

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines
TEXAS RIGHT TO LIFE POLITICAL ACTION C

ADDRESS (number and street) 6776 SOUTHWEST FREEWAY SUITE 430
 Check if different than previously reported. (ACC)
HOUSTON TX 77074

2. **FEC IDENTIFICATION NUMBER** C00419242
3. IS THIS REPORT NEW (N) **OR** AMENDED (A)

4. **TYPE OF REPORT** (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report(Q1)
 July 15 Quarterly Report(Q2)
 October 15 Quarterly Report(Q3)
 January 31 Quarterly Report(YE)
 July 31 Mid-Year Report(Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day **PRE-Election** Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12G)
Election on _____ in the State of _____
(d) 30-Day **Post -Election** Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on 11 07 2006 in the State of TX

5. Covering Period 10 19 2006 through 11 27 2006

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.
Type or Print Name of Treasurer Mrs. Teresa Doyle
Signature of Treasurer Electronically Filed by Mrs. Teresa Doyle Date 12 07 2006

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name
TEXAS RIGHT TO LIFE POLITICAL ACTION C

Report Covering the Period: From:

M	M
1	0

D	D
1	9

Y	Y	Y	Y
2	0	0	6

 To:

M	M
1	1

D	D
2	7

Y	Y	Y	Y
2	0	0	6

	COLUMN A This Period	COLUMN B Calendar Year-to-Date										
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>	Y	Y	Y	Y	2	0	0	6	<table border="1" style="width: 100%; height: 20px;"><tr><td> </td></tr></table>		<table border="1" style="width: 100%; height: 20px;"><tr><td align="right">0.00</td></tr></table>	0.00
Y	Y	Y	Y									
2	0	0	6									
0.00												
(b) Cash on Hand at Beginning of Reporting Period	<table border="1" style="width: 100%; height: 20px;"><tr><td align="right">589.69</td></tr></table>	589.69										
589.69												
(c) Total Receipts (from Line 19)	<table border="1" style="width: 100%; height: 20px;"><tr><td align="right">0.00</td></tr></table>	0.00	<table border="1" style="width: 100%; height: 20px;"><tr><td align="right">3150.00</td></tr></table>	3150.00								
0.00												
3150.00												
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	<table border="1" style="width: 100%; height: 20px;"><tr><td align="right">589.69</td></tr></table>	589.69	<table border="1" style="width: 100%; height: 20px;"><tr><td align="right">3150.00</td></tr></table>	3150.00								
589.69												
3150.00												
7. Total Disbursements (from Line 31)	<table border="1" style="width: 100%; height: 20px;"><tr><td align="right">258.36</td></tr></table>	258.36	<table border="1" style="width: 100%; height: 20px;"><tr><td align="right">2818.67</td></tr></table>	2818.67								
258.36												
2818.67												
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	<table border="1" style="width: 100%; height: 20px;"><tr><td align="right">331.33</td></tr></table>	331.33	<table border="1" style="width: 100%; height: 20px;"><tr><td align="right">331.33</td></tr></table>	331.33								
331.33												
331.33												
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	<table border="1" style="width: 100%; height: 20px;"><tr><td align="right">0.00</td></tr></table>	0.00										
0.00												
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	<table border="1" style="width: 100%; height: 20px;"><tr><td align="right">0.00</td></tr></table>	0.00										
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
TEXAS RIGHT TO LIFE POLITICAL ACTION C

Report Covering the Period: From:

M	M
1	0

D	D
1	9

Y	Y	Y	Y
2	0	0	6

 To:

M	M
1	1

D	D
2	7

Y	Y	Y	Y
2	0	0	6

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	0.00	250.00
(i) Itemized (use Schedule A)	0.00	0.00
(ii) Unitemized	0.00	250.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b) and (c)) (Carry Totals to Line 33, page 5)	0.00	250.00
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)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	2900.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	0.00	3150.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	0.00	3150.00

DETAILED SUMMARY PAGE

of Disbursements

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Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	0.00	216.20
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	0.00	216.20
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditure (use Schedule E)	258.36	2602.47
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	258.36	2818.67
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	258.36	2818.67

DETAILED SUMMARY PAGE
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3	0.00	250.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	0.00	250.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	216.20
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	216.20

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) TEXAS RIGHT TO LIFE POLITICAL ACTION C	FEC IDENTIFICATION NUMBER ▼ C C00419242
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Advanced Litho Printing

Mailing Address
226 9th Avenue South

City Great Falls	State MT	Zip Code 59405
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Purpose of Expenditure Printing of Voter Guide with candidate	Category/Type 004
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Name of Federal Candidate supported or Opposed by expenditure:
COMMITTEE TO RE-ELECT RON PAUL

Calendar Year-To-Date Per Election for Office Sought	392.73
--	--------

Date
MM / DD / YYYY
11 / 10 / 2006

Amount
9.85

Transaction ID: SE24.4372

Office Sought: House State: TX
 Senate District: 14
 Presidential

Check One: Support Oppose

Disbursement For: Primary General 2006
 Other (specify) : _____

Full Name (Last, First, Middle, Initial) of Payee
Advanced Litho Printing

Mailing Address
226 9th Avenue South

City Great Falls	State MT	Zip Code 59405
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Purpose of Expenditure Printing of Voter Guide with candidate	Category/Type 004
--	----------------------

Name of Federal Candidate supported or Opposed by expenditure:
FRIENDS OF SAM JOHNSON

Calendar Year-To-Date Per Election for Office Sought	392.74
--	--------

Date
MM / DD / YYYY
11 / 10 / 2006

Amount
9.85

Transaction ID: SE24.4377

Office Sought: House State: TX
 Senate District: 03
 Presidential

Check One: Support Oppose

Disbursement For: Primary General 2006
 Other (specify) : _____

(a) SUBTOTAL of Itemized Independent Expenditures	19.70
(b) SUBTOTAL of Unitemized Independent Expenditures	224.66
(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.

Signature _____ Date MM / DD / YYYY
12 / 07 / 2006

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) TEXAS RIGHT TO LIFE POLITICAL ACTION C	FEC IDENTIFICATION NUMBER C C00419242
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Advanced Litho Printing

Date
M M / D D / Y Y Y Y
1 1 / 1 0 / 2 0 0 6

Mailing Address
226 9th Avenue South

Amount
9.85

City State Zip Code
Great Falls MT 59405

Transaction ID: SE24.4379

Purpose of Expenditure
Printing of Voter Guide with candidate
Category/Type 004

Office Sought: House State: TX
 Senate District: 15
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
PAUL B. HARING

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
392.70

Disbursement For: Primary General 2006
 Other (specify) : _____

Full Name (Last, First, Middle, Initial) of Payee
Buzzcraft Internet Marketing

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

Mailing Address
4518 Mount Vernon

Amount
0.83

City State Zip Code
Houston TX 77006

Transaction ID: SE24.4273

Purpose of Expenditure
Email with Voter Guide listing candidate
Category/Type 004

Office Sought: House State: TX
 Senate District: 03
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
FRIENDS OF SAM JOHNSON

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
382.33

Disbursement For: Primary General 2006
 Other (specify) : _____

(a) SUBTOTAL of Itemized Independent Expenditures	10.68
(b) SUBTOTAL of Unitemized Independent Expenditures	224.66
(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.

Signature _____ Date M M / D D / Y Y Y Y
1 2 / 0 7 / 2 0 0 6

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) TEXAS RIGHT TO LIFE POLITICAL ACTION C	FEC IDENTIFICATION NUMBER C C00419242
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Buzzcraft Internet Marketing

Mailing Address
4518 Mount Vernon

City Houston	State TX	Zip Code 77006
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Purpose of Expenditure Email with Voter Guide listing candidate	Category/Type 004
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Name of Federal Candidate supported or Opposed by expenditure:
COMMITTEE TO RE-ELECT RON PAUL

Calendar Year-To-Date Per Election for Office Sought	382.32
--	--------

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

Amount
0.83

Transaction ID: SE24.4281

Office Sought: House State: TX
 Senate District: 14
 Presidential

Check One: Support Oppose

Disbursement For: Primary General 2006
 Other (specify) : _____

Full Name (Last, First, Middle, Initial) of Payee
Buzzcraft Internet Marketing

Mailing Address
4518 Mount Vernon

City Houston	State TX	Zip Code 77006
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Purpose of Expenditure Email with Voter Guide listing candidate	Category/Type 004
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Name of Federal Candidate supported or Opposed by expenditure:
PAUL B. HARING

Calendar Year-To-Date Per Election for Office Sought	382.30
--	--------

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

Amount
0.82

Transaction ID: SE24.4289

Office Sought: House State: TX
 Senate District: 15
 Presidential

Check One: Support Oppose

Disbursement For: Primary General 2006
 Other (specify) : _____

(a) SUBTOTAL of Itemized Independent Expenditures	1.65
(b) SUBTOTAL of Unitemized Independent Expenditures	224.66
(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.

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

Signature _____

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) TEXAS RIGHT TO LIFE POLITICAL ACTION C	FEC IDENTIFICATION NUMBER C C00419242
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

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

Mailing Address
1414 Castle Court #8

City Houston	State TX	Zip Code 77006
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Purpose of Expenditure Design for Voter Guide with candidate	Category/Type 004
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Name of Federal Candidate supported or Opposed by expenditure:
FRIENDS OF SAM JOHNSON

Calendar Year-To-Date Per Election for Office Sought	382.89
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Date
MM / DD / YYYY
11 / 06 / 2006

Amount
0.56

Transaction ID: SE24.4297

Office Sought: House State: TX
 Senate District: 03
 Presidential

Check One: Support Oppose

Disbursement For: Primary General 2006
 Other (specify) : _____

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

Mailing Address
1414 Castle Court #8

City Houston	State TX	Zip Code 77006
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Purpose of Expenditure Design for Voter Guide with candidate	Category/Type 004
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Name of Federal Candidate supported or Opposed by expenditure:
COMMITTEE TO RE-ELECT RON PAUL

Calendar Year-To-Date Per Election for Office Sought	382.88
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Date
MM / DD / YYYY
11 / 06 / 2006

Amount
0.56

Transaction ID: SE24.4304

Office Sought: House State: TX
 Senate District: 14
 Presidential

Check One: Support Oppose

Disbursement For: Primary General 2006
 Other (specify) : _____

(a) SUBTOTAL of Itemized Independent Expenditures	1.12
(b) SUBTOTAL of Unitemized Independent Expenditures	224.66
(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.

Signature _____ Date MM / DD / YYYY
12 / 07 / 2006

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) TEXAS RIGHT TO LIFE POLITICAL ACTION C		FEC IDENTIFICATION NUMBER C C00419242	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Tricia Gernand		Date M M / D D / Y Y Y Y 1 1 / 0 6 / 2 0 0 6	
Mailing Address 1414 Castle Court #8		Amount 0.55	
City State Zip Code Houston TX 77006		Transaction ID: SE24.4315	
Purpose of Expenditure Design for Voter Guide with candidate		Office Sought: <input checked="" type="checkbox"/> House State: TX <input type="checkbox"/> Senate District: 15 <input type="checkbox"/> Presidential	
Name of Federal Candidate supported or Opposed by expenditure: PAUL B. HARING		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 382.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2006 <input type="checkbox"/> Other (specify) : _____	
		Category/Type 004	

(a) SUBTOTAL of Itemized Independent Expenditures	0.55
(b) SUBTOTAL of Unitemized Independent Expenditures	224.66
(c) TOTAL Independent Expenditures	258.36
<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>	
Signature _____	Date M M / D D / Y Y Y Y 1 2 / 0 7 / 2 0 0 6