## 24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

SCHEDULE E)	PAGE 1 OF 3 FOR SE OF FORM 24/48	
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼	
Right to Life of Michigan Political Action Committee	C C00101212	
Check If 24-hour report  48-hour report  New report  Amends report filed on	M = M / D = D / Y = Y = Y	
Full Name (Last, First, Middle Initial) of Payee  Compass Outreach Media	e	
Mailing Address 401 Hall Street, SW	10 16 2012	
Suite 309	ount	
City State Zip Code	1075.00	
Grand Rapids MI 49503	1675.00	
Purpose of Expenditure Radio Ad Production Category/ Type 004	saction ID : SE.11226  ught: House State: Senate District:	
Name of Federal Candidate Supported or Opposed by Expenditure:	President ———	
MITT ROMNEY Check Or	ne: Support Oppose	
Calendar Year-To-Date Per Election for Office Sought Disbursen	nent For: Primary General  Other (specify)	
Full Name (Last, First, Middle Initial) of Payee RLM News	e 09 21 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
Mailing Address 2340 Porter, SW	21 2012	
Am	ount	
City State Zip Code Grand Rapids MI 49509	192.00	
Purpose of Expenditure Newspaper Ad  Category/ Type  Office Sor		
Name of Federal Candidate Supported or Opposed by Expenditure:  Check Or	President  De: Support Oppose	
WITT ROWINET		
Calendar Year-To-Date Per Election 192.00 Disbursen 2012	nent For: Primary General  Other (specify)	
(a) SUBTOTAL of Itemized Independent Expenditures	1867.00	
(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.		
Mrs. Susan Colligan  [Electronically Filed] Date  Manual Date  [Including the content of the con	28 2012	
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## 24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

SCHEDULE E)	PAGE 2 OF 3 FOR SE OF FORM 24/48
NAME OF COMMITTE (In Full) Right to Life of Michigan Political Action Committee	FEC IDENTIFICATION NUMBER ▼  C C00101212
Check If 24-hour report X 48-hour report New report Amends report filed	d on May / Dab / Yayayay
Full Name (Last, First, Middle Initial) of Payee TOLLFREEZONE.COM  Mailing Address POBOX 26	Date 10 17 2012
City State Zip Code Somerset WI 54025	Amount 882.26
Purpose of Expenditure Get-out-the-vote calls  Category/ Type  Office Of	ce Sought: House State: Senate District:
WITTROWNE	President  Cock One: Support Oppose
for Office Sought 2749.26	oursement For: Primary General Other (specify)
Full Name (Last, First, Middle Initial) of Payee Western American Mailers  Mailing Address 5510 - 33rd, SE	Date 10 17 / Y 2012
	Amount
City State Zip Code Grand Rapids MI 49512  Purpose of Expenditure Category/ Confinence Office	Transaction ID : SE.11228 ce Sought: House State:
Purpose of Expenditure Postage, Cong District mailer  Category/ Type  004  Name of Federal Candidate Supported or Opposed by Expenditure:	Senate District:  President
MITT ROMNEY Che	eck One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought 10603.58	oursement For: Primary General  Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	3659.55
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not m with, or at the request or suggestion of, any candidate or authorized committee or agent of either party committee) any political party committee or its agent.	
Mrs. Susan Colligan  [Electronically Filed]  Signature	11

## 24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)	PAGE 3 OF 3 FOR SE OF FORM 24/48	
NAME OF COMMITTE (In Full) Right to Life of Michigan Political Action Committee	FEC IDENTIFICATION NUMBER ▼	
	C C00101212	
Check If 24-hour report	t filed on Man / Dab / Yayayay	
Full Name (Last, First, Middle Initial) of Payee Wolverine Printing	Date	
Mailing Address 315 Grandville Ave, SW	10 17 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
City State Zip Code	Amount	
Grand Rapids MI 49503	5077.03 Transaction ID : SE.11229	
Purpose of Expenditure Print Card Mailer  Category/ Type  004	Office Sought: House State: Senate District:	
Name of Federal Candidate Supported or Opposed by Expenditure:	President ———	
MITT ROMNEY	Check One: Support Oppose	
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: Primary General  2012 Other (specify)	
Full Name (Last, First, Middle Initial) of Payee	Date	
Mailing Addraga	M = M / D = D / Y = Y = Y	
Mailing Address	Amount	
City State Zip Code		
Purpose of Expenditure Category/ Type	Office Sought: House State: Senate District:	
Name of Federal Candidate Supported or Opposed by Expenditure:	President	
	Check One: Support Oppose	
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: Primary General  Other (specify)	
(a) SUBTOTAL of Itemized Independent Expenditures	5077.03	
	7 7 7	
(b) SUBTOTAL of Unitemized Independent Expenditures	·	
(c) TOTAL Independent Expenditures	10603.58	
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.		
Mrs. Susan Colligan [Electronically Filed] Date	11 28 2012	
Signature		