

# 24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 1 OF 12  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>National Rifle Association of America Political Victory Fund</b>			<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00053553       </div>	
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">           M M / D D / Y Y Y Y Y Y         </div>				
Full Name (Last, First, Middle Initial) of Payee <b>OnMessage, Inc.</b>			Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">           M M / D D / Y Y Y Y Y Y         </div>	
Mailing Address 2130 Priest Bridge Drive, #11			Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">           128260.65         </div>	
City Crofton	State MD	Zip Code 21114	Transaction ID : 48097569	
Purpose of Expenditure Radio Advertising		Category/ Type 004	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate Supported or Opposed by Expenditure: Mitt Romney			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">           0.00         </div>			2012 <input type="checkbox"/> Other (specify)	
Full Name (Last, First, Middle Initial) of Payee <b>OnMessage, Inc.</b>			Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">           M M / D D / Y Y Y Y Y Y         </div>	
Mailing Address 2130 Priest Bridge Drive, #11			Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">           1750.00         </div>	
City Crofton	State MD	Zip Code 21114	Transaction ID : 48097571	
Purpose of Expenditure Radio Ad Production		Category/ Type 004	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate Supported or Opposed by Expenditure: Mitt Romney			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">           0.00         </div>			2012 <input type="checkbox"/> Other (specify)	
(a) SUBTOTAL of Itemized Independent Expenditures.....			<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">           130010.65         </div>	
(b) SUBTOTAL of Unitemized Independent Expenditures .....			<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">           0.00         </div>	
(c) TOTAL Independent Expenditures.....			<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">           130010.65         </div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Signature <u>Mary Rose Adkins</u>		[Electronically Filed]		Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">           M M / D D / Y Y Y Y Y Y         </div>

# 24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

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FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

FEC IDENTIFICATION NUMBER ▼

C C00053553

Check If ☐ 24-hour report ☒ 48-hour report ☒ New report ☐ Amends report filed on

M M / D D / Y Y Y Y Y Y

Full Name (Last, First, Middle Initial) of Payee

OnMessage, Inc.

Date

M M / D D / Y Y Y Y Y Y  
10 / 15 / 2012

Mailing Address 2130 Priest Bridge Drive, #11

Amount

15207.88

City State Zip Code  
Crofton MD 21114

Transaction ID : 48103781

Purpose of Expenditure  
TV Ad Production CostCategory/  
Type 004Office Sought: ☐ House ☐ Senate ☒ President  
State: \_\_\_\_\_ District: \_\_\_\_\_

Name of Federal Candidate Supported or Opposed by Expenditure:

Barack Obama

Check One: ☐ Support ☒ OpposeCalendar Year-To-Date Per Election  
for Office Sought

0.00

Disbursement For: ☐ Primary ☒ General  
2012 ☐ Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee

OnMessage, Inc.

Date

M M / D D / Y Y Y Y Y Y  
10 / 15 / 2012

Mailing Address 2130 Priest Bridge Drive, #11

Amount

4978.50

City State Zip Code  
Crofton MD 21114

Transaction ID : 48104184

Purpose of Expenditure  
TV Ad Production CostCategory/  
Type 004Office Sought: ☐ House ☐ Senate ☒ President  
State: \_\_\_\_\_ District: \_\_\_\_\_

Name of Federal Candidate Supported or Opposed by Expenditure:

Barack Obama

Check One: ☐ Support ☒ OpposeCalendar Year-To-Date Per Election  
for Office Sought

0.00

Disbursement For: ☐ Primary ☒ General  
2012 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶

20186.38

(b) SUBTOTAL of Unitemized Independent Expenditures .....▶

(c) TOTAL Independent Expenditures.....▶

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Mary Rose Adkins

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y  
10 / 17 / 2012

Signature

# 24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 3 OF 12  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

FEC IDENTIFICATION NUMBER ▼

C

C00053553

Check If ☐ 24-hour report ☒ 48-hour report ☒ New report ☐ Amends report filed on

M M /

D D /

Y Y Y Y Y Y

Full Name (Last, First, Middle Initial) of Payee

OnMessage, Inc.

Date

M M /

D D /

Y Y Y Y Y Y

Mailing Address 2130 Priest Bridge Drive, #11

Amount

City

State

Zip Code

Crofton

MD

21114

1659.50

Transaction ID : 48109628

Purpose of Expenditure  
TV Ad Production CostCategory/  
Type

004

Office Sought:

☐ House

State:

☐ Senate

District:

☒ President

Check One:

☒ Support☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

Mitt Romney

Calendar Year-To-Date Per Election  
for Office Sought

0.00

Disbursement For: ☐ Primary☒ General☐ Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee

OnMessage, Inc.

Date

M M /

D D /

Y Y Y Y Y Y

Mailing Address 2130 Priest Bridge Drive, #11

Amount

City

State

Zip Code

Crofton

MD

21114

1239990.40

Transaction ID : 48136404

Purpose of Expenditure  
TV AdvertisingCategory/  
Type

004

Office Sought:

☐ House

State:

☐ Senate

District:

☒ President

Check One:

☐ Support☒ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

Barack Obama

Calendar Year-To-Date Per Election  
for Office Sought

0.00

Disbursement For: ☐ Primary☒ General☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶

1241649.90

(b) SUBTOTAL of Unitemized Independent Expenditures .....▶

(c) TOTAL Independent Expenditures.....▶

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Mary Rose Adkins

[Electronically Filed]

Date

M M /

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Y Y Y Y Y Y

Signature

# 24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 4 OF 12  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

FEC IDENTIFICATION NUMBER ▼

C C00053553

Check If ☐ 24-hour report ☒ 48-hour report ☒ New report ☐ Amends report filed on

MM / DD / YYYY  
 MM / DD / YYYY  
 MM / DD / YYYY

Full Name (Last, First, Middle Initial) of Payee

OnMessage, Inc.

Date

MM / DD / YYYY  
 10 / 15 / 2012

Mailing Address 2130 Priest Bridge Drive, #11

Amount

265261.28

City

Crofton

State

MD

Zip Code

21114

Transaction ID : 48136405

Purpose of Expenditure  
TV AdvertisingCategory/  
Type

004

Office Sought:

☐ House

State:

☐ Senate

District:

☒ President

Check One:

☒ Support☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

Mitt Romney

Calendar Year-To-Date Per Election  
for Office Sought

MM / DD / YYYY  
 0.00

Disbursement For:

☐ Primary☒ General2012 ☐ Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee

Broadnet Teleservices, LLC

Date

MM / DD / YYYY  
 10 / 15 / 2012

Mailing Address 1745 Shea Center Drive, Suite 320

Amount

666.78

City

Highlands Ranch

State

CO

Zip Code

80129

Transaction ID : 48136410

Purpose of Expenditure  
Phone BankCategory/  
Type

004

Office Sought:

☐ House

State: ND

☒ Senate

District:

☐ President

Check One:

☒ Support☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

Mr. Richard Berg

Calendar Year-To-Date Per Election  
for Office Sought

MM / DD / YYYY  
 0.00

Disbursement For:

☐ Primary☒ General2012 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶

265928.06

(b) SUBTOTAL of Unitemized Independent Expenditures .....▶

(c) TOTAL Independent Expenditures.....▶

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Mary Rose Adkins

[Electronically Filed]

Date

MM / DD / YYYY  
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Signature

# 24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

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FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

FEC IDENTIFICATION NUMBER ▼

C C00053553

Check If ☐ 24-hour report ☒ 48-hour report ☒ New report ☐ Amends report filed on

M M M / D D D / Y Y Y Y Y Y

Full Name (Last, First, Middle Initial) of Payee

Broadnet Teleservices, LLC

Date

M M M / D D D / Y Y Y Y Y Y  
10 / 15 / 2012

Mailing Address 1745 Shea Center Drive, Suite 320

Amount

1235.70

City

Highlands Ranch

State

CO

Zip Code

80129

Transaction ID : 48136412

Purpose of Expenditure  
Phone BankCategory/  
Type 004

Office Sought:

☐ House

State: NV

☒ Senate

District:

☐ President

Check One:

☐ Support☒ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

Ms. Shelley Berkley

Calendar Year-To-Date Per Election  
for Office Sought

0.00

Disbursement For: ☐ Primary☒ General2012 ☐ Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee

Broadnet Teleservices, LLC

Date

M M M / D D D / Y Y Y Y Y Y  
10 / 15 / 2012

Mailing Address 1745 Shea Center Drive, Suite 320

Amount

6708.53

City

Highlands Ranch

State

CO

Zip Code

80129

Transaction ID : 48136413

Purpose of Expenditure  
Phone BankCategory/  
Type 004

Office Sought:

☐ House

State: MO

☒ Senate

District:

☐ President

Check One:

☐ Support☒ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

Claire McCaskill

Calendar Year-To-Date Per Election  
for Office Sought

0.00

Disbursement For: ☐ Primary☒ General2012 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶

7944.23

(b) SUBTOTAL of Unitemized Independent Expenditures .....▶

(c) TOTAL Independent Expenditures.....▶

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Mary Rose Adkins

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y  
10 / 17 / 2012

Signature

# 24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 6 OF 12  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

FEC IDENTIFICATION NUMBER ▼

C C00053553

Check If ☐ 24-hour report ☒ 48-hour report ☒ New report ☐ Amends report filed on

MM / DD / YYYY  
 / /

Full Name (Last, First, Middle Initial) of Payee

Broadnet Teleservices, LLC

Date

MM / DD / YYYY  
10 / 15 / 2012

Mailing Address 1745 Shea Center Drive, Suite 320

Amount

10713.48

City

Highlands Ranch

State

CO

Zip Code

80129

Transaction ID : 48136414

Purpose of Expenditure  
Phone BankCategory/  
Type

004

Office Sought:

☐ House

State: OH

☒ Senate

District:

☐ President

Check One:

☐ Support☒ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

Sen. Sherrod Brown

Calendar Year-To-Date Per Election  
for Office Sought

0.00

Disbursement For: ☐ Primary ☒ General  
2012 ☐ Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee

Broadnet Teleservices, LLC

Date

MM / DD / YYYY  
10 / 15 / 2012

Mailing Address 1745 Shea Center Drive, Suite 320

Amount

5025.35

City

Highlands Ranch

State

CO

Zip Code

80129

Transaction ID : 48136415

Purpose of Expenditure  
Phone BankCategory/  
Type

004

Office Sought:

☐ House

State: VA

☒ Senate

District:

☐ President

Check One:

☐ Support☒ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

Mr. Timothy Kaine

Calendar Year-To-Date Per Election  
for Office Sought

0.00

Disbursement For: ☐ Primary ☒ General  
2012 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶

15738.83

(b) SUBTOTAL of Unitemized Independent Expenditures.....▶

(c) TOTAL Independent Expenditures.....▶

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

Mary Rose Adkins

[Electronically Filed]

Date

MM / DD / YYYY  
10 / 17 / 2012

Signature

# 24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 7 OF 12  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

FEC IDENTIFICATION NUMBER ▼

C C00053553

Check If ☐ 24-hour report ☒ 48-hour report ☒ New report ☐ Amends report filed on

MM / DD / YYYY  
 MM / DD / YYYY  
 MM / DD / YYYY

Full Name (Last, First, Middle Initial) of Payee

Broadnet Teleservices, LLC

Date

MM / DD / YYYY  
 10 / 15 / 2012

Mailing Address 1745 Shea Center Drive, Suite 320

Amount

5714.24

City

Highlands Ranch

State

CO

Zip Code

80129

Transaction ID : 48136421

Purpose of Expenditure  
Phone BankCategory/  
Type

004

Office Sought:

☐ House

State: WI

☒ Senate

District:

☐ President

Check One:

☐ Support☒ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

Ms. Tammy Baldwin

Calendar Year-To-Date Per Election  
for Office Sought

MM / DD / YYYY  
 0.00

Disbursement For: ☐ Primary ☒ General  
2012 ☐ Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee

Prolist Inc.

Date

MM / DD / YYYY  
 10 / 15 / 2012

Mailing Address 8341 Beechcraft Avenue

Amount

103.86

City

Gaithersburg

State

MD

Zip Code

20879-1509

Transaction ID : 48136424

Purpose of Expenditure  
Phone Data MatchingCategory/  
Type

004

Office Sought:

☐ House

State: ND

☒ Senate

District:

☐ President

Check One:

☒ Support☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

Mr. Richard Berg

Calendar Year-To-Date Per Election  
for Office Sought

MM / DD / YYYY  
 0.00

Disbursement For: ☐ Primary ☒ General  
2012 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶

5818.10

(b) SUBTOTAL of Unitemized Independent Expenditures .....▶

(c) TOTAL Independent Expenditures.....▶

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

Mary Rose Adkins

[Electronically Filed]

Date

MM / DD / YYYY  
 10 / 17 / 2012

Signature

# 24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 8 OF 12  
FOR SE OF FORM 24/48

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

Full Name (Last, First, Middle Initial) of Payee <b>Prolist Inc.</b>		Date MM / DD / YYYY <b>10 / 15 / 2012</b>	
Mailing Address <b>8341 Beechcraft Avenue</b>		Amount <b>214.16</b>	
City <b>Gaithersburg</b>	State <b>MD</b>	Zip Code <b>20879-1509</b>	Transaction ID : <b>48136425</b>
Purpose of Expenditure Phone Data Matching		Category/ Type <b>004</b>	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: <b>NV</b> District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: <b>Ms. Shelley Berkley</b>		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <b>0.00</b>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee <b>Prolist Inc.</b>		Date MM / DD / YYYY <b>10 / 15 / 2012</b>	
Mailing Address <b>8341 Beechcraft Avenue</b>		Amount <b>1077.62</b>	
City <b>Gaithersburg</b>	State <b>MD</b>	Zip Code <b>20879-1509</b>	Transaction ID : <b>48136426</b>
Purpose of Expenditure Phone Data Matching		Category/ Type <b>004</b>	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: <b>MO</b> District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: <b>Claire McCaskill</b>		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <b>0.00</b>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	<b>1291.78</b>
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures.....	

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Mary Rose Adkins

[Electronically Filed]

Signature

Date

MM / DD / YYYY  
**10 / 17 / 2012**



# 24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

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FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

FEC IDENTIFICATION NUMBER ▼

C C00053553

Check If ☐ 24-hour report ☒ 48-hour report ☒ New report ☐ Amends report filed on

MM / DD / YYYY  
 MM / DD / YYYY  
 MM / DD / YYYY

Full Name (Last, First, Middle Initial) of Payee

Prolist Inc.

Date

MM / DD / YYYY  
 10 / 15 / 2012

Mailing Address 8341 Beechcraft Avenue

Amount

1560.78

City

Gaithersburg

State

MD

Zip Code

20879-1509

Transaction ID : 48136427

Purpose of Expenditure  
Phone Data MatchingCategory/  
Type

004

Office Sought:

☐ House

State: OH

☒ Senate

District:

☐ President

Check One:

☐ Support☒ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

Sen. Sherrod Brown

Calendar Year-To-Date Per Election  
for Office Sought

0.00

Disbursement For: ☐ Primary ☒ General  
 2012 ☐ Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee

Prolist Inc.

Date

MM / DD / YYYY  
 10 / 15 / 2012

Mailing Address 8341 Beechcraft Avenue

Amount

840.11

City

Gaithersburg

State

MD

Zip Code

20879-1509

Transaction ID : 48136428

Purpose of Expenditure  
Phone Data MatchingCategory/  
Type

004

Office Sought:

☐ House

State: VA

☒ Senate

District:

☐ President

Check One:

☐ Support☒ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

Mr. Timothy Kaine

Calendar Year-To-Date Per Election  
for Office Sought

0.00

Disbursement For: ☐ Primary ☒ General  
 2012 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶

2400.89

(b) SUBTOTAL of Unitemized Independent Expenditures .....▶

(c) TOTAL Independent Expenditures.....▶

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

Mary Rose Adkins

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Signature

# 24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

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NAME OF COMMITTEE (In Full) <b>National Rifle Association of America Political Victory Fund</b>		<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00053553         </div>	
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 10px;">             M M / D D / Y Y Y Y Y Y           </div>			
Full Name (Last, First, Middle Initial) of Payee <b>Prolist Inc.</b>		Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-right: 10px;">             M M / D D / Y Y Y Y Y Y           </div> <div style="display: inline-block; border: 1px solid black; padding: 2px;">             10 / 15 / 2012           </div>	
Mailing Address <b>8341 Beechcraft Avenue</b>		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; width: 100%;">             927.42           </div>	
City <b>Gaithersburg</b>	State <b>MD</b>	Zip Code <b>20879-1509</b>	Transaction ID : <b>48136429</b>
Purpose of Expenditure <b>Phone Data Matching</b>		Category/ Type <b>004</b>	Office Sought: <input type="checkbox"/> House State: <b>WI</b> <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: <b>Ms. Tammy Baldwin</b>		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px; width: 100%;">0.00</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶ _____	
Full Name (Last, First, Middle Initial) of Payee <b>Prolist Inc.</b>		Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-right: 10px;">             M M / D D / Y Y Y Y Y Y           </div> <div style="display: inline-block; border: 1px solid black; padding: 2px;">             10 / 15 / 2012           </div>	
Mailing Address <b>8341 Beechcraft Avenue</b>		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; width: 100%;">             1336.66           </div>	
City <b>Gaithersburg</b>	State <b>MD</b>	Zip Code <b>20879-1509</b>	Transaction ID : <b>48136431</b>
Purpose of Expenditure <b>Postage</b>		Category/ Type <b>004</b>	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: <b>Mitt Romney</b>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px; width: 100%;">0.00</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶ _____	
(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....▶		<div style="display: inline-block; border: 1px solid black; padding: 2px; width: 100%;">             2264.08           </div>	
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....▶		<div style="display: inline-block; border: 1px solid black; padding: 2px; width: 100%;">             _____           </div>	
(c) <b>TOTAL</b> Independent Expenditures.....▶		<div style="display: inline-block; border: 1px solid black; padding: 2px; width: 100%;">             _____           </div>	
<p>Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.</p> <div style="display: flex; justify-content: space-between; align-items: flex-end; margin-top: 20px;"> <div style="text-align: center;"> <p><i>Mary Rose Adkins</i></p> <p>Signature</p> </div> <div style="text-align: center;"> <p><i>[Electronically Filed]</i></p> </div> <div style="text-align: center;"> <p>Date</p> <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 10px;">             M M / D D / Y Y Y Y Y Y           </div> <div style="display: inline-block; border: 1px solid black; padding: 2px;">             10 / 17 / 2012           </div> </div> </div>			

# 24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 11 OF 12  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

FEC IDENTIFICATION NUMBER ▼

C C00053553

Check If ☐ 24-hour report ☒ 48-hour report ☒ New report ☐ Amends report filed on

MM / DD / YYYY  
 MM / DD / YYYY  
 MM / DD / YYYY

Full Name (Last, First, Middle Initial) of Payee

Prolist Inc.

Date

MM / DD / YYYY  
 10 / 15 / 2012

Mailing Address 8341 Beechcraft Avenue

Amount

902.90

Transaction ID : 48136432

Purpose of Expenditure  
PostcardsCategory/  
Type 004

Office Sought:

☐ House

State:

☐ Senate

District:

☒ President

Check One:

☒ Support☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

Mitt Romney

Calendar Year-To-Date Per Election  
for Office Sought

0.00

Disbursement For: ☐ Primary ☒ General  
 2012 ☐ Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee

Prolist Inc.

Date

MM / DD / YYYY  
 10 / 15 / 2012

Mailing Address 8341 Beechcraft Avenue

Amount

2150.27

Transaction ID : 48136436

Purpose of Expenditure  
PostageCategory/  
Type 004

Office Sought:

☐ House

State:

☐ Senate

District:

☒ President

Check One:

☒ Support☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

Mitt Romney

Calendar Year-To-Date Per Election  
for Office Sought

0.00

Disbursement For: ☐ Primary ☒ General  
 2012 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶

3053.17

(b) SUBTOTAL of Unitemized Independent Expenditures .....▶

(c) TOTAL Independent Expenditures.....▶

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

Mary Rose Adkins

[Electronically Filed]

Date

MM / DD / YYYY  
 10 / 17 / 2012

Signature

# 24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 12 OF 12  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

FEC IDENTIFICATION NUMBER ▼

C C00053553

Check If ☐ 24-hour report ☒ 48-hour report ☒ New report ☐ Amends report filed on

MM / DD / YYYY  
 MM / DD / YYYY  
 MM / DD / YYYY

Full Name (Last, First, Middle Initial) of Payee

Prolist Inc.

Date

MM / DD / YYYY  
 10 / 15 / 2012

Mailing Address 8341 Beechcraft Avenue

Amount

1334.16

City

Gaithersburg

State

MD

Zip Code

20879-1509

Transaction ID : 48136437

Purpose of Expenditure  
PostcardsCategory/  
Type

004

Office Sought:

☐ House

State:

☐ Senate

District:

☒ President

Check One:

☒ Support☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

Mitt Romney

Calendar Year-To-Date Per Election  
for Office Sought

0.00

Disbursement For: ☐ Primary☒ General☐ Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee

Date

MM / DD / YYYY  
 MM / DD / YYYY

Mailing Address

Amount

MM / DD / YYYY  
 MM / DD / YYYY

Purpose of Expenditure

Category/  
Type

Office Sought:

☐ House

State:

☐ Senate

District:

☐ President

Check One:

☐ Support☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

Calendar Year-To-Date Per Election  
for Office Sought

MM / DD / YYYY  
 MM / DD / YYYY

Disbursement For: ☐ Primary☐ General☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶

1334.16

(b) SUBTOTAL of Unitemized Independent Expenditures .....▶

MM / DD / YYYY  
 MM / DD / YYYY

(c) TOTAL Independent Expenditures.....▶

1697620.23

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

Mary Rose Adkins

[Electronically Filed]

Date

MM / DD / YYYY  
 10 / 17 / 2012

Signature