpose of Disbursement  
Independent Expenditure - Postcards

004

Candidate Name

**Yost, Joseph, Ryan, ,**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		20		2017

FEC Identification Number

C [REDACTED]

**Transaction ID : 76609129**

Amount of Each Disbursement this Period

[REDACTED] 205.29

Memo Item Independent Expenditure - Postcards

Full Name (Last, First, Middle Initial)

**C. Prolist Inc.**

Mailing Address 4510 Buckeystown Pike, Suite M

City  
Frederick

State  
MD

Zip Code  
21704-7539

Purpose of Disbursement  
Independent Expenditure - Postcards

004

Candidate Name

**MARSHALL, ROBERT, , ,**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		20		2017

FEC Identification Number

C [REDACTED]

**Transaction ID : 76609130**

Amount of Each Disbursement this Period

[REDACTED] 74.86

Memo Item Independent Expenditure - Postcards

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

[REDACTED] 450.92

[REDACTED]

**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"/> 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. Prolist Inc.**

Mailing Address 4510 Buckeystown Pike, Suite M

City Frederick State MD Zip Code 21704-7539

Purpose of Disbursement  
Independent Expenditure - Postcards

001  
 002  
 003  
 004  
 005  
Category/  
Type

Candidate Name  
**Villanueva, Ronald, , ,**

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
10 / 20 / 2017

FEC Identification Number

C  
**Transaction ID : 76609131**  
Amount of Each Disbursement this Period  
99.51

Memo Item Independent Expenditure - Postcards

Full Name (Last, First, Middle Initial)

**B. Prolist Inc.**

Mailing Address 4510 Buckeystown Pike, Suite M

City Frederick State MD Zip Code 21704-7539

Purpose of Disbursement  
Independent Expenditure - Postcards

001  
 002  
 003  
 004  
 005  
Category/  
Type

Candidate Name  
**Thomas, Robert, , ,**

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
10 / 20 / 2017

FEC Identification Number

C  
**Transaction ID : 76609132**  
Amount of Each Disbursement this Period  
245.86

Memo Item Independent Expenditure - Postcards

Full Name (Last, First, Middle Initial)

**C. Prolist Inc.**

Mailing Address 4510 Buckeystown Pike, Suite M

City Frederick State MD Zip Code 21704-7539

Purpose of Disbursement  
Independent Expenditure - Postcards

001  
 002  
 003  
 004  
 005  
Category/  
Type

Candidate Name  
**Lingamfelter, L. Scott, , Del.,**

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
10 / 20 / 2017

FEC Identification Number

C  
**Transaction ID : 76609133**  
Amount of Each Disbursement this Period  
187.97

Memo Item Independent Expenditure - Postcards

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

533.34

**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"/> 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. Prolist Inc.**

Mailing Address 4510 Buckeystown Pike, Suite M

City Frederick State MD Zip Code 21704-7539

Purpose of Disbursement  
Independent Expenditure - Postcards

001  
 002  
 003  
 004  
 005  
Category/  
Type

Candidate Name  
**Greason, Thomas, A, ,**

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
10 / 20 / 2017

FEC Identification Number

C   
**Transaction ID : 76609134**  
Amount of Each Disbursement this Period  
 81.60

Memo Item Independent Expenditure - Postcards

Full Name (Last, First, Middle Initial)

**B. Prolist Inc.**

Mailing Address 4510 Buckeystown Pike, Suite M

City Frederick State MD Zip Code 21704-7539

Purpose of Disbursement  
Independent Expenditure - Postcards

001  
 002  
 003  
 004  
 005  
Category/  
Type

Candidate Name  
**Hugo, Timothy, , VA Del.,**

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
10 / 20 / 2017

FEC Identification Number

C   
**Transaction ID : 76609135**  
Amount of Each Disbursement this Period  
 123.92

Memo Item Independent Expenditure - Postcards

Full Name (Last, First, Middle Initial)

**C. Prolist Inc.**

Mailing Address 4510 Buckeystown Pike, Suite M

City Frederick State MD Zip Code 21704-7539

Purpose of Disbursement  
Independent Expenditure - Postcards

001  
 002  
 003  
 004  
 005  
Category/  
Type

Candidate Name  
**Miller, Jackson, , VA Del.,**

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
10 / 20 / 2017

FEC Identification Number

C   
**Transaction ID : 76609138**  
Amount of Each Disbursement this Period  
 71.84

Memo Item Independent Expenditure - Postcards

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

277.36

**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"/> 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. Prolist Inc.</b>			Date of Disbursement MM / DD / YYYY 10 / 20 / 2017	
Mailing Address 4510 Buckeystown Pike, Suite M				
City Frederick	State MD	Zip Code 21704-7539	FEC Identification Number C [REDACTED] <b>Transaction ID : 76609139</b>	
Purpose of Disbursement Independent Expenditure - Postcards			Amount of Each Disbursement this Period [REDACTED] 107.06	
Candidate Name <b>Anderson, Richard, , VA Del.,</b>			Category/Type 004	
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:	<input type="checkbox"/> Memo Item Independent Expenditure - Postcards			

Full Name (Last, First, Middle Initial) <b>B. Prolist Inc.</b>			Date of Disbursement MM / DD / YYYY 10 / 20 / 2017	
Mailing Address 4510 Buckeystown Pike, Suite M				
City Frederick	State MD	Zip Code 21704-7539	FEC Identification Number C [REDACTED] <b>Transaction ID : 76609140</b>	
Purpose of Disbursement Independent Expenditure - Postcards			Amount of Each Disbursement this Period [REDACTED] 201.11	
Candidate Name <b>Ingram, Riley, , Delegate,</b>			Category/Type 004	
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:	<input type="checkbox"/> Memo Item Independent Expenditure - Postcards			

Full Name (Last, First, Middle Initial) <b>C. Prolist Inc.</b>			Date of Disbursement MM / DD / YYYY 10 / 20 / 2017	
Mailing Address 4510 Buckeystown Pike, Suite M				
City Frederick	State MD	Zip Code 21704-7539	FEC Identification Number C [REDACTED] <b>Transaction ID : 76609141</b>	
Purpose of Disbursement Independent Expenditure - Postcards			Amount of Each Disbursement this Period [REDACTED] 269.00	
Candidate Name <b>Whitlock, Edward, , ,</b>			Category/Type 004	
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:	<input type="checkbox"/> Memo Item Independent Expenditure - Postcards			

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

577.17

**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"/> 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. Prolist Inc.</b>			Date of Disbursement MM / DD / YYYY 10 / 20 / 2017	
Mailing Address 4510 Buckeystown Pike, Suite M				
City Frederick	State MD	Zip Code 21704-7539	FEC Identification Number C [REDACTED]	
Purpose of Disbursement Independent Expenditure - Postcards			Transaction ID : 76609142	
Candidate Name <b>Stolle, Chris, , ,</b>			Amount of Each Disbursement this Period 179.95	
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) ▼		Memo Item <input type="checkbox"/> Independent Expenditure - Postcards	
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Prolist Inc.</b>			Date of Disbursement MM / DD / YYYY 10 / 20 / 2017	
Mailing Address 4510 Buckeystown Pike, Suite M				
City Frederick	State MD	Zip Code 21704-7539	FEC Identification Number C [REDACTED]	
Purpose of Disbursement Independent Expenditure - Postcards			Transaction ID : 76609143	
Candidate Name <b>Davis, Glenn, , ,</b>			Amount of Each Disbursement this Period 141.70	
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) ▼		Memo Item <input type="checkbox"/> Independent Expenditure - Postcards	
State: District:				

Full Name (Last, First, Middle Initial) <b>C. Prolist Inc.</b>			Date of Disbursement MM / DD / YYYY 10 / 20 / 2017	
Mailing Address 4510 Buckeystown Pike, Suite M				
City Frederick	State MD	Zip Code 21704-7539	FEC Identification Number C [REDACTED]	
Purpose of Disbursement Independent Expenditure - Postcards			Transaction ID : 76609144	
Candidate Name <b>Holcomb, N.D. 'Rocky', , VA Del., III</b>			Amount of Each Disbursement this Period 144.15	
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) ▼		Memo Item <input type="checkbox"/> Independent Expenditure - Postcards	
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	465.80
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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. Prolist Inc.</b>			Date of Disbursement MM / DD / YYYY 10 / 20 / 2017	
Mailing Address 4510 Buckeystown Pike, Suite M				
City Frederick	State MD	Zip Code 21704-7539	FEC Identification Number C [REDACTED] <b>Transaction ID : 76609145</b>	
Purpose of Disbursement Independent Expenditure - Postcards			Amount of Each Disbursement this Period [REDACTED] 63.94	
Candidate Name <b>Kolla, Subba, , ,</b>			Category/Type 004	
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) ▼		Memo Item <input type="checkbox"/> Independent Expenditure - Postcards	
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Prolist Inc.</b>			Date of Disbursement MM / DD / YYYY 10 / 20 / 2017	
Mailing Address 4510 Buckeystown Pike, Suite M				
City Frederick	State MD	Zip Code 21704-7539	FEC Identification Number C [REDACTED] <b>Transaction ID : 76609146</b>	
Purpose of Disbursement Independent Expenditure - Postcards			Amount of Each Disbursement this Period [REDACTED] 130.08	
Candidate Name <b>Cordasco, Heather, , ,</b>			Category/Type 004	
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) ▼		Memo Item <input type="checkbox"/> Independent Expenditure - Postcards	
State: District:				

Full Name (Last, First, Middle Initial) <b>C. Prolist Inc.</b>			Date of Disbursement MM / DD / YYYY 10 / 20 / 2017	
Mailing Address 4510 Buckeystown Pike, Suite M				
City Frederick	State MD	Zip Code 21704-7539	FEC Identification Number C [REDACTED] <b>Transaction ID : 76609147</b>	
Purpose of Disbursement Independent Expenditure - Postcards			Amount of Each Disbursement this Period [REDACTED] 138.45	
Candidate Name <b>Yancey, David, , ,</b>			Category/Type 004	
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) ▼		Memo Item <input type="checkbox"/> Independent Expenditure - Postcards	
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[REDACTED] 332.47
<b>TOTAL</b> This Period (last page this line number only).....▶	[REDACTED]

**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"/> 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. Prolist Inc.**

Mailing Address 4510 Buckeystown Pike, Suite M

City Frederick State MD Zip Code 21704-7539

Purpose of Disbursement  
Independent Expenditure - Postcards

004

Candidate Name  
**Bloxom, Robert, , Delegate,**

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 20 / 2017

FEC Identification Number

C [REDACTED]

Transaction ID : 76609148

Amount of Each Disbursement this Period

[REDACTED] 228.66

Memo Item Independent Expenditure - Postcards

Full Name (Last, First, Middle Initial)

**B. Prolist Inc.**

Mailing Address 4510 Buckeystown Pike, Suite M

City Frederick State MD Zip Code 21704-7539

Purpose of Disbursement  
Independent Expenditure - Postcards

004

Candidate Name  
**Gillespie, Edward, , ,**

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 20 / 2017

FEC Identification Number

C [REDACTED]

Transaction ID : 76609149

Amount of Each Disbursement this Period

[REDACTED] 426.45

Memo Item Independent Expenditure - Postcards

Full Name (Last, First, Middle Initial)

**C. Prolist Inc.**

Mailing Address 4510 Buckeystown Pike, Suite M

City Frederick State MD Zip Code 21704-7539

Purpose of Disbursement  
Independent Expenditure - Postcards

004

Candidate Name  
**Vogel, Jill, , ,**

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 20 / 2017

FEC Identification Number

C [REDACTED]

Transaction ID : 76609150

Amount of Each Disbursement this Period

[REDACTED] 426.45

Memo Item Independent Expenditure - Postcards

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

[REDACTED] 1081.56

**TOTAL** This Period (last page this line number only)..... ▶

[REDACTED]





**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"/> 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. Ryan Guillen Campaign**

Mailing Address P.O. Box 1024

City  
Austin

State  
TX

Zip Code  
78768

Purpose of Disbursement  
Ryan Guillen, STATE HOUSE 31st TX

011

Category/  
Type

Candidate Name

**Guillen, Ryan, , TX Rep.,**

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			23			2017			

FEC Identification Number

C [REDACTED]

**Transaction ID : 76609155**

Amount of Each Disbursement this Period

[REDACTED] 500.00

Memo Item TX Ryan Guillen, STATE HOUSE 31st

Full Name (Last, First, Middle Initial)

**B. Starboard Strategic, Inc.**

Mailing Address 705 Melvin Avenue, #105

City  
Annapolis

State  
MD

Zip Code  
21401

Purpose of Disbursement  
Independent Expenditure - Radio Ads

004

Category/  
Type

Candidate Name

**Northam, Ralph, S., ,**

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			24			2017			

FEC Identification Number

C [REDACTED]

**Transaction ID : 76612330**

Amount of Each Disbursement this Period

[REDACTED] 49392.41

Memo Item Independent Expenditure - Radio Ads

Full Name (Last, First, Middle Initial)

**C. Friends of Mike Turzai**

Mailing Address P.O. Box 721

City  
Wexford

State  
PA

Zip Code  
15090

Purpose of Disbursement  
Michael Turzai, STATE HOUSE 28th PA

011

Category/  
Type

Candidate Name

**Turzai, Michael, , PA Rep.,**

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			24			2017			

FEC Identification Number

C [REDACTED]

**Transaction ID : 76616106**

Amount of Each Disbursement this Period

[REDACTED] 1000.00

Memo Item Michael Turzai, STATE HOUSE 28th PA

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

[REDACTED] 50892.41

[REDACTED]

**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"/> 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. Team Gillespie**

Mailing Address 5225 Picking Road

City  
York

State  
PA

Zip Code  
17406

Purpose of Disbursement  
Keith Gillespie, STATE HOUSE 47th PA

011

Candidate Name

**Gillespie, Keith, , PA Rep.,**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
1	0		2	4		2	0	1	7		

FEC Identification Number

C [REDACTED]

**Transaction ID : 76616108**

Amount of Each Disbursement this Period

[REDACTED] 300.00

Memo Item Keith Gillespie, STATE HOUSE 47th PA

Full Name (Last, First, Middle Initial)

**B. Citizens for John Yudichak**

Mailing Address P.O. Box 545

City  
Harrisburg

State  
PA

Zip Code  
17108

Purpose of Disbursement  
John Yudichak, STATE SENATE 14th PA

011

Candidate Name

**Yudichak, John, , PA Sen.,**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
1	0		2	4		2	0	1	7		

FEC Identification Number

C [REDACTED]

**Transaction ID : 76616109**

Amount of Each Disbursement this Period

[REDACTED] 500.00

Memo Item John Yudichak, STATE SENATE 14th PA

Full Name (Last, First, Middle Initial)

**C. Friends of Senator Cardinale**

Mailing Address 59 Hazel Street

City  
Dumont

State  
NJ

Zip Code  
07628

Purpose of Disbursement  
Gerald Cardinale, STATE SENATE 39th NJ

011

Candidate Name

**Cardinale, Gerald, , Senator,**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
1	0		2	4		2	0	1	7		

FEC Identification Number

C [REDACTED]

**Transaction ID : 76616111**

Amount of Each Disbursement this Period

[REDACTED] 500.00

Memo Item Gerald Cardinale, STATE SENATE 39th NJ

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

[REDACTED] 1300.00

**TOTAL** This Period (last page this line number only)..... ▶

[REDACTED]

**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"/> 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. Committee to Elect Doherty, DiMaio and Peterson**

Mailing Address 49-51 Main Street, Suite 2

City Clinton State NJ Zip Code 08809

Purpose of Disbursement  
NJ District 23

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : 76616158**  
Amount of Each Disbursement this Period

NJ District 23

Memo Item

Full Name (Last, First, Middle Initial)

**B. National Rifle Association of America**

Mailing Address 11250 Waples Mill Road

City Fairfax State VA Zip Code 22030

Purpose of Disbursement  
Independent Expenditure - Salary / Benefits

Category/  
Type

Candidate Name  
**Gillespie, Edward, , ,**

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify)

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : 76617134**  
Amount of Each Disbursement this Period

Independent Expenditure - Salary / Benefits

Memo Item

Full Name (Last, First, Middle Initial)

**C. National Rifle Association of America**

Mailing Address 11250 Waples Mill Road

City Fairfax State VA Zip Code 22030

Purpose of Disbursement  
Independent Expenditure - Salary / Benefits

Category/  
Type

Candidate Name  
**Vogel, Jill, , ,**

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : 76617135**  
Amount of Each Disbursement this Period

Independent Expenditure - Salary / Benefits

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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. National Rifle Association of America**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
10			24			2017					

Mailing Address 11250 Waples Mill Road

City Fairfax State VA Zip Code 22030

Purpose of Disbursement  
Independent Expenditure - Salary / Benefits

001  
Category/  
Type

FEC Identification Number

C

**Transaction ID : 76617136**

Amount of Each Disbursement this Period

944.61

Candidate Name

**Adams, John, , ,**

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Memo Item Independent Expenditure - Salary / Benefits

Full Name (Last, First, Middle Initial)

**B. National Rifle Association of America**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
10			24			2017					

Mailing Address 11250 Waples Mill Road

City Fairfax State VA Zip Code 22030

Purpose of Disbursement  
Independent Expenditure - Salary / Benefits

001  
Category/  
Type

FEC Identification Number

C

**Transaction ID : 76617137**

Amount of Each Disbursement this Period

47.16

Candidate Name

**Guadagno, Kim, , ,**

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Memo Item Independent Expenditure - Salary / Benefits

Full Name (Last, First, Middle Initial)

**C. National Rifle Association of America**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
10			24			2017					

Mailing Address 11250 Waples Mill Road

City Fairfax State VA Zip Code 22030

Purpose of Disbursement  
Independent Expenditure - Salary / Benefits

001  
Category/  
Type

FEC Identification Number

C

**Transaction ID : 76617138**

Amount of Each Disbursement this Period

47.16

Candidate Name

**Murphy, Phil, , ,**

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Memo Item Independent Expenditure - Salary / Benefits

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

1038.93

**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"/> 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. National Rifle Association of America**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		24		2017

Mailing Address 11250 Waples Mill Road

FEC Identification Number

C [REDACTED]

**Transaction ID : 76617139**

Amount of Each Disbursement this Period

[REDACTED] 47.16

Memo Item Independent Expenditure - Salary / Benefits

City Fairfax State VA Zip Code 22030

Purpose of Disbursement Independent Expenditure - Salary / Benefits

001  
Category/Type

Candidate Name  
**Simon, Donna, , NJ Asm.,**

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Full Name (Last, First, Middle Initial)

**B. National Rifle Association of America**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		24		2017

Mailing Address 11250 Waples Mill Road

FEC Identification Number

C [REDACTED]

**Transaction ID : 76617140**

Amount of Each Disbursement this Period

[REDACTED] 47.16

Memo Item Independent Expenditure - Salary / Benefits

City Fairfax State VA Zip Code 22030

Purpose of Disbursement Independent Expenditure - Salary / Benefits

001  
Category/Type

Candidate Name  
**Zwicker, Andrew, , NJ Asm.,**

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Full Name (Last, First, Middle Initial)

**C. National Rifle Association of America**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		24		2017

Mailing Address 11250 Waples Mill Road

FEC Identification Number

C [REDACTED]

**Transaction ID : 76617142**

Amount of Each Disbursement this Period

[REDACTED] 47.16

Memo Item Independent Expenditure - Salary / Benefits

City Fairfax State VA Zip Code 22030

Purpose of Disbursement Independent Expenditure - Salary / Benefits

001  
Category/Type

Candidate Name  
**Freiman, Roy, , ,**

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

[REDACTED] 141.48

[REDACTED]

**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"/> 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. 720 Monmouth Urban Renewal, LLC**

Mailing Address 80 Hamilton Avenue, Suite 101

City Trenton State NJ Zip Code 08611

Purpose of Disbursement  
Independent Expenditure - Meeting Room Rental

001  
 002  
 003  
 004  
 005  
Category/  
Type

Candidate Name  
**Guadagno, Kim, , ,**

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
10 / 17 / 2017

FEC Identification Number

C   
**Transaction ID : 76629843**  
Amount of Each Disbursement this Period  
 52.17

Memo Item Independent Expenditure - Meeting Room Rental

Full Name (Last, First, Middle Initial)

**B. 720 Monmouth Urban Renewal, LLC**

Mailing Address 80 Hamilton Avenue, Suite 101

City Trenton State NJ Zip Code 08611

Purpose of Disbursement  
Independent Expenditure - Meeting Room Rental

001  
 002  
 003  
 004  
 005  
Category/  
Type

Candidate Name  
**Murphy, Phil, , ,**

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
10 / 17 / 2017

FEC Identification Number

C   
**Transaction ID : 76629844**  
Amount of Each Disbursement this Period  
 52.17

Memo Item Independent Expenditure - Meeting Room Rental

Full Name (Last, First, Middle Initial)

**C. 720 Monmouth Urban Renewal, LLC**

Mailing Address 80 Hamilton Avenue, Suite 101

City Trenton State NJ Zip Code 08611

Purpose of Disbursement  
Independent Expenditure - Meeting Room Rental

001  
 002  
 003  
 004  
 005  
Category/  
Type

Candidate Name  
**Brown, Chris, , NJ Asm.,**

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
10 / 17 / 2017

FEC Identification Number

C   
**Transaction ID : 76629845**  
Amount of Each Disbursement this Period  
 13.05

Memo Item Independent Expenditure - Meeting Room Rental

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

117.39

**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"/> 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. 720 Monmouth Urban Renewal, LLC**

Mailing Address 80 Hamilton Avenue, Suite 101

City Trenton State NJ Zip Code 08611

Purpose of Disbursement  
Independent Expenditure - Meeting Room Rental

001  
 002  
 003  
 004  
 005  
Category/  
Type

Candidate Name

**Bell, Colin, , ,**

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

/  /   
10 / 17 / 2017

FEC Identification Number

**Transaction ID : 76629846**

Amount of Each Disbursement this Period

Memo Item Independent Expenditure - Meeting Room Rental

Full Name (Last, First, Middle Initial)

**B. 720 Monmouth Urban Renewal, LLC**

Mailing Address 80 Hamilton Avenue, Suite 101

City Trenton State NJ Zip Code 08611

Purpose of Disbursement  
Independent Expenditure - Meeting Room Rental

001  
 002  
 003  
 004  
 005  
Category/  
Type

Candidate Name

**Simon, Donna, , NJ Asm.,**

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement

/  /   
10 / 17 / 2017

FEC Identification Number

**Transaction ID : 76629847**

Amount of Each Disbursement this Period

Memo Item Independent Expenditure - Meeting Room Rental

Full Name (Last, First, Middle Initial)

**C. 720 Monmouth Urban Renewal, LLC**

Mailing Address 80 Hamilton Avenue, Suite 101

City Trenton State NJ Zip Code 08611

Purpose of Disbursement  
Independent Expenditure - Meeting Room Rental

001  
 002  
 003  
 004  
 005  
Category/  
Type

Candidate Name

**Zwicker, Andrew, , NJ Asm.,**

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

/  /   
10 / 17 / 2017

FEC Identification Number

**Transaction ID : 76629848**

Amount of Each Disbursement this Period

Memo Item Independent Expenditure - Meeting Room Rental

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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. 720 Monmouth Urban Renewal, LLC**

Mailing Address 80 Hamilton Avenue, Suite 101

City Trenton State NJ Zip Code 08611

Purpose of Disbursement  
Independent Expenditure - Meeting Room Rental

001  
 002  
 003  
 004  
 005  
Category/  
Type

Candidate Name  
**Freiman, Roy, , ,**

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
10 / 17 / 2017

FEC Identification Number

C   
**Transaction ID : 76629849**  
Amount of Each Disbursement this Period  
 13.04

Memo Item Independent Expenditure - Meeting Room Rental

Full Name (Last, First, Middle Initial)

**B. 720 Monmouth Urban Renewal, LLC**

Mailing Address 80 Hamilton Avenue, Suite 101

City Trenton State NJ Zip Code 08611

Purpose of Disbursement  
Independent Expenditure - Meeting Room Rental

001  
 002  
 003  
 004  
 005  
Category/  
Type

Candidate Name  
**Leonard, William, , ,**

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
10 / 17 / 2017

FEC Identification Number

C   
**Transaction ID : 76629851**  
Amount of Each Disbursement this Period  
 13.05

Memo Item Independent Expenditure - Meeting Room Rental

Full Name (Last, First, Middle Initial)

**C. 720 Monmouth Urban Renewal, LLC**

Mailing Address 80 Hamilton Avenue, Suite 101

City Trenton State NJ Zip Code 08611

Purpose of Disbursement  
Independent Expenditure - Meeting Room Rental

001  
 002  
 003  
 004  
 005  
Category/  
Type

Candidate Name  
**Wolf, Christopher, , ,**

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
10 / 17 / 2017

FEC Identification Number

C   
**Transaction ID : 76629852**  
Amount of Each Disbursement this Period  
 13.05

Memo Item Independent Expenditure - Meeting Room Rental

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

39.14

**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"/> 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. 720 Monmouth Urban Renewal, LLC**

Mailing Address 80 Hamilton Avenue, Suite 101

City  
Trenton

State  
NJ

Zip Code  
08611

Purpose of Disbursement  
Independent Expenditure - Meeting Room Rental

004

Candidate Name

**Eustace, Timothy, , NJ Asm.,**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			17			2017			

FEC Identification Number

C [REDACTED]

**Transaction ID : 76629853**

Amount of Each Disbursement this Period

[REDACTED] 13.04

Memo Item Independent Expenditure - Meeting Room Rental

Full Name (Last, First, Middle Initial)

**B. 720 Monmouth Urban Renewal, LLC**

Mailing Address 80 Hamilton Avenue, Suite 101

City  
Trenton

State  
NJ

Zip Code  
08611

Purpose of Disbursement  
Independent Expenditure - Meeting Room Rental

004

Candidate Name

**Lagana, Joseph, , NJ Asm.,**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify)

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			17			2017			

FEC Identification Number

C [REDACTED]

**Transaction ID : 76629854**

Amount of Each Disbursement this Period

[REDACTED] 13.04

Memo Item Independent Expenditure - Meeting Room Rental

Full Name (Last, First, Middle Initial)

**C. 720 Monmouth Urban Renewal, LLC**

Mailing Address 80 Hamilton Avenue, Suite 101

City  
Trenton

State  
NJ

Zip Code  
08611

Purpose of Disbursement  
Independent Expenditure - Meeting Room Rental

004

Candidate Name

**Corrado, Kristin, , ,**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			17			2017			

FEC Identification Number

C [REDACTED]

**Transaction ID : 76629855**

Amount of Each Disbursement this Period

[REDACTED] 13.04

Memo Item Independent Expenditure - Meeting Room Rental

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

[REDACTED] 39.12

[REDACTED]

**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"/> 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. 720 Monmouth Urban Renewal, LLC**

Mailing Address 80 Hamilton Avenue, Suite 101

City Trenton State NJ Zip Code 08611

Purpose of Disbursement  
Independent Expenditure - Meeting Room Rental

001  
 002  
 003  
 004  
 005  
Category/  
Type

Candidate Name  
**Duch, Thomas, , ,**

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement

M M /  D D /  Y Y Y Y Y Y  
10 / 17 / 2017

FEC Identification Number

C   
**Transaction ID : 76629856**  
Amount of Each Disbursement this Period  
 13.04

Memo Item Independent Expenditure - Meeting Room Rental

Full Name (Last, First, Middle Initial)

**B. 720 Monmouth Urban Renewal, LLC**

Mailing Address 80 Hamilton Avenue, Suite 101

City Trenton State NJ Zip Code 08611

Purpose of Disbursement  
Independent Expenditure - Meeting Room Rental

001  
 002  
 003  
 004  
 005  
Category/  
Type

Candidate Name  
**Rooney, Kevin, , NJ Asm.,**

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement

M M /  D D /  Y Y Y Y Y Y  
10 / 17 / 2017

FEC Identification Number

C   
**Transaction ID : 76629857**  
Amount of Each Disbursement this Period  
 13.05

Memo Item Independent Expenditure - Meeting Room Rental

Full Name (Last, First, Middle Initial)

**C. 720 Monmouth Urban Renewal, LLC**

Mailing Address 80 Hamilton Avenue, Suite 101

City Trenton State NJ Zip Code 08611

Purpose of Disbursement  
Independent Expenditure - Meeting Room Rental

001  
 002  
 003  
 004  
 005  
Category/  
Type

Candidate Name  
**DePhillips, Christopher, , ,**

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement

M M /  D D /  Y Y Y Y Y Y  
10 / 17 / 2017

FEC Identification Number

C   
**Transaction ID : 76629858**  
Amount of Each Disbursement this Period  
 13.05

Memo Item Independent Expenditure - Meeting Room Rental

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

39.14

**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"/> 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. 720 Monmouth Urban Renewal, LLC**

Mailing Address 80 Hamilton Avenue, Suite 101

City Trenton State NJ Zip Code 08611

Purpose of Disbursement  
Independent Expenditure - Meeting Room Rental

001  
 002  
 003  
 004  
 005  
Category/  
Type

Candidate Name  
**Ordway, Christine, , ,**

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement

M M /  D D /  Y Y Y Y Y Y  
10 / 17 / 2017

FEC Identification Number

C   
**Transaction ID : 76629859**  
Amount of Each Disbursement this Period  
 13.04

Memo Item Independent Expenditure - Meeting Room Rental

Full Name (Last, First, Middle Initial)

**B. 720 Monmouth Urban Renewal, LLC**

Mailing Address 80 Hamilton Avenue, Suite 101

City Trenton State NJ Zip Code 08611

Purpose of Disbursement  
Independent Expenditure - Meeting Room Rental

001  
 002  
 003  
 004  
 005  
Category/  
Type

Candidate Name  
**Vagianos, Paul, , ,**

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement

M M /  D D /  Y Y Y Y Y Y  
10 / 17 / 2017

FEC Identification Number

C   
**Transaction ID : 76629860**  
Amount of Each Disbursement this Period  
 13.04

Memo Item Independent Expenditure - Meeting Room Rental

Full Name (Last, First, Middle Initial)

**C. Cheyenne Mountain Outfitters**

Mailing Address 244 US Highway 130 South

City Bordentown State NJ Zip Code 08505

Purpose of Disbursement  
Independent Expenditure - Meeting Room Rental

001  
 002  
 003  
 004  
 005  
Category/  
Type

Candidate Name  
**Guadagno, Kim, , ,**

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement

M M /  D D /  Y Y Y Y Y Y  
10 / 17 / 2017

FEC Identification Number

C   
**Transaction ID : 76629861**  
Amount of Each Disbursement this Period  
 69.56

Memo Item Independent Expenditure - Meeting Room Rental

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

95.64

**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"/> 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. Cheyenne Mountain Outfitters**

Mailing Address 244 US Highway 130 South

City Bordentown State NJ Zip Code 08505

Purpose of Disbursement  
Independent Expenditure - Meeting Room Rental

004  
Category/  
Type

Candidate Name  
**Murphy, Phil, , ,**

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement  
M M / D D / Y Y Y Y Y Y  
10 / 17 / 2017

FEC Identification Number  
**C**  
**Transaction ID : 76629862**  
Amount of Each Disbursement this Period  
69.56  
 Memo Item Independent Expenditure - Meeting Room Rental

Full Name (Last, First, Middle Initial)

**B. Cheyenne Mountain Outfitters**

Mailing Address 244 US Highway 130 South

City Bordentown State NJ Zip Code 08505

Purpose of Disbursement  
Independent Expenditure - Meeting Room Rental

004  
Category/  
Type

Candidate Name  
**Brown, Chris, , NJ Asm.,**

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement  
M M / D D / Y Y Y Y Y Y  
10 / 17 / 2017

FEC Identification Number  
**C**  
**Transaction ID : 76629863**  
Amount of Each Disbursement this Period  
17.40  
 Memo Item Independent Expenditure - Meeting Room Rental

Full Name (Last, First, Middle Initial)

**C. Cheyenne Mountain Outfitters**

Mailing Address 244 US Highway 130 South

City Bordentown State NJ Zip Code 08505

Purpose of Disbursement  
Independent Expenditure - Meeting Room Rental

004  
Category/  
Type

Candidate Name  
**Bell, Colin, , ,**

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement  
M M / D D / Y Y Y Y Y Y  
10 / 17 / 2017

FEC Identification Number  
**C**  
**Transaction ID : 76629864**  
Amount of Each Disbursement this Period  
17.39  
 Memo Item Independent Expenditure - Meeting Room Rental

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

104.35

**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"/> 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. Cheyenne Mountain Outfitters**

Mailing Address 244 US Highway 130 South

City Bordentown State NJ Zip Code 08505

Purpose of Disbursement  
Independent Expenditure - Meeting Room Rental

001  
 002  
 003  
 004  
 005  
Category/  
Type

Candidate Name  
**Simon, Donna, , NJ Asm.,**

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
10 / 17 / 2017

FEC Identification Number

C  
**Transaction ID : 76629865**  
Amount of Each Disbursement this Period  
17.40

Memo Item Independent Expenditure - Meeting Room Rental

Full Name (Last, First, Middle Initial)

**B. Cheyenne Mountain Outfitters**

Mailing Address 244 US Highway 130 South

City Bordentown State NJ Zip Code 08505

Purpose of Disbursement  
Independent Expenditure - Meeting Room Rental

001  
 002  
 003  
 004  
 005  
Category/  
Type

Candidate Name  
**Zwicker, Andrew, , NJ Asm.,**

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
10 / 17 / 2017

FEC Identification Number

C  
**Transaction ID : 76629866**  
Amount of Each Disbursement this Period  
17.39

Memo Item Independent Expenditure - Meeting Room Rental

Full Name (Last, First, Middle Initial)

**C. Cheyenne Mountain Outfitters**

Mailing Address 244 US Highway 130 South

City Bordentown State NJ Zip Code 08505

Purpose of Disbursement  
Independent Expenditure - Meeting Room Rental

001  
 002  
 003  
 004  
 005  
Category/  
Type

Candidate Name  
**Freiman, Roy, ,**

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
10 / 17 / 2017

FEC Identification Number

C  
**Transaction ID : 76629867**  
Amount of Each Disbursement this Period  
17.39

Memo Item Independent Expenditure - Meeting Room Rental

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

52.18

**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"/> 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. Cheyenne Mountain Outfitters**

Mailing Address 244 US Highway 130 South

City Bordentown State NJ Zip Code 08505

Purpose of Disbursement  
Independent Expenditure - Meeting Room Rental

001  
 002  
 003  
 004  
 005  
Category/  
Type

Candidate Name  
**Leonard, William, , ,**

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
10 / 17 / 2017

FEC Identification Number

C  
**Transaction ID : 76629868**  
Amount of Each Disbursement this Period  
17.39

Memo Item Independent Expenditure - Meeting Room Rental

Full Name (Last, First, Middle Initial)

**B. Cheyenne Mountain Outfitters**

Mailing Address 244 US Highway 130 South

City Bordentown State NJ Zip Code 08505

Purpose of Disbursement  
Independent Expenditure - Meeting Room Rental

001  
 002  
 003  
 004  
 005  
Category/  
Type

Candidate Name  
**Wolf, Christopher, , ,**

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
10 / 17 / 2017

FEC Identification Number

C  
**Transaction ID : 76629869**  
Amount of Each Disbursement this Period  
17.39

Memo Item Independent Expenditure - Meeting Room Rental

Full Name (Last, First, Middle Initial)

**C. Cheyenne Mountain Outfitters**

Mailing Address 244 US Highway 130 South

City Bordentown State NJ Zip Code 08505

Purpose of Disbursement  
Independent Expenditure - Meeting Room Rental

001  
 002  
 003  
 004  
 005  
Category/  
Type

Candidate Name  
**Eustace, Timothy, , NJ Asm.,**

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
10 / 17 / 2017

FEC Identification Number

C  
**Transaction ID : 76629870**  
Amount of Each Disbursement this Period  
17.39

Memo Item Independent Expenditure - Meeting Room Rental

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

52.17

**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"/> 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. Cheyenne Mountain Outfitters**

Mailing Address 244 US Highway 130 South

City Bordentown State NJ Zip Code 08505

Purpose of Disbursement  
Independent Expenditure - Meeting Room Rental

001  
 002  
 003  
 004  
 005  
Category/  
Type

Candidate Name  
**Lagana, Joseph, , NJ Asm.,**

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
10 / 17 / 2017

FEC Identification Number

C   
**Transaction ID : 76629871**  
Amount of Each Disbursement this Period  
 17.39

Memo Item Independent Expenditure - Meeting Room Rental

Full Name (Last, First, Middle Initial)

**B. Cheyenne Mountain Outfitters**

Mailing Address 244 US Highway 130 South

City Bordentown State NJ Zip Code 08505

Purpose of Disbursement  
Independent Expenditure - Meeting Room Rental

001  
 002  
 003  
 004  
 005  
Category/  
Type

Candidate Name  
**Corrado, Kristin, , ,**

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
10 / 17 / 2017

FEC Identification Number

C   
**Transaction ID : 76629872**  
Amount of Each Disbursement this Period  
 17.40

Memo Item Independent Expenditure - Meeting Room Rental

Full Name (Last, First, Middle Initial)

**C. Cheyenne Mountain Outfitters**

Mailing Address 244 US Highway 130 South

City Bordentown State NJ Zip Code 08505

Purpose of Disbursement  
Independent Expenditure - Meeting Room Rental

001  
 002  
 003  
 004  
 005  
Category/  
Type

Candidate Name  
**Duch, Thomas, , ,**

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
10 / 17 / 2017

FEC Identification Number

C   
**Transaction ID : 76629873**  
Amount of Each Disbursement this Period  
 17.39

Memo Item Independent Expenditure - Meeting Room Rental

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

52.18



**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"/> 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. Cheyenne Mountain Outfitters**

Mailing Address 244 US Highway 130 South

City Bordentown State NJ Zip Code 08505

Purpose of Disbursement  
Independent Expenditure - Meeting Room Rental

001  
 002  
 003  
 004  
 005  
Category/  
Type

Candidate Name  
**Rooney, Kevin, , NJ Asm.,**

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
10 / 17 / 2017

FEC Identification Number

C  
**Transaction ID : 76629874**  
Amount of Each Disbursement this Period  
17.39

Memo Item Independent Expenditure - Meeting Room Rental

Full Name (Last, First, Middle Initial)

**B. Cheyenne Mountain Outfitters**

Mailing Address 244 US Highway 130 South

City Bordentown State NJ Zip Code 08505

Purpose of Disbursement  
Independent Expenditure - Meeting Room Rental

001  
 002  
 003  
 004  
 005  
Category/  
Type

Candidate Name  
**DePhillips, Christopher, , ,**

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
10 / 17 / 2017

FEC Identification Number

C  
**Transaction ID : 76629875**  
Amount of Each Disbursement this Period  
17.39

Memo Item Independent Expenditure - Meeting Room Rental

Full Name (Last, First, Middle Initial)

**C. Cheyenne Mountain Outfitters**

Mailing Address 244 US Highway 130 South

City Bordentown State NJ Zip Code 08505

Purpose of Disbursement  
Independent Expenditure - Meeting Room Rental

001  
 002  
 003  
 004  
 005  
Category/  
Type

Candidate Name  
**Ordway, Christine, , ,**

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
10 / 17 / 2017

FEC Identification Number

C  
**Transaction ID : 76629876**  
Amount of Each Disbursement this Period  
17.39

Memo Item Independent Expenditure - Meeting Room Rental

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

52.17

**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"/> 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. Cheyenne Mountain Outfitters**

Mailing Address 244 US Highway 130 South

City Bordentown State NJ Zip Code 08505

Purpose of Disbursement  
Independent Expenditure - Meeting Room Rental

Category/  
Type

Candidate Name  
**Vagianos, Paul, , ,**

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : 76629877**

Amount of Each Disbursement this Period

Memo Item Independent Expenditure - Meeting Room Rental

Full Name (Last, First, Middle Initial)

**B. Centaur Firearms, LLC**

Mailing Address 1603 Rt. 38, Unit 4

City Lumberton State NJ Zip Code 08048

Purpose of Disbursement  
Independent Expenditure - Meeting Room Rental

Category/  
Type

Candidate Name  
**Guadagno, Kim, , ,**

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify)

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : 76629878**

Amount of Each Disbursement this Period

Memo Item Independent Expenditure - Meeting Room Rental

Full Name (Last, First, Middle Initial)

**C. Centaur Firearms, LLC**

Mailing Address 1603 Rt. 38, Unit 4

City Lumberton State NJ Zip Code 08048

Purpose of Disbursement  
Independent Expenditure - Meeting Room Rental

Category/  
Type

Candidate Name  
**Murphy, Phil, , ,**

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : 76629879**

Amount of Each Disbursement this Period

Memo Item Independent Expenditure - Meeting Room Rental

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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. Centaur Firearms, LLC**

Mailing Address 1603 Rt. 38, Unit 4

City  
Lumberton

State  
NJ

Zip Code  
08048

Purpose of Disbursement  
Independent Expenditure - Meeting Room Rental

004

Candidate Name

**Brown, Chris, , NJ Asm.,**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			17			2017			

FEC Identification Number

C [REDACTED]

**Transaction ID : 76629880**

Amount of Each Disbursement this Period

[REDACTED] 13.05

Memo Item Independent Expenditure - Meeting Room Rental

Full Name (Last, First, Middle Initial)

**B. Centaur Firearms, LLC**

Mailing Address 1603 Rt. 38, Unit 4

City  
Lumberton

State  
NJ

Zip Code  
08048

Purpose of Disbursement  
Independent Expenditure - Meeting Room Rental

004

Candidate Name

**Bell, Colin, , ,**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			17			2017			

FEC Identification Number

C [REDACTED]

**Transaction ID : 76629881**

Amount of Each Disbursement this Period

[REDACTED] 13.04

Memo Item Independent Expenditure - Meeting Room Rental

Full Name (Last, First, Middle Initial)

**C. Centaur Firearms, LLC**

Mailing Address 1603 Rt. 38, Unit 4

City  
Lumberton

State  
NJ

Zip Code  
08048

Purpose of Disbursement  
Independent Expenditure - Meeting Room Rental

004

Candidate Name

**Simon, Donna, , NJ Asm.,**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			17			2017			

FEC Identification Number

C [REDACTED]

**Transaction ID : 76629882**

Amount of Each Disbursement this Period

[REDACTED] 13.05

Memo Item Independent Expenditure - Meeting Room Rental

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

[REDACTED] 39.14

**TOTAL** This Period (last page this line number only)..... ▶

[REDACTED]

**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"/> 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. Centaur Firearms, LLC</b>		Date of Disbursement MM / DD / YYYY 10 / 17 / 2017	
Mailing Address 1603 Rt. 38, Unit 4		FEC Identification Number C [REDACTED] <b>Transaction ID : 76629883</b>	
City Lumberton	State NJ	Zip Code 08048	Amount of Each Disbursement this Period 13.04
Purpose of Disbursement Independent Expenditure - Meeting Room Rental		Category/ Type 004	Memo Item <input type="checkbox"/> Independent Expenditure - Meeting Room Rental
Candidate Name <b>Zwicker, Andrew, , NJ Asm.,</b>			
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. Centaur Firearms, LLC</b>		Date of Disbursement MM / DD / YYYY 10 / 17 / 2017	
Mailing Address 1603 Rt. 38, Unit 4		FEC Identification Number C [REDACTED] <b>Transaction ID : 76629884</b>	
City Lumberton	State NJ	Zip Code 08048	Amount of Each Disbursement this Period 13.04
Purpose of Disbursement Independent Expenditure - Meeting Room Rental		Category/ Type 004	Memo Item <input type="checkbox"/> Independent Expenditure - Meeting Room Rental
Candidate Name <b>Freiman, Roy, , ,</b>			
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. Centaur Firearms, LLC</b>		Date of Disbursement MM / DD / YYYY 10 / 17 / 2017	
Mailing Address 1603 Rt. 38, Unit 4		FEC Identification Number C [REDACTED] <b>Transaction ID : 76629885</b>	
City Lumberton	State NJ	Zip Code 08048	Amount of Each Disbursement this Period 13.05
Purpose of Disbursement Independent Expenditure - Meeting Room Rental		Category/ Type 004	Memo Item <input type="checkbox"/> Independent Expenditure - Meeting Room Rental
Candidate Name <b>Leonard, William, , ,</b>			
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).....▶	39.13
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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. Centaur Firearms, LLC

Mailing Address 1603 Rt. 38, Unit 4

City  
Lumberton

State  
NJ

Zip Code  
08048

Purpose of Disbursement  
Independent Expenditure - Meeting Room Rental

004

Candidate Name

**Wolf, Christopher, , ,**

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			17			2017			

FEC Identification Number

C [REDACTED]

Transaction ID : 76629886

Amount of Each Disbursement this Period

[REDACTED] 13.05

Memo Item Independent Expenditure - Meeting Room Rental

Full Name (Last, First, Middle Initial)

### B. Centaur Firearms, LLC

Mailing Address 1603 Rt. 38, Unit 4

City  
Lumberton

State  
NJ

Zip Code  
08048

Purpose of Disbursement  
Independent Expenditure - Meeting Room Rental

004

Candidate Name

**Eustace, Timothy, , NJ Asm.,**

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			17			2017			

FEC Identification Number

C [REDACTED]

Transaction ID : 76629887

Amount of Each Disbursement this Period

[REDACTED] 13.04

Memo Item Independent Expenditure - Meeting Room Rental

Full Name (Last, First, Middle Initial)

### C. Centaur Firearms, LLC

Mailing Address 1603 Rt. 38, Unit 4

City  
Lumberton

State  
NJ

Zip Code  
08048

Purpose of Disbursement  
Independent Expenditure - Meeting Room Rental

004

Candidate Name

**Lagana, Joseph, , NJ Asm.,**

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			17			2017			

FEC Identification Number

C [REDACTED]

Transaction ID : 76629888

Amount of Each Disbursement this Period

[REDACTED] 13.04

Memo Item Independent Expenditure - Meeting Room Rental

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

[REDACTED] 39.13

**TOTAL** This Period (last page this line number only)..... ▶

[REDACTED]

**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"/> 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. Centaur Firearms, LLC**

Mailing Address 1603 Rt. 38, Unit 4

City Lumberton State NJ Zip Code 08048

Purpose of Disbursement  
Independent Expenditure - Meeting Room Rental

**004**  
Category/  
Type

Candidate Name  
**Corrado, Kristin, , ,**

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

/  /

FEC Identification Number

**C**

**Transaction ID : 76629889**

Amount of Each Disbursement this Period

Memo Item Independent Expenditure - Meeting Room Rental

Full Name (Last, First, Middle Initial)

**B. Centaur Firearms, LLC**

Mailing Address 1603 Rt. 38, Unit 4

City Lumberton State NJ Zip Code 08048

Purpose of Disbursement  
Independent Expenditure - Meeting Room Rental

**004**  
Category/  
Type

Candidate Name  
**Duch, Thomas, , ,**

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

/  /

FEC Identification Number

**C**

**Transaction ID : 76629891**

Amount of Each Disbursement this Period

Memo Item Independent Expenditure - Meeting Room Rental

Full Name (Last, First, Middle Initial)

**C. Centaur Firearms, LLC**

Mailing Address 1603 Rt. 38, Unit 4

City Lumberton State NJ Zip Code 08048

Purpose of Disbursement  
Independent Expenditure - Meeting Room Rental

**004**  
Category/  
Type

Candidate Name  
**Rooney, Kevin, , NJ Asm.,**

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

/  /

FEC Identification Number

**C**

**Transaction ID : 76629892**

Amount of Each Disbursement this Period

Memo Item Independent Expenditure - Meeting Room Rental

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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. Centaur Firearms, LLC</b>		Date of Disbursement MM / DD / YYYY 10 / 17 / 2017	
Mailing Address 1603 Rt. 38, Unit 4		FEC Identification Number C [REDACTED] <b>Transaction ID : 76629893</b>	
City Lumberton	State NJ	Zip Code 08048	Amount of Each Disbursement this Period 13.05
Purpose of Disbursement Independent Expenditure - Meeting Room Rental		Category/Type 004	Memo Item <input type="checkbox"/> Independent Expenditure - Meeting Room Rental
Candidate Name <b>DePhillips, Christopher, , ,</b>			
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. Centaur Firearms, LLC</b>		Date of Disbursement MM / DD / YYYY 10 / 17 / 2017	
Mailing Address 1603 Rt. 38, Unit 4		FEC Identification Number C [REDACTED] <b>Transaction ID : 76629894</b>	
City Lumberton	State NJ	Zip Code 08048	Amount of Each Disbursement this Period 13.04
Purpose of Disbursement Independent Expenditure - Meeting Room Rental		Category/Type 004	Memo Item <input type="checkbox"/> Independent Expenditure - Meeting Room Rental
Candidate Name <b>Ordway, Christine, , ,</b>			
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. Centaur Firearms, LLC</b>		Date of Disbursement MM / DD / YYYY 10 / 17 / 2017	
Mailing Address 1603 Rt. 38, Unit 4		FEC Identification Number C [REDACTED] <b>Transaction ID : 76629895</b>	
City Lumberton	State NJ	Zip Code 08048	Amount of Each Disbursement this Period 13.04
Purpose of Disbursement Independent Expenditure - Meeting Room Rental		Category/Type 004	Memo Item <input type="checkbox"/> Independent Expenditure - Meeting Room Rental
Candidate Name <b>Vagianos, Paul, , ,</b>			
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).....▶	39.13
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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. RTSP, LLC

Mailing Address 961 Route 10 East, Unit 2F

City Randolph State NJ Zip Code 07869

Purpose of Disbursement  
Independent Expenditure - Meeting Room Rental

004
Category/ Type

Candidate Name  
**Guadagno, Kim, , ,**

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:	

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
10 / 17 / 2017

FEC Identification Number

C
Transaction ID : 76629896
Amount of Each Disbursement this Period
52.17

Memo Item Independent Expenditure - Meeting Room Rental

Full Name (Last, First, Middle Initial)

### B. RTSP, LLC

Mailing Address 961 Route 10 East, Unit 2F

City Randolph State NJ Zip Code 07869

Purpose of Disbursement  
Independent Expenditure - Meeting Room Rental

004
Category/ Type

Candidate Name  
**Murphy, Phil, , ,**

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:	

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
10 / 17 / 2017

FEC Identification Number

C
Transaction ID : 76629897
Amount of Each Disbursement this Period
52.17

Memo Item Independent Expenditure - Meeting Room Rental

Full Name (Last, First, Middle Initial)

### C. RTSP, LLC

Mailing Address 961 Route 10 East, Unit 2F

City Randolph State NJ Zip Code 07869

Purpose of Disbursement  
Independent Expenditure - Meeting Room Rental

004
Category/ Type

Candidate Name  
**Brown, Chris, , NJ Asm.,**

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:	

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
10 / 17 / 2017

FEC Identification Number

C
Transaction ID : 76629898
Amount of Each Disbursement this Period
13.05

Memo Item Independent Expenditure - Meeting Room Rental

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

117.39



**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"/> 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. RTSP, LLC**

Mailing Address 961 Route 10 East, Unit 2F

City Randolph State NJ Zip Code 07869

Purpose of Disbursement Independent Expenditure - Meeting Room Rental

**004**  
Category/  
Type

Candidate Name

**Bell, Colin, , ,**

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : 76629899**

Amount of Each Disbursement this Period

Memo Item Independent Expenditure - Meeting Room Rental

Full Name (Last, First, Middle Initial)

**B. RTSP, LLC**

Mailing Address 961 Route 10 East, Unit 2F

City Randolph State NJ Zip Code 07869

Purpose of Disbursement Independent Expenditure - Meeting Room Rental

**004**  
Category/  
Type

Candidate Name

**Simon, Donna, , NJ Asm.,**

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : 76629900**

Amount of Each Disbursement this Period

Memo Item Independent Expenditure - Meeting Room Rental

Full Name (Last, First, Middle Initial)

**C. RTSP, LLC**

Mailing Address 961 Route 10 East, Unit 2F

City Randolph State NJ Zip Code 07869

Purpose of Disbursement Independent Expenditure - Meeting Room Rental

**004**  
Category/  
Type

Candidate Name

**Zwicker, Andrew, , NJ Asm.,**

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : 76629901**

Amount of Each Disbursement this Period

Memo Item Independent Expenditure - Meeting Room Rental

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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. RTSP, LLC**

Mailing Address 961 Route 10 East, Unit 2F

City Randolph State NJ Zip Code 07869

Purpose of Disbursement  
Independent Expenditure - Meeting Room Rental

004
Category/ Type

Candidate Name  
**Freiman, Roy, , ,**

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		17		2017

FEC Identification Number

C
Transaction ID : 76629902
Amount of Each Disbursement this Period
13.04

Memo Item Independent Expenditure - Meeting Room Rental

Full Name (Last, First, Middle Initial)

**B. RTSP, LLC**

Mailing Address 961 Route 10 East, Unit 2F

City Randolph State NJ Zip Code 07869

Purpose of Disbursement  
Independent Expenditure - Meeting Room Rental

004
Category/ Type

Candidate Name  
**Leonard, William, , ,**

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		17		2017

FEC Identification Number

C
Transaction ID : 76629903
Amount of Each Disbursement this Period
13.05

Memo Item Independent Expenditure - Meeting Room Rental

Full Name (Last, First, Middle Initial)

**C. RTSP, LLC**

Mailing Address 961 Route 10 East, Unit 2F

City Randolph State NJ Zip Code 07869

Purpose of Disbursement  
Independent Expenditure - Meeting Room Rental

004
Category/ Type

Candidate Name  
**Wolf, Christopher, , ,**

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		17		2017

FEC Identification Number

C
Transaction ID : 76629904
Amount of Each Disbursement this Period
13.05

Memo Item Independent Expenditure - Meeting Room Rental

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

39.14

**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"/> 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. RTSP, LLC**

Mailing Address 961 Route 10 East, Unit 2F

City Randolph State NJ Zip Code 07869

Purpose of Disbursement Independent Expenditure - Meeting Room Rental

Category/Type

Candidate Name Eustace, Timothy, , NJ Asm.,

Office Sought:  House  Senate  President  
 Disbursement For:  Primary  General  Other (specify) ▼  
 State: District:

Date of Disbursement  
 M M / D D / Y Y Y Y Y Y  
 10 / 17 / 2017

FEC Identification Number

**Transaction ID : 76629905**  
 Amount of Each Disbursement this Period  
 13.04

Memo Item Independent Expenditure - Meeting Room Rental

Full Name (Last, First, Middle Initial)

**B. RTSP, LLC**

Mailing Address 961 Route 10 East, Unit 2F

City Randolph State NJ Zip Code 07869

Purpose of Disbursement Independent Expenditure - Meeting Room Rental

Category/Type

Candidate Name Lagana, Joseph, , NJ Asm.,

Office Sought:  House  Senate  President  
 Disbursement For:  Primary  General  Other (specify) ▼  
 State: District:

Date of Disbursement  
 M M / D D / Y Y Y Y Y Y  
 10 / 17 / 2017

FEC Identification Number

**Transaction ID : 76629906**  
 Amount of Each Disbursement this Period  
 13.04

Memo Item Independent Expenditure - Meeting Room Rental

Full Name (Last, First, Middle Initial)

**C. RTSP, LLC**

Mailing Address 961 Route 10 East, Unit 2F

City Randolph State NJ Zip Code 07869

Purpose of Disbursement Independent Expenditure - Meeting Room Rental

Category/Type

Candidate Name Corrado, Kristin, , ,

Office Sought:  House  Senate  President  
 Disbursement For:  Primary  General  Other (specify) ▼  
 State: District:

Date of Disbursement  
 M M / D D / Y Y Y Y Y Y  
 10 / 17 / 2017

FEC Identification Number

**Transaction ID : 76629907**  
 Amount of Each Disbursement this Period  
 13.04

Memo Item Independent Expenditure - Meeting Room Rental

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

39.12

**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"/> 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. RTSP, LLC**

Mailing Address 961 Route 10 East, Unit 2F

City Randolph State NJ Zip Code 07869

Purpose of Disbursement Independent Expenditure - Meeting Room Rental

**004**  
Category/  
Type

Candidate Name  
**Duch, Thomas, , ,**

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement  
M M / D D / Y Y Y Y Y Y  
10 / 17 / 2017

FEC Identification Number

**C**  
**Transaction ID : 76629908**  
Amount of Each Disbursement this Period  
13.04

Memo Item Independent Expenditure - Meeting Room Rental

Full Name (Last, First, Middle Initial)

**B. RTSP, LLC**

Mailing Address 961 Route 10 East, Unit 2F

City Randolph State NJ Zip Code 07869

Purpose of Disbursement Independent Expenditure - Meeting Room Rental

**004**  
Category/  
Type

Candidate Name  
**Rooney, Kevin, , NJ Asm.,**

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement  
M M / D D / Y Y Y Y Y Y  
10 / 17 / 2017

FEC Identification Number

**C**  
**Transaction ID : 76629909**  
Amount of Each Disbursement this Period  
13.05

Memo Item Independent Expenditure - Meeting Room Rental

Full Name (Last, First, Middle Initial)

**C. RTSP, LLC**

Mailing Address 961 Route 10 East, Unit 2F

City Randolph State NJ Zip Code 07869

Purpose of Disbursement Independent Expenditure - Meeting Room Rental

**004**  
Category/  
Type

Candidate Name  
**DePhillips, Christopher, , ,**

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement  
M M / D D / Y Y Y Y Y Y  
10 / 17 / 2017

FEC Identification Number

**C**  
**Transaction ID : 76629910**  
Amount of Each Disbursement this Period  
13.05

Memo Item Independent Expenditure - Meeting Room Rental

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

39.14

**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"/> 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. RTSP, LLC**

Mailing Address 961 Route 10 East, Unit 2F

City Randolph State NJ Zip Code 07869

Purpose of Disbursement  
Independent Expenditure - Meeting Room Rental

Category/  
Type

Candidate Name  
**Ordway, Christine, , ,**

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement  
M M / D D / Y Y Y Y Y Y  
10 / 17 / 2017

FEC Identification Number

**Transaction ID : 76629911**  
Amount of Each Disbursement this Period

Memo Item Independent Expenditure - Meeting Room Rental

Full Name (Last, First, Middle Initial)

**B. RTSP, LLC**

Mailing Address 961 Route 10 East, Unit 2F

City Randolph State NJ Zip Code 07869

Purpose of Disbursement  
Independent Expenditure - Meeting Room Rental

Category/  
Type

Candidate Name  
**Vagianos, Paul, , ,**

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement  
M M / D D / Y Y Y Y Y Y  
10 / 17 / 2017

FEC Identification Number

**Transaction ID : 76629912**  
Amount of Each Disbursement this Period

Memo Item Independent Expenditure - Meeting Room Rental

Full Name (Last, First, Middle Initial)

**C. Garden State Shooting Center**

Mailing Address 1955 Swarthmore Avenue

City Lakewood State NJ Zip Code 08701

Purpose of Disbursement  
Independent Expenditure - Meeting Room Rental

Category/  
Type

Candidate Name  
**Guadagno, Kim, , ,**

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement  
M M / D D / Y Y Y Y Y Y  
10 / 17 / 2017

FEC Identification Number

**Transaction ID : 76629913**  
Amount of Each Disbursement this Period

Memo Item Independent Expenditure - Meeting Room Rental

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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. Garden State Shooting Center**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		17		2017

Mailing Address 1955 Swarthmore Avenue

FEC Identification Number

C [ ]

**Transaction ID : 76629914**

Amount of Each Disbursement this Period

[ ] 52.17

City Lakewood State NJ Zip Code 08701

Purpose of Disbursement  
Independent Expenditure - Meeting Room Rental

004  
Category/  
Type

Candidate Name  
**Murphy, Phil, , ,**

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Memo Item Independent Expenditure - Meeting Room Rental

Full Name (Last, First, Middle Initial)

**B. Garden State Shooting Center**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		17		2017

Mailing Address 1955 Swarthmore Avenue

FEC Identification Number

C [ ]

**Transaction ID : 76629915**

Amount of Each Disbursement this Period

[ ] 13.05

City Lakewood State NJ Zip Code 08701

Purpose of Disbursement  
Independent Expenditure - Meeting Room Rental

004  
Category/  
Type

Candidate Name  
**Brown, Chris, , NJ Asm.,**

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Memo Item Independent Expenditure - Meeting Room Rental

Full Name (Last, First, Middle Initial)

**C. Garden State Shooting Center**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		17		2017

Mailing Address 1955 Swarthmore Avenue

FEC Identification Number

C [ ]

**Transaction ID : 76629916**

Amount of Each Disbursement this Period

[ ] 13.04

City Lakewood State NJ Zip Code 08701

Purpose of Disbursement  
Independent Expenditure - Meeting Room Rental

004  
Category/  
Type

Candidate Name  
**Bell, Colin, , ,**

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Memo Item Independent Expenditure - Meeting Room Rental

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

[ ] 78.26

[ ]

**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"/> 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. Garden State Shooting Center**

Mailing Address 1955 Swarthmore Avenue

City Lakewood State NJ Zip Code 08701

Purpose of Disbursement  
Independent Expenditure - Meeting Room Rental

004

Candidate Name  
**Simon, Donna, , NJ Asm.,**

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 17 / 2017

FEC Identification Number

C [REDACTED]

Transaction ID : 76629917

Amount of Each Disbursement this Period

[REDACTED] 13.05

Memo Item Independent Expenditure - Meeting Room Rental

Full Name (Last, First, Middle Initial)

**B. Garden State Shooting Center**

Mailing Address 1955 Swarthmore Avenue

City Lakewood State NJ Zip Code 08701

Purpose of Disbursement  
Independent Expenditure - Meeting Room Rental

004

Candidate Name  
**Zwicker, Andrew, , NJ Asm.,**

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 17 / 2017

FEC Identification Number

C [REDACTED]

Transaction ID : 76629918

Amount of Each Disbursement this Period

[REDACTED] 13.04

Memo Item Independent Expenditure - Meeting Room Rental

Full Name (Last, First, Middle Initial)

**C. Garden State Shooting Center**

Mailing Address 1955 Swarthmore Avenue

City Lakewood State NJ Zip Code 08701

Purpose of Disbursement  
Independent Expenditure - Meeting Room Rental

004

Candidate Name  
**Freiman, Roy, , ,**

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 17 / 2017

FEC Identification Number

C [REDACTED]

Transaction ID : 76629919

Amount of Each Disbursement this Period

[REDACTED] 13.04

Memo Item Independent Expenditure - Meeting Room Rental

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

[REDACTED] 39.13

**TOTAL** This Period (last page this line number only)..... ▶

[REDACTED]

**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"/> 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. Garden State Shooting Center**

Mailing Address 1955 Swarthmore Avenue

City Lakewood State NJ Zip Code 08701

Purpose of Disbursement  
Independent Expenditure - Meeting Room Rental

001  
 002  
 003  
 004  
 005  
Category/  
Type

Candidate Name  
**Leonard, William, , ,**

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
10 / 17 / 2017

FEC Identification Number

C  D  E  F  G  H  I  J  K  L  M  N  O  P  Q  R  S  T  U  V  W  X  Y  Z  AA  AB  AC  AD  AE  AF  AG  AH  AI  AJ  AK  AL  AM  AN  AO  AP  AQ  AR  AS  AT  AU  AV  AW  AX  AY  AZ  BA  BB  BC  BD  BE  BF  BG  BH  BI  BJ  BK  BL  BM  BN  BO  BP  BQ  BR  BS  BT  BU  BV  BW  BX  BY  BZ  CA  CB  CC  CD  CE  CF  CG  CH  CI  CJ  CK  CL  CM  CN  CO  CP  CQ  CR  CS  CT  CU  CV  CW  CX  CY  CZ  DA  DB  DC  DD  DE  DF  DG  DH  DI  DJ  DK  DL  DM  DN  DO  DP  DQ  DR  DS  DT  DU  DV  DW  DX  DY  DZ  EA  EB  EC  ED  EE  EF  EG  EH  EI  EJ  EK  EL  EM  EN  EO  EP  EQ  ER  ES  ET  EU  EV  EW  EX  EY  EZ  FA  FB  FC  FD  FE  FF  FG  FH  FI  FJ  FK  FL  FM  FN  FO  FP  FQ  FR  FS  FT  FU  FV  FW  FX  FY  FZ  GA  GB  GC  GD  GE  GF  GG  GH  GI  GJ  GK  GL  GM  GN  GO  GP  GQ  GR  GS  GT  GU  GV  GW  GX  GY  GZ  HA  HB  HC  HD  HE  HF  HG  HH  HI  HJ  HK  HL  HM  HN  HO  HP  HQ  HR  HS  HT  HU  HV  HW  HX  HY  HZ  IA  IB  IC  ID  IE  IF  IG  IH  IJ  IK  IL  IM  IN  IO  IP  IQ  IR  IS  IT  IU  IV  IW  IX  IY  IZ  JA  JB  JC  JD  JE  JF  JG  JH  JI  JJ  JK  JL  JM  JN  JO  JP  JQ  JR  JS  JT  JU  JV  JW  JX  JY  JZ  KA  KB  KC  KD  KE  KF  KG  KH  KI  KJ  KK  KL  KM  KN  KO  KP  KQ  KR  KS  KT  KU  KV  KW  KX  KY  KZ  LA  LB  LC  LD  LE  LF  LG  LH  LI  LJ  LK  LL  LM  LN  LO  LP  LQ  LR  LS  LT  LU  LV  LW  LX  LY  LZ  MA  MB  MC  MD  ME  MF  MG  MH  MI  MJ  MK  ML  MN  MO  MP  MQ  MR  MS  MT  MU  MV  MW  MX  MY  MZ  NA  NB  NC  ND  NE  NF  NG  NH  NI  NJ  NK  NL  NM  NN  NO  NP  NQ  NR  NS  NT  NU  NV  NW  NX  NY  NZ  OA  OB  OC  OD  OE  OF  OG  OH  OI  OJ  OK  OL  OM  ON  OO  OP  OQ  OR  OS  OT  OU  OV  OW  OX  OY  OZ  PA  PB  PC  PD  PE  PF  PG  PH  PI  PJ  PK  PL  PM  PN  PO  PP  PQ  PR  PS  PT  PU  PV  PW  PX  PY  PZ  QA  QB  QC  QD  QE  QF  QG  QH  QI  QJ  QK  QL  QM  QN  QO  QP  QQ  QR  QS  QT  QU  QV  QW  QX  QY  QZ  RA  RB  RC  RD  RE  RF  RG  RH  RI  RJ  RK  RL  RM  RN  RO  RP  RQ  RR  RS  RT  RU  RV  RW  RX  RY  RZ  SA  SB  SC  SD  SE  SF  SG  SH  SI  SJ  SK  SL  SM  SN  SO  SP  SQ  SR  SS  ST  SU  SV  SW  SX  SY  SZ  TA  TB  TC  TD  TE  TF  TG  TH  TI  TJ  TK  TL  TM  TN  TO  TP  TQ  TR  TS  TU  TV  TW  TX  TY  TZ  UA  UB  UC  UD  UE  UF  UG  UH  UI  UJ  UK  UL  UM  UN  UO  UP  UQ  UR  US  UT  UY  UZ  VA  VB  VC  VD  VE  VF  VG  VH  VI  VJ  VK  VL  VM  VN  VO  VP  VQ  VR  VS  VT  VU  VV  VW  VX  VY  VZ  WA  WB  WC  WD  WE  WF  WG  WH  WI  WJ  WK  WL  WM  WN  WO  WP  WQ  WR  WS  WT  WY  WZ  XA  XB  XC  XD  XE  XF  XG  XH  XI  XJ  XK  XL  XM  XN  XO  XP  XQ  XR  XS  XT  XU  XV  XW  XX  XY  XZ  YA  YB  YC  YD  YE  YF  YG  YH  YI  YJ  YK  YL  YM  YN  YO  YP  YQ  YR  YS  YT  YU  YV  YW  YX  YZ  ZA  ZB  ZC  ZD  ZE  ZF  ZG  ZH  ZI  ZJ  ZK  ZL  ZM  ZN  ZO  ZP  ZQ  ZR  ZS  ZT  ZU  ZV  ZW  ZX  ZY  ZZ

Transaction ID : 76629920

Amount of Each Disbursement this Period

0.00  0.01  0.02  0.03  0.04  0.05  0.06  0.07  0.08  0.09  0.10  0.11  0.12  0.13  0.14  0.15  0.16  0.17  0.18  0.19  0.20  0.21  0.22  0.23  0.24  0.25  0.26  0.27  0.28  0.29  0.30  0.31  0.32  0.33  0.34  0.35  0.36  0.37  0.38  0.39  0.40  0.41  0.42  0.43  0.44  0.45  0.46  0.47  0.48  0.49  0.50  0.51  0.52  0.53  0.54  0.55  0.56  0.57  0.58  0.59  0.60  0.61  0.62  0.63  0.64  0.65  0.66  0.67  0.68  0.69  0.70  0.71  0.72  0.73  0.74  0.75  0.76  0.77  0.78  0.79  0.80  0.81  0.82  0.83  0.84  0.85  0.86  0.87  0.88  0.89  0.90  0.91  0.92  0.93  0.94  0.95  0.96  0.97  0.98  0.99  1.00  1.01  1.02  1.03  1.04  1.05  1.06  1.07  1.08  1.09  1.10  1.11  1.12  1.13  1.14  1.15  1.16  1.17  1.18  1.19  1.20  1.21  1.22  1.23  1.24  1.25  1.26  1.27  1.28  1.29  1.30  1.31  1.32  1.33  1.34  1.35  1.36  1.37  1.38  1.39  1.40  1.41  1.42  1.43  1.44  1.45  1.46  1.47  1.48  1.49  1.50  1.51  1.52  1.53  1.54  1.55  1.56  1.57  1.58  1.59  1.60  1.61  1.62  1.63  1.64  1.65  1.66  1.67  1.68  1.69  1.70  1.71  1.72  1.73  1.74  1.75  1.76  1.77  1.78  1.79  1.80  1.81  1.82  1.83  1.84  1.85  1.86  1.87  1.88  1.89  1.90  1.91  1.92  1.93  1.94  1.95  1.96  1.97  1.98  1.99  2.00  2.01  2.02  2.03  2.04  2.05  2.06  2.07  2.08  2.09  2.10  2.11  2.12  2.13  2.14  2.15  2.16  2.17  2.18  2.19  2.20  2.21  2.22  2.23  2.24  2.25  2.26  2.27  2.28  2.29  2.30  2.31  2.32  2.33  2.34  2.35  2.36  2.37  2.38  2.39  2.40  2.41  2.42  2.43  2.44  2.45  2.46  2.47  2.48  2.49  2.50  2.51  2.52  2.53  2.54  2.55  2.56  2.57  2.58  2.59  2.60  2.61  2.62  2.63  2.64  2.65  2.66  2.67  2.68  2.69  2.70  2.71  2.72  2.73  2.74  2.75  2.76  2.77  2.78  2.79  2.80  2.81  2.82  2.83  2.84  2.85  2.86  2.87  2.88  2.89  2.90  2.91  2.92  2.93  2.94  2.95  2.96  2.97  2.98  2.99  3.00  3.01  3.02  3.03  3.04  3.05  3.06  3.07  3.08  3.09  3.10  3.11  3.12  3.13  3.14  3.15  3.16  3.17  3.18  3.19  3.20  3.21  3.22  3.23  3.24  3.25  3.26  3.27  3.28  3.29  3.30  3.31  3.32  3.33  3.34  3.35  3.36  3.37  3.38  3.39  3.40  3.41  3.42  3.43  3.44  3.45  3.46  3.47  3.48  3.49  3.50  3.51  3.52  3.53  3.54  3.55  3.56  3.57  3.58  3.59  3.60  3.61  3.62  3.63  3.64  3.65  3.66  3.67  3.68  3.69  3.70  3.71  3.72  3.73  3.74  3.75  3.76  3.77  3.78  3.79  3.80  3.81  3.82  3.83  3.84  3.85  3.86  3.87  3.88  3.89  3.90  3.91  3.92  3.93  3.94  3.95  3.96  3.97  3.98  3.99  4.00  4.01  4.02  4.03  4.04  4.05  4.06  4.07  4.08  4.09  4.10  4.11  4.12  4.13  4.14  4.15  4.16  4.17  4.18  4.19  4.20  4.21  4.22  4.23  4.24  4.25  4.26  4.27  4.28  4.29  4.30  4.31  4.32  4.33  4.34  4.35  4.36  4.37  4.38  4.39  4.40  4.41  4.42  4.43  4.44  4.45  4.46  4.47  4.48  4.49  4.50  4.51  4.52  4.53  4.54  4.55  4.56  4.57  4.58  4.59  4.60  4.61  4.62  4.63  4.64  4.65  4.66  4.67  4.68  4.69  4.70  4.71  4.72  4.73  4.74  4.75  4.76  4.77  4.78  4.79  4.80  4.81  4.82  4.83  4.84  4.85  4.86  4.87  4.88  4.89  4.90  4.91  4.92  4.93  4.94  4.95  4.96  4.97  4.98  4.99  5.00  5.01  5.02  5.03  5.04  5.05  5.06  5.07  5.08  5.09  5.10  5.11  5.12  5.13  5.14  5.15  5.16  5.17  5.18  5.19  5.20  5.21  5.22  5.23  5.24  5.25  5.26  5.27  5.28  5.29  5.30  5.31  5.32  5.33  5.34  5.35  5.36  5.37  5.38  5.39  5.40  5.41  5.



**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"/> 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. Garden State Shooting Center**

Mailing Address 1955 Swarthmore Avenue

City Lakewood State NJ Zip Code 08701

Purpose of Disbursement  
Independent Expenditure - Meeting Room Rental

Category/  
Type

Candidate Name  
**Lagana, Joseph, , NJ Asm.,**

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement  
M M / D D / Y Y Y Y Y Y  
10 / 17 / 2017

FEC Identification Number  
**C**  
**Transaction ID : 76629923**  
Amount of Each Disbursement this Period  
13.04  
 Memo Item Independent Expenditure - Meeting Room Rental

Full Name (Last, First, Middle Initial)

**B. Garden State Shooting Center**

Mailing Address 1955 Swarthmore Avenue

City Lakewood State NJ Zip Code 08701

Purpose of Disbursement  
Independent Expenditure - Meeting Room Rental

Category/  
Type

Candidate Name  
**Corrado, Kristin, , ,**

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement  
M M / D D / Y Y Y Y Y Y  
10 / 17 / 2017

FEC Identification Number  
**C**  
**Transaction ID : 76629924**  
Amount of Each Disbursement this Period  
13.04  
 Memo Item Independent Expenditure - Meeting Room Rental

Full Name (Last, First, Middle Initial)

**C. Garden State Shooting Center**

Mailing Address 1955 Swarthmore Avenue

City Lakewood State NJ Zip Code 08701

Purpose of Disbursement  
Independent Expenditure - Meeting Room Rental

Category/  
Type

Candidate Name  
**Duch, Thomas, , ,**

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement  
M M / D D / Y Y Y Y Y Y  
10 / 17 / 2017

FEC Identification Number  
**C**  
**Transaction ID : 76629925**  
Amount of Each Disbursement this Period  
13.04  
 Memo Item Independent Expenditure - Meeting Room Rental

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

39.12

**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"/> 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. Garden State Shooting Center**

Mailing Address 1955 Swarthmore Avenue

City Lakewood State NJ Zip Code 08701

Purpose of Disbursement  
Independent Expenditure - Meeting Room Rental

004

Candidate Name  
**Rooney, Kevin, , NJ Asm.,**

Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 17 / 2017

FEC Identification Number

C [REDACTED]

Transaction ID : 76629926

Amount of Each Disbursement this Period

[REDACTED] 13.05

Memo Item Independent Expenditure - Meeting Room Rental

Full Name (Last, First, Middle Initial)

**B. Garden State Shooting Center**

Mailing Address 1955 Swarthmore Avenue

City Lakewood State NJ Zip Code 08701

Purpose of Disbursement  
Independent Expenditure - Meeting Room Rental

004

Candidate Name  
**DePhillips, Christopher, , ,**

Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 17 / 2017

FEC Identification Number

C [REDACTED]

Transaction ID : 76629927

Amount of Each Disbursement this Period

[REDACTED] 13.05

Memo Item Independent Expenditure - Meeting Room Rental

Full Name (Last, First, Middle Initial)

**C. Garden State Shooting Center**

Mailing Address 1955 Swarthmore Avenue

City Lakewood State NJ Zip Code 08701

Purpose of Disbursement  
Independent Expenditure - Meeting Room Rental

004

Candidate Name  
**Ordway, Christine, , ,**

Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 17 / 2017

FEC Identification Number

C [REDACTED]

Transaction ID : 76629928

Amount of Each Disbursement this Period

[REDACTED] 13.04

Memo Item Independent Expenditure - Meeting Room Rental

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

[REDACTED] 39.14

[REDACTED]

**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"/> 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. Garden State Shooting Center**

Mailing Address 1955 Swarthmore Avenue

City Lakewood State NJ Zip Code 08701

Purpose of Disbursement  
Independent Expenditure - Meeting Room Rental

001  
 002  
 003  
 004  
 005  
Category/  
Type

Candidate Name  
**Vagianos, Paul, , ,**

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
10 / 17 / 2017

FEC Identification Number

C  
**Transaction ID : 76629929**  
Amount of Each Disbursement this Period  
13.04

Memo Item Independent Expenditure - Meeting Room Rental

Full Name (Last, First, Middle Initial)

**B. Full Metal Jacket Gun Range, LLC**

Mailing Address 3018-B Route 9 South

City Seaville State NJ Zip Code 08230

Purpose of Disbursement  
Independent Expenditure - Meeting Room Rental

001  
 002  
 003  
 004  
 005  
Category/  
Type

Candidate Name  
**Guadagno, Kim, , ,**

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
10 / 17 / 2017

FEC Identification Number

C  
**Transaction ID : 76629930**  
Amount of Each Disbursement this Period  
52.17

Memo Item Independent Expenditure - Meeting Room Rental

Full Name (Last, First, Middle Initial)

**C. Full Metal Jacket Gun Range, LLC**

Mailing Address 3018-B Route 9 South

City Seaville State NJ Zip Code 08230

Purpose of Disbursement  
Independent Expenditure - Meeting Room Rental

001  
 002  
 003  
 004  
 005  
Category/  
Type

Candidate Name  
**Murphy, Phil, , ,**

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
10 / 17 / 2017

FEC Identification Number

C  
**Transaction ID : 76629931**  
Amount of Each Disbursement this Period  
52.17

Memo Item Independent Expenditure - Meeting Room Rental

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

117.38

**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"/> 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. Full Metal Jacket Gun Range, LLC**

Mailing Address 3018-B Route 9 South

City Seaville State NJ Zip Code 08230

Purpose of Disbursement  
Independent Expenditure - Meeting Room Rental

004  
Category/  
Type

Candidate Name  
**Brown, Chris, , NJ Asm.,**

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
10 / 17 / 2017

FEC Identification Number

C   
**Transaction ID : 76629932**  
Amount of Each Disbursement this Period  
 13.05

Memo Item Independent Expenditure - Meeting Room Rental

Full Name (Last, First, Middle Initial)

**B. Full Metal Jacket Gun Range, LLC**

Mailing Address 3018-B Route 9 South

City Seaville State NJ Zip Code 08230

Purpose of Disbursement  
Independent Expenditure - Meeting Room Rental

004  
Category/  
Type

Candidate Name  
**Bell, Colin, , ,**

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
10 / 17 / 2017

FEC Identification Number

C   
**Transaction ID : 76629935**  
Amount of Each Disbursement this Period  
 13.04

Memo Item Independent Expenditure - Meeting Room Rental

Full Name (Last, First, Middle Initial)

**C. Full Metal Jacket Gun Range, LLC**

Mailing Address 3018-B Route 9 South

City Seaville State NJ Zip Code 08230

Purpose of Disbursement  
Independent Expenditure - Meeting Room Rental

004  
Category/  
Type

Candidate Name  
**Simon, Donna, , NJ Asm.,**

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
10 / 17 / 2017

FEC Identification Number

C   
**Transaction ID : 76629936**  
Amount of Each Disbursement this Period  
 13.05

Memo Item Independent Expenditure - Meeting Room Rental

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

39.14

**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"/> 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. Full Metal Jacket Gun Range, LLC**

Mailing Address 3018-B Route 9 South

City Seaville State NJ Zip Code 08230

Purpose of Disbursement  
Independent Expenditure - Meeting Room Rental

001  
 002  
 003  
 004  
 005  
Category/  
Type

Candidate Name  
**Zwicker, Andrew, , NJ Asm.,**

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
10 / 17 / 2017

FEC Identification Number

C [REDACTED]

**Transaction ID : 76629937**

Amount of Each Disbursement this Period

[REDACTED] 13.04

Memo Item Independent Expenditure - Meeting Room Rental

Full Name (Last, First, Middle Initial)

**B. Full Metal Jacket Gun Range, LLC**

Mailing Address 3018-B Route 9 South

City Seaville State NJ Zip Code 08230

Purpose of Disbursement  
Independent Expenditure - Meeting Room Rental

001  
 002  
 003  
 004  
 005  
Category/  
Type

Candidate Name  
**Freiman, Roy, , ,**

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
10 / 17 / 2017

FEC Identification Number

C [REDACTED]

**Transaction ID : 76629938**

Amount of Each Disbursement this Period

[REDACTED] 13.04

Memo Item Independent Expenditure - Meeting Room Rental

Full Name (Last, First, Middle Initial)

**C. Full Metal Jacket Gun Range, LLC**

Mailing Address 3018-B Route 9 South

City Seaville State NJ Zip Code 08230

Purpose of Disbursement  
Independent Expenditure - Meeting Room Rental

001  
 002  
 003  
 004  
 005  
Category/  
Type

Candidate Name  
**Leonard, William, , ,**

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
10 / 17 / 2017

FEC Identification Number

C [REDACTED]

**Transaction ID : 76629939**

Amount of Each Disbursement this Period

[REDACTED] 13.05

Memo Item Independent Expenditure - Meeting Room Rental

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

[REDACTED] 39.13

[REDACTED]

**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"/> 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. Full Metal Jacket Gun Range, LLC**

Mailing Address 3018-B Route 9 South

City  
Seaville

State  
NJ

Zip Code  
08230

Purpose of Disbursement  
Independent Expenditure - Meeting Room Rental

004

Category/  
Type

Candidate Name

**Wolf, Christopher, , ,**

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			17			2017			

FEC Identification Number

C [REDACTED]

**Transaction ID : 76629940**

Amount of Each Disbursement this Period

[REDACTED] 13.05

Memo Item Independent Expenditure - Meeting Room Rental

Full Name (Last, First, Middle Initial)

**B. Full Metal Jacket Gun Range, LLC**

Mailing Address 3018-B Route 9 South

City  
Seaville

State  
NJ

Zip Code  
08230

Purpose of Disbursement  
Independent Expenditure - Meeting Room Rental

004

Category/  
Type

Candidate Name

**Eustace, Timothy, , NJ Asm.,**

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			17			2017			

FEC Identification Number

C [REDACTED]

**Transaction ID : 76629941**

Amount of Each Disbursement this Period

[REDACTED] 13.04

Memo Item Independent Expenditure - Meeting Room Rental

Full Name (Last, First, Middle Initial)

**C. Full Metal Jacket Gun Range, LLC**

Mailing Address 3018-B Route 9 South

City  
Seaville

State  
NJ

Zip Code  
08230

Purpose of Disbursement  
Independent Expenditure - Meeting Room Rental

004

Category/  
Type

Candidate Name

**Lagana, Joseph, , NJ Asm.,**

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			17			2017			

FEC Identification Number

C [REDACTED]

**Transaction ID : 76629942**

Amount of Each Disbursement this Period

[REDACTED] 13.04

Memo Item Independent Expenditure - Meeting Room Rental

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

[REDACTED] 39.13

[REDACTED]

**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"/> 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. Full Metal Jacket Gun Range, LLC**

Mailing Address 3018-B Route 9 South

City Seaville State NJ Zip Code 08230

Purpose of Disbursement  
Independent Expenditure - Meeting Room Rental

Category/  
Type

Candidate Name  
**Corrado, Kristin, , ,**

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement  
M M / D D / Y Y Y Y Y Y  
10 / 17 / 2017

FEC Identification Number

**Transaction ID : 76629943**  
Amount of Each Disbursement this Period

Memo Item Independent Expenditure - Meeting Room Rental

Full Name (Last, First, Middle Initial)

**B. Full Metal Jacket Gun Range, LLC**

Mailing Address 3018-B Route 9 South

City Seaville State NJ Zip Code 08230

Purpose of Disbursement  
Independent Expenditure - Meeting Room Rental

Category/  
Type

Candidate Name  
**Duch, Thomas, , ,**

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement  
M M / D D / Y Y Y Y Y Y  
10 / 17 / 2017

FEC Identification Number

**Transaction ID : 76629944**  
Amount of Each Disbursement this Period

Memo Item Independent Expenditure - Meeting Room Rental

Full Name (Last, First, Middle Initial)

**C. Full Metal Jacket Gun Range, LLC**

Mailing Address 3018-B Route 9 South

City Seaville State NJ Zip Code 08230

Purpose of Disbursement  
Independent Expenditure - Meeting Room Rental

Category/  
Type

Candidate Name  
**Rooney, Kevin, , NJ Asm.,**

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement  
M M / D D / Y Y Y Y Y Y  
10 / 17 / 2017

FEC Identification Number

**Transaction ID : 76629945**  
Amount of Each Disbursement this Period

Memo Item Independent Expenditure - Meeting Room Rental

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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. Full Metal Jacket Gun Range, LLC**

Mailing Address 3018-B Route 9 South

City Seaville State NJ Zip Code 08230

Purpose of Disbursement  
Independent Expenditure - Meeting Room Rental

Category/  
Type

Candidate Name  
**DePhillips, Christopher, , ,**

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : 76629946**

Amount of Each Disbursement this Period

Memo Item Independent Expenditure - Meeting Room Rental

Full Name (Last, First, Middle Initial)

**B. Full Metal Jacket Gun Range, LLC**

Mailing Address 3018-B Route 9 South

City Seaville State NJ Zip Code 08230

Purpose of Disbursement  
Independent Expenditure - Meeting Room Rental

Category/  
Type

Candidate Name  
**Ordway, Christine, , ,**

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : 76629947**

Amount of Each Disbursement this Period

Memo Item Independent Expenditure - Meeting Room Rental

Full Name (Last, First, Middle Initial)

**C. Full Metal Jacket Gun Range, LLC**

Mailing Address 3018-B Route 9 South

City Seaville State NJ Zip Code 08230

Purpose of Disbursement  
Independent Expenditure - Meeting Room Rental

Category/  
Type

Candidate Name  
**Vagianos, Paul, , ,**

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : 76629948**

Amount of Each Disbursement this Period

Memo Item Independent Expenditure - Meeting Room Rental

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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. Master Print, Inc.**

Mailing Address P.O. Box 1467

City  
Newington

State  
VA

Zip Code  
22122

Purpose of Disbursement  
Independent Expenditure - Print 4 Color Postcards

Category/  
Type

Candidate Name  
**Northam, Ralph, S., ,**

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : 76629950**

Amount of Each Disbursement this Period

Independent Expenditure - Print 4  
 Memo Item Color Postcards

Full Name (Last, First, Middle Initial)

**B. Prolist Inc.**

Mailing Address 4510 Buckeystown Pike, Suite M

City  
Frederick

State  
MD

Zip Code  
21704-7539

Purpose of Disbursement  
Independent Expenditure - Postage

Category/  
Type

Candidate Name  
**Northam, Ralph, S., ,**

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : 76629952**

Amount of Each Disbursement this Period

Independent Expenditure - Postage  
 Memo Item

Full Name (Last, First, Middle Initial)

**C. Prolist Inc.**

Mailing Address 4510 Buckeystown Pike, Suite M

City  
Frederick

State  
MD

Zip Code  
21704-7539

Purpose of Disbursement  
Independent Expenditure - Postcards

Category/  
Type

Candidate Name  
**Northam, Ralph, S., ,**

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : 76629954**

Amount of Each Disbursement this Period

Independent Expenditure -  
Postcards  
 Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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. Prolist Inc.**

Mailing Address 4510 Buckeystown Pike, Suite M

City Frederick State MD Zip Code 21704-7539

Purpose of Disbursement Independent Expenditure - Postage

004  
Category/Type

Candidate Name **Dhingra, Manka, , ,**

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
10 / 30 / 2017

FEC Identification Number

C   
**Transaction ID : 76634825**  
Amount of Each Disbursement this Period  
 306.32

Independent Expenditure - Postage  
 Memo Item

Full Name (Last, First, Middle Initial)

**B. Prolist Inc.**

Mailing Address 4510 Buckeystown Pike, Suite M

City Frederick State MD Zip Code 21704-7539

Purpose of Disbursement Independent Expenditure - Postcards

004  
Category/Type

Candidate Name **Dhingra, Manka, , ,**

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
10 / 30 / 2017

FEC Identification Number

C   
**Transaction ID : 76634827**  
Amount of Each Disbursement this Period  
 297.60

Independent Expenditure - Postcards  
 Memo Item

Full Name (Last, First, Middle Initial)

**C. Prolist Inc.**

Mailing Address 4510 Buckeystown Pike, Suite M

City Frederick State MD Zip Code 21704-7539

Purpose of Disbursement Independent Expenditure - Postage

004  
Category/Type

Candidate Name **Rossway, Rich, , ,**

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
10 / 30 / 2017

FEC Identification Number

C   
**Transaction ID : 76634843**  
Amount of Each Disbursement this Period  
 319.23

Independent Expenditure - Postage  
 Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

923.15

**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"/> 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. Prolist Inc.**

Mailing Address 4510 Buckeystown Pike, Suite M

City Frederick State MD Zip Code 21704-7539

Purpose of Disbursement 301.58

004  
Category/  
Type

Candidate Name  
**Rossway, Rich, , ,**

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement  
M M / D D / Y Y Y Y Y Y  
10 / 30 / 2017

FEC Identification Number  
**C**  
**Transaction ID : 76634892**  
Amount of Each Disbursement this Period  
301.58

Memo Item

Full Name (Last, First, Middle Initial)

**B. Prolist Inc.**

Mailing Address 4510 Buckeystown Pike, Suite M

City Frederick State MD Zip Code 21704-7539

Purpose of Disbursement Independent Expenditure - Postage

004  
Category/  
Type

Candidate Name  
**Cierpiot, Mike, , ,**

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement  
M M / D D / Y Y Y Y Y Y  
10 / 30 / 2017

FEC Identification Number  
**C**  
**Transaction ID : 76640025**  
Amount of Each Disbursement this Period  
635.31  
Independent Expenditure - Postage

Memo Item

Full Name (Last, First, Middle Initial)

**C. Prolist Inc.**

Mailing Address 4510 Buckeystown Pike, Suite M

City Frederick State MD Zip Code 21704-7539

Purpose of Disbursement Independent Expenditure - Postcards

004  
Category/  
Type

Candidate Name  
**Cierpiot, Mike, , ,**

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement  
M M / D D / Y Y Y Y Y Y  
10 / 30 / 2017

FEC Identification Number  
**C**  
**Transaction ID : 76640027**  
Amount of Each Disbursement this Period  
464.01  
Independent Expenditure - Postcards

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

1400.90

**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"/> 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. Prolist Inc.**

Mailing Address 4510 Buckeystown Pike, Suite M

City Frederick State MD Zip Code 21704-7539

Purpose of Disbursement  
Independent Expenditure - Data Match

**004**  
Category/  
Type

Candidate Name  
**Gillespie, Edward, , ,**

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

/  /

FEC Identification Number

**C**  
**Transaction ID : 76678050**  
Amount of Each Disbursement this Period

Independent Expenditure - Data Match  
 Memo Item Match

Full Name (Last, First, Middle Initial)

**B. Prolist Inc.**

Mailing Address 4510 Buckeystown Pike, Suite M

City Frederick State MD Zip Code 21704-7539

Purpose of Disbursement  
Independent Expenditure - Data Match

**004**  
Category/  
Type

Candidate Name  
**Vogel, Jill, , ,**

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

/  /

FEC Identification Number

**C**  
**Transaction ID : 76678157**  
Amount of Each Disbursement this Period

Independent Expenditure - Data Match  
 Memo Item Match

Full Name (Last, First, Middle Initial)

**C. Prolist Inc.**

Mailing Address 4510 Buckeystown Pike, Suite M

City Frederick State MD Zip Code 21704-7539

Purpose of Disbursement  
Independent Expenditure - Data Match

**004**  
Category/  
Type

Candidate Name  
**Adams, John, , ,**

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

/  /

FEC Identification Number

**C**  
**Transaction ID : 76678236**  
Amount of Each Disbursement this Period

Independent Expenditure - Data Match  
 Memo Item Match

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**National Rifle Association of America Political Victory Fund**

**A. Connection Strategy, LLC**

Full Name (Last, First, Middle Initial)  
Mailing Address P.O. Box 2192

City: Arlington State: VA Zip Code: 22202

Purpose of Disbursement: Independent Expenditure - Phone Bank  
Candidate Name: Gillespie, Edward, , ,  
Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement: 10 / 30 / 2017

FEC Identification Number: C  
Transaction ID : 76678762  
Amount of Each Disbursement this Period: 3332.33  
 Memo Item Bank

**B. Connection Strategy, LLC**

Full Name (Last, First, Middle Initial)  
Mailing Address P.O. Box 2192

City: Arlington State: VA Zip Code: 22202

Purpose of Disbursement: Independent Expenditure - Phone Bank  
Candidate Name: Vogel, Jill, , ,  
Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement: 10 / 30 / 2017

FEC Identification Number: C  
Transaction ID : 76678763  
Amount of Each Disbursement this Period: 3332.32  
 Memo Item Bank

**C. Connection Strategy, LLC**

Full Name (Last, First, Middle Initial)  
Mailing Address P.O. Box 2192

City: Arlington State: VA Zip Code: 22202

Purpose of Disbursement: Independent Expenditure - Phone Bank  
Candidate Name: Adams, John, , ,  
Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement: 10 / 30 / 2017

FEC Identification Number: C  
Transaction ID : 76678764  
Amount of Each Disbursement this Period: 3332.32  
 Memo Item Bank

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 9996.97

**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"/> 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. Starboard Strategic, Inc.**

Mailing Address 705 Melvin Avenue, #105

City  
Annapolis

State  
MD

Zip Code  
21401

Purpose of Disbursement  
Independent Expenditure - Television Ads

004

Category/  
Type

Candidate Name

**Herring, Mark, , ,**

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			31			2017			

FEC Identification Number

C [REDACTED]

**Transaction ID : 76678780**

Amount of Each Disbursement this Period

[REDACTED] 7760.00

Memo Item Independent Expenditure - Television Ads

Full Name (Last, First, Middle Initial)

**B. Federal Capitol Communications Corporation**

Mailing Address 228 S. Washington St., Suite B30 N

City  
Alexandria

State  
VA

Zip Code  
22314

Purpose of Disbursement  
Independent Expenditure - Graphic Art Design

004

Category/  
Type

Candidate Name

**Guadagno, Kim, , ,**

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			31			2017			

FEC Identification Number

C [REDACTED]

**Transaction ID : 76678856**

Amount of Each Disbursement this Period

[REDACTED] 1050.00

Memo Item Independent Expenditure - Graphic Art Design

Full Name (Last, First, Middle Initial)

**C. Federal Capitol Communications Corporation**

Mailing Address 228 S. Washington St., Suite B30 N

City  
Alexandria

State  
VA

Zip Code  
22314

Purpose of Disbursement  
Independent Expenditure - Graphic Art Design

004

Category/  
Type

Candidate Name

**Murphy, Phil, , ,**

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			31			2017			

FEC Identification Number

C [REDACTED]

**Transaction ID : 76678857**

Amount of Each Disbursement this Period

[REDACTED] 450.00

Memo Item Independent Expenditure - Graphic Art Design

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

[REDACTED] 9260.00

[REDACTED]

**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"/> 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. Master Print, Inc.**

Mailing Address P.O. Box 1467

City  
Newington

State  
VA

Zip Code  
22122

Purpose of Disbursement  
Independent Expenditure - Print 4 Color Postcards

Category/  
Type

Candidate Name  
**Guadagno, Kim, , ,**

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : 76678860**

Amount of Each Disbursement this Period

Independent Expenditure - Print 4  
 Memo Item Color Postcards

Full Name (Last, First, Middle Initial)

**B. Master Print, Inc.**

Mailing Address P.O. Box 1467

City  
Newington

State  
VA

Zip Code  
22122

Purpose of Disbursement  
Independent Expenditure - Print 4 Color Postcards

Category/  
Type

Candidate Name  
**Murphy, Phil, , ,**

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : 76678933**

Amount of Each Disbursement this Period

Independent Expenditure - Print 4  
 Memo Item Color Postcards

Full Name (Last, First, Middle Initial)

**C. Prolist Inc.**

Mailing Address 4510 Buckeystown Pike, Suite M

City  
Frederick

State  
MD

Zip Code  
21704-7539

Purpose of Disbursement  
Independent Expenditure - Postage

Category/  
Type

Candidate Name  
**Guadagno, Kim, , ,**

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : 76678935**

Amount of Each Disbursement this Period

Independent Expenditure - Postage  
 Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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. Prolist Inc.**

Mailing Address 4510 Buckeystown Pike, Suite M

City  
Frederick

State  
MD

Zip Code  
21704-7539

Purpose of Disbursement  
Independent Expenditure - Postage

004

Candidate Name

**Murphy, Phil, , ,**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 31 / 2017

FEC Identification Number

C [REDACTED]

**Transaction ID : 76678936**

Amount of Each Disbursement this Period

[REDACTED] 16383.50

Independent Expenditure - Postage

Memo Item

Full Name (Last, First, Middle Initial)

**B. Prolist Inc.**

Mailing Address 4510 Buckeystown Pike, Suite M

City  
Frederick

State  
MD

Zip Code  
21704-7539

Purpose of Disbursement  
Independent Expenditure - Postcards

004

Candidate Name

**Guadagno, Kim, , ,**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 31 / 2017

FEC Identification Number

C [REDACTED]

**Transaction ID : 76678938**

Amount of Each Disbursement this Period

[REDACTED] 2187.94

Independent Expenditure - Postcards

Memo Item

Full Name (Last, First, Middle Initial)

**C. Prolist Inc.**

Mailing Address 4510 Buckeystown Pike, Suite M

City  
Frederick

State  
MD

Zip Code  
21704-7539

Purpose of Disbursement  
Independent Expenditure - Postcards

004

Candidate Name

**Murphy, Phil, , ,**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 31 / 2017

FEC Identification Number

C [REDACTED]

**Transaction ID : 76679011**

Amount of Each Disbursement this Period

[REDACTED] 937.69

Independent Expenditure - Postcards

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

[REDACTED] 19509.13

**TOTAL** This Period (last page this line number only)..... ▶

[REDACTED]



**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"/> 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. Master Print, Inc.**

Mailing Address P.O. Box 1467

City  
Newington

State  
VA

Zip Code  
22122

Purpose of Disbursement  
Independent Expenditure - Print 4 Color Door Hangers

004

Category/  
Type

Candidate Name

**Gillespie, Edward, , ,**

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			31			2017			

FEC Identification Number

C [REDACTED]

**Transaction ID : 76684430**

Amount of Each Disbursement this Period

[REDACTED] 173.88

Memo Item Independent Expenditure - Print 4 Color Door Hangers

Full Name (Last, First, Middle Initial)

**B. Master Print, Inc.**

Mailing Address P.O. Box 1467

City  
Newington

State  
VA

Zip Code  
22122

Purpose of Disbursement  
Independent Expenditure - Print 4 Color Door Hangers

004

Category/  
Type

Candidate Name

**Northam, Ralph, S., ,**

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			31			2017			

FEC Identification Number

C [REDACTED]

**Transaction ID : 76684431**

Amount of Each Disbursement this Period

[REDACTED] 173.88

Memo Item Independent Expenditure - Print 4 Color Door Hangers

Full Name (Last, First, Middle Initial)

**C. Master Print, Inc.**

Mailing Address P.O. Box 1467

City  
Newington

State  
VA

Zip Code  
22122

Purpose of Disbursement  
Independent Expenditure - Print 4 Color Door Hangers

004

Category/  
Type

Candidate Name

**Vogel, Jill, , ,**

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			31			2017			

FEC Identification Number

C [REDACTED]

**Transaction ID : 76684432**

Amount of Each Disbursement this Period

[REDACTED] 173.87

Memo Item Independent Expenditure - Print 4 Color Door Hangers

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

[REDACTED] 521.63

[REDACTED]

**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"/> 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. Master Print, Inc.</b>		Date of Disbursement MM / DD / YYYY 10 / 31 / 2017	
Mailing Address P.O. Box 1467		FEC Identification Number C [REDACTED] <b>Transaction ID : 76684433</b>	
City Newington	State VA	Zip Code 22122	Amount of Each Disbursement this Period 173.87
Purpose of Disbursement Independent Expenditure - Print 4 Color Door Hangers		Category/ Type 004	Memo Item <input type="checkbox"/> Independent Expenditure - Print 4 Color Door Hangers
Candidate Name <b>Fairfax, Justin, , ,</b>			
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. Master Print, Inc.</b>		Date of Disbursement MM / DD / YYYY 10 / 31 / 2017	
Mailing Address P.O. Box 1467		FEC Identification Number C [REDACTED] <b>Transaction ID : 76684434</b>	
City Newington	State VA	Zip Code 22122	Amount of Each Disbursement this Period 173.77
Purpose of Disbursement Independent Expenditure - Print 4 Color Door Hangers		Category/ Type 004	Memo Item <input type="checkbox"/> Independent Expenditure - Print 4 Color Door Hangers
Candidate Name <b>Adams, John, , ,</b>			
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. Master Print, Inc.</b>		Date of Disbursement MM / DD / YYYY 10 / 31 / 2017	
Mailing Address P.O. Box 1467		FEC Identification Number C [REDACTED] <b>Transaction ID : 76684435</b>	
City Newington	State VA	Zip Code 22122	Amount of Each Disbursement this Period 173.77
Purpose of Disbursement Independent Expenditure - Print 4 Color Door Hangers		Category/ Type 004	Memo Item <input type="checkbox"/> Independent Expenditure - Print 4 Color Door Hangers
Candidate Name <b>Herring, Mark, R., ,</b>			
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).....▶	521.41
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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. Master Print, Inc.

Mailing Address P.O. Box 1467

City  
Newington

State  
VA

Zip Code  
22122

Purpose of Disbursement  
Independent Expenditure - Print 4 Color Postcards

004
Category/ Type

Candidate Name  
**Gillespie, Edward, , ,**

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		31		2017

FEC Identification Number

C
---

**Transaction ID : 76685297**

Amount of Each Disbursement this Period

4908.75
---------

Independent Expenditure - Print 4  
 Memo Item Color Postcards

Full Name (Last, First, Middle Initial)

### B. Master Print, Inc.

Mailing Address P.O. Box 1467

City  
Newington

State  
VA

Zip Code  
22122

Purpose of Disbursement  
Independent Expenditure - Print 4 Color Postcards

004
Category/ Type

Candidate Name  
**Vogel, Jill, , ,**

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		31		2017

FEC Identification Number

C
---

**Transaction ID : 76685298**

Amount of Each Disbursement this Period

4764.37
---------

Independent Expenditure - Print 4  
 Memo Item Color Postcards

Full Name (Last, First, Middle Initial)

### C. Master Print, Inc.

Mailing Address P.O. Box 1467

City  
Newington

State  
VA

Zip Code  
22122

Purpose of Disbursement  
Independent Expenditure - Print 4 Color Postcards

004
Category/ Type

Candidate Name  
**Adams, John, , ,**

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		31		2017

FEC Identification Number

C
---

**Transaction ID : 76685299**

Amount of Each Disbursement this Period

4764.37
---------

Independent Expenditure - Print 4  
 Memo Item Color Postcards

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

14437.49
----------

**TOTAL** This Period (last page this line number only)..... ▶

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**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"/> 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. Prolist Inc.**

Mailing Address 4510 Buckeystown Pike, Suite M

City  
Frederick

State  
MD

Zip Code  
21704-7539

Purpose of Disbursement  
Independent Expenditure - Postage

004

Candidate Name

**Gillespie, Edward, , ,**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		31		2017

FEC Identification Number

C [REDACTED]

**Transaction ID : 76685351**

Amount of Each Disbursement this Period

[REDACTED] 50990.35

Independent Expenditure - Postage

Memo Item

Full Name (Last, First, Middle Initial)

**B. Prolist Inc.**

Mailing Address 4510 Buckeystown Pike, Suite M

City  
Frederick

State  
MD

Zip Code  
21704-7539

Purpose of Disbursement  
Independent Expenditure - Postage

004

Candidate Name

**Vogel, Jill, , ,**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		31		2017

FEC Identification Number

C [REDACTED]

**Transaction ID : 76685352**

Amount of Each Disbursement this Period

[REDACTED] 49490.64

Independent Expenditure - Postage

Memo Item

Full Name (Last, First, Middle Initial)

**C. Prolist Inc.**

Mailing Address 4510 Buckeystown Pike, Suite M

City  
Frederick

State  
MD

Zip Code  
21704-7539

Purpose of Disbursement  
Independent Expenditure - Postage

004

Candidate Name

**Adams, John, , ,**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		31		2017

FEC Identification Number

C [REDACTED]

**Transaction ID : 76685353**

Amount of Each Disbursement this Period

[REDACTED] 49490.64

Independent Expenditure - Postage

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

[REDACTED] 149971.63

[REDACTED]

**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"/> 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. Prolist Inc.**

Mailing Address 4510 Buckeystown Pike, Suite M

City Frederick State MD Zip Code 21704-7539

Purpose of Disbursement  
Independent Expenditure - Postcards

**004**  
Category/  
Type

Candidate Name  
**Gillespie, Edward, , ,**

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

/  /

FEC Identification Number

**C**  
**Transaction ID : 76685355**  
Amount of Each Disbursement this Period

Memo Item Independent Expenditure - Postcards

Full Name (Last, First, Middle Initial)

**B. Prolist Inc.**

Mailing Address 4510 Buckeystown Pike, Suite M

City Frederick State MD Zip Code 21704-7539

Purpose of Disbursement  
Independent Expenditure - Postcards

**004**  
Category/  
Type

Candidate Name  
**Vogel, Jill, , ,**

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

/  /

FEC Identification Number

**C**  
**Transaction ID : 76685356**  
Amount of Each Disbursement this Period

Memo Item Independent Expenditure - Postcards

Full Name (Last, First, Middle Initial)

**C. Prolist Inc.**

Mailing Address 4510 Buckeystown Pike, Suite M

City Frederick State MD Zip Code 21704-7539

Purpose of Disbursement  
Independent Expenditure - Postcards

**004**  
Category/  
Type

Candidate Name  
**Adams, John, , ,**

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

/  /

FEC Identification Number

**C**  
**Transaction ID : 76685357**  
Amount of Each Disbursement this Period

Memo Item Independent Expenditure - Postcards

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶