

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 852 OF 959

(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

**A. SAMPERI, ROBERT, , MR,**

Mailing Address 22 ALDEN CT

City  
MILFORDState  
CTZip Code  
06460-4509FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (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		31		2019

Transaction ID : 81327172

Amount of Each Receipt this Period

0.00

☒ Memo ItemADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PADDOCK, JR, WILLIAM, , MR, JR**

Mailing Address 501 WASHINGTON HARBOR RD

City  
SEQUIMState  
WAZip Code  
98382-9302FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (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		31		2019

Transaction ID : 81327173

Amount of Each Receipt this Period

0.00

☒ Memo ItemADDING EMPLOYER AND OCCUPATION  
INFORMATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BURKE, DONALD, , MR,**

Mailing Address 2002 DUMONT RD

City  
LUTHERVILLE TIMONIUMState  
MDZip Code  
21093-4408FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
LPL FINANCIALOccupation (for Individual)  
FINANCIAL ADVISOR

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		2019

Transaction ID : 81327174

Amount of Each Receipt this Period

0.00

☒ Memo ItemADDING EMPLOYER AND OCCUPATION  
INFORMATION

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

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

0.00