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FEC FORM 3X	AN	PORT (ID DISB Other Than A	URSEN	IENTS	5 5		3 AM 10: 01 IL CENTER Office Use Only	ך נ
1. NAME OF COMMITTEE (in f		e or print 🔻		mple: If typin r the lines.	g, type	12FE4M5		<u> </u>
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ADDRESS (number and	street)	21 E	Mc Cart	y Su;	te E	<u></u>		
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2. FEC IDENTIFICA	TION NUMB	ER 🔻 🔤					ZIP CC	
C 0015	7958	: :	3. IS THIS REPORT	•	ew N) or	X AN (A)	MENDED	
4. TYPE OF REP (Choose One)	ORT (b) Monthly Report	Feb 20 (M2)		Nay 20 (M5)		20 (M8)	Nov 20 (M11) (Non-Election Year Only) Dec 20 (M12)
(a) Quarterly Rep	orts:		Mar 20 (M3)		un 20 (M6)		20 (M9)	(Non-Election Year Only)
April 15 Quarterly	Report (Q1)	(C) 12-Day	Apr 20 (M4)	J Primary (12P	ul 20 (M7)	General	20 (M10) (12G)	Jan 31 (YE)
-	Report (Q2)	PRE-Elect Report for	tion	Convention (•	Special (
October Quarterly January	Report (Q3)				03'	2010	· in the	A O
	Report (YE)		Election on	08		2010	State	of MO:
	Ion-election	(d) 30-Day POST-Ele Report for		General (30G	i)	Runoff (30R)	Special (30S)
Terminati (TER)	on Report		Election on	M M /	D D . /	Y Y Y Y	in the State	· of
5. Covering Period	67	0142	010	through	^m 0 ^m 7	/ 14	2010	
I certify that I have ex Type or Print Name of		eport and to the Chelsed	<u> </u>	wledge and t Z <i>imme</i>			d complete.	
Signature of Treasurer	Ch	elsea.	Q.G) mme		Date 10	08'	2010
NOTE: Submission of fa	alse, erroneous	, or incomplete int	ormation may s	ubject the pers	son signing ti	his Report to t	he penalties of 2	U.S.C. §437g.
Office Use Only				_			FEC FOR Rev. 12/	

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	FEC Form 3X (Rev. 02/2003)	SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS	Page 2
	rite or Type Committee Name	·	
_	MISSOURI RIGHT TO A	LIFE FEDERAL POLITIC	AL ACTION COMMITTEE
R	eport Covering the Period: From:	07. 01 2010 т	o: 07/14/2010
	· · · · · · · · · · · · · · · · · · ·	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand January 1,		, <u>,</u> 330.00
	(b) Cash on Hand at Beginning of Reporting Period	, 1,204.33	
	(c) Total Receipts (from Line 19)	, 350.00	, 3,235.00
	 (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) 	, 1,554.33	, 3,565.00
7.	Total Disbursements (from Line 31)	, 673.80	2,684.47
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	, 88053	, ,880.53
9.	Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	1,087.00	
10.	Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	, 1,79492	

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

For further information contact:

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Federal Election Commission 999 E Street, NW Washington, DC 20463

> Toll Free 800-424-9530 Local 202-694-1100

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Write or Type Committee Name	FEC Form 3X (Rev. 06/2004)	DETAILED SUMMARY PAGE of Receipts	Page 3
Missouri Right To Life FEDER AL Altrical Action Committee Report Covering the Period: From: 07: 01 2010 To: 07 14 2010 I. Receipts COLUMN A Total This Period COLUMN A Calendar Year-to-Date COLUMN B Calendar Year-to-Date II. Contributions (other than loans) From: (a) Individuals/Persons Other Than Policial Committees (i) Itemized (use Schedule A)			rage 3
Report Covering the Period: From: 0 7: 0 1 2010 To: 0 7 14 2010 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)		TO LIFE EEDER AL A	Litical antical one as iter
I. Receipts COLUMN A Total This Period COLUMN B Calendar Year-to-Date 11. Contributions (other than loans) From: (a) Individual/Persons Other Than Political Committees (i) Iternized (use Schedule A), , , , , , , , , , , , , , , , ,	MISSUARI RIGHT		
I. Receipts Total This Period Calendar Vear-to-Date 11. Contributions (after than loans) From: (a) Individual/Persons Other Than Political Committees (i) Iternized (use Schedule A)	Report Covering the Period: From:	ο 7 οι 2010 το	07 14 2010
(a) Individuals/Persons Other Than Political Committees (i) Itemized (use Schedule A), , , , , , , , , , , , , , , , ,	I. Receipts		
Than Political Committees , , , , , , , , , , , , , , , , , , ,			
(i) Itemized (use Schedule A), , , , , , , , , , , , , , , , ,			
(i) Uniternized , 350.00 /,535.00 (ii) TOTAL (add , 350.00 , 535.00 (iii) TOTAL (add , 350.00 , 3,235.00 (b) Political Party Committees , 00 , 00 (c) Other Political Committees , 00 , 00 (guch as PACs) , 00 , 00 (d) Total Contributions (add Linee , 00 , 00 11(a)(ii), (b), and (c)) (Carry , 350.00 , 3,235.00 12. Transfers From Affiliated/Other , 350.00 , 3,235.00 13. All Loans Received , .00 , .00 14. Loan Repayments Received , .00 , .00 15. Offsets To Operating Expenditures , .00 , .00 (Ferunds, Rebates, etc.) , .00 , .00 (Carry Totals to Line 37, page 5) , .00 , .00 16. Refunds of Contributions Made , .00 , .00 to Federal Candidates and Other , .00 , .00 17. Other Federal Account , .00 , .00 18. Transfers from Non-Federal and Levin Funds , .00 , .00 19. Under didates from Non-Federal Account , .00 , .00		00	1700 00
(iii) TOTAL (add Lines 11(a)(i) and (ii)		······································	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
(iii) TOTAL (add Lines 11(a)(i) and (ii)	(ii) Unitemized		1 535.00
(b) Political Party Committees , , , , , , , , , , , , , , , , , , ,	(iii) TOTAL (add		
(c) Other Political Committees (such as PACs)	Lines 11(a)(i) and (ii)	, ,35000	, 3,235.00
 (c) Other Political Committees (such as PACs)		00	
(such as PACs)		, ,	, , <i>DU</i>
(d) Total Contributions (add Linee 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) 12. Transfers From Affiliated/Other Party Committees Party Committees ,	••		00
Totals to Line 33, page 5) , , , , , , , , , , , , , , , , , , ,		, , -	, , , , , , , , , , , , , , , , , , ,
12. Transfers From Affiliated/Other Party Committees Party Committees 13. All Loans Received 14. Loan Repayments Received 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) (Carry Totals to Line 37, page 5) 16. Refunds of Contributions Made to Federal Candidates and Other Political Committees 17. Other Federal Receipts (Dividends, Interest, etc.) 18. Transfers from Non-Federal and Levin Funds (a) Non-Federal Account (from Schedule H3) (a) Non-Federal Account (b) Levin Funds (from Schedule H5)	11(a)(iii), (b), and (c)) (Carry	2	
Party Committees ,	• • •	, ,350.00	, 3,235.00
13. All Loans Received , , , .00 , , .00 14. Loan Repayments Received , , .00 , .00 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5), , .00 , .00 16. Refunds of Contributions Made to Federal Candidates and Other Political Committees			
14. Loan Repayments Received	Party Committees		, , .00
 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	13. All Loans Received	, , . <i>0</i> 0	, , .00
 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	14 Loop Ponsymenta Possivad		
 (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)		···· , , . <i></i>	, , , , , , , , , , , , , , , , , , , ,
(Carry Totals to Line 37, page 5) , , , .00 , , .00 16. Refunds of Contributions Made to Federal Candidates and Other Political Committees , , .00 , .00 17. Other Federal Receipts (Dividends, Interest, etc.) , , .00 , .00 18. Transfers from Non-Federal and Levin Funds (a) Non-Federal Account (from Schedule H3), , .00 , .00 , .00 (b) Levin Eunds (from Schedule H5) , .00 , .00			
 16. Refunds of Contributions Made to Federal Candidates and Other Political Committees			00
Political Committees , , , .00 , , .00 17. Other Federal Receipts , , .00 , .00 (Dividends, Interest, etc.) , , .00 , .00 18. Transfers from Non-Federal and Levin Funds , , .00 , .00 (a) Non-Federal Account , , .00 , .00 (from Schedule H3) , .00 , .00 (b) Levin Eunds (from Schedule H5) .00	16. Refunds of Contributions Made	, , ,	, , .00
17. Other Federal Receipts , , , , , , , , , , , , , , , , , , ,			· · · ·
 17. Other Federal Receipts (Dividends, Interest, etc.) 18. Transfers from Non-Federal and Levin Funds (a) Non-Federal Account (from Schedule H3) (b) Levin Eunds (from Schedule H5) 		··· , , . <i>00</i>	, , .0 6
 18. Transfers from Non-Federal and Levin Funds (a) Non-Federal Account (from Schedule H3), , , , , , , , , , , , , , , , ,	-		
(a) Non-Federal Account (from Schedule H3),,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	• • • •	, , .00	, , .00
(from Schedule H3), , , , , , , , , , , , , , , , ,			
(b) Levin Funds (from Schedule H5)			<i>D</i> D
(b) Levin Funds (from Schedule H5), , , , , , , , , , , , , , ,		i i i	
	(b) Levin Funds (from Schedule H5)		00
			, , , , , , , , , , , , , , , , , , , ,
(c) Total Transfers (add 18(a) and 18(b)), , , \mathcal{OO} , , , \mathcal{OO}	(c) Total Transfers (add 18(a) and 18(b)	, , <i>.00</i>	, , .
19. Total Receipts (add Lines 11(d),		<i>n</i>	202-00
12, 13, 14, 15, 16, 17, and 18(c))	12, 13, 17, 13, 10, 17, 200 10(C))	, ,50.00	, 3,235.00
20. Total Federal Receipts	20. Total Federal Receipts		
(subtract Line 18(c) from Line 19)	-	350.00	3,235.00

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DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)	or Disbursements	Page 4
II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
Operating Expenditures: (a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share		.00 , , .0
(ii) Non-Federal Share	, ,	.00 , , .0
(b) Other Federal Operating		
		· · · ·
		30 , 2,32/9
Transfers to Affiliated/Other Party		• • •
	5 5	.00 , , .0
Federal Candidates/Committees and Other Political Committees	3 3	.00 , , .0
Independent Expenditures		
(use Schedule E) Coordinated Party Expenditures	, ,56-	2.50 , ,362.5
		00.0
	, , ,	, , ,
Loan Repayments Mede		.00 , , .0
Loans Made		.00 , , .0
Refunds of Contributions To:	J J	, , , ,
Than Political Committees	· · · · · · · · · · · · · · · · · · ·	.00 , , .0
(b) Political Party Committees	· · ·	.00 , , .0
(c) Other Political Committees	, , ,	
(such as PACs)	. 9 9	.00 , , .0
(d) Total Contribution Refunds		
(add Lines 28(a), (b), and (c)) ►	· , , , ,	.00 , , .0
Other Disbursements	1 , ,	.00 , , .0
Federal Election Activity (2 U.S.C. \$431(20))		
(a) Allocated Federal Election Activity		
		.000
(I) Federal Share	, <u>,</u> ,	· , , .
(ii) "Levin" Share		.00 , , .0
(b) Federal Election Activity Paid Entirely		
	3 3	.00 , , .0
Lines 30(a)(i), 30(a)(ii) and 30(b)) ►	3 9	. 60 , , .0
Total Disbursements (add Lines 21(c) 22		
23, 24, 25, 26, 27, 28(d), 29 and 30(c)).	, ,670	3.80 , 2,684.4
Total Federal Disbursements		
		·
(subtract Line 21(a)(ii) and Line 30(a)(ii)		3.80 , 2,684.4
	II. Disbursements Operating Expenditures: (a) Allocated Federal/Non-Federal Activity (from Schedule H4) (i) Federal Share (ii) Non-Federal Share (iii) Non-Federal Share (ii) Non-Federal Share (ii) Non-Federal Operating Expenditures (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) > Transfers to Affiliated/Other Party Committees Contributions to Federal Candidates/Committees Contributions to Federal Candidates/Committees Contributions to: Contributions to: Contributions To: Contributions To: (a) Individuals/Persons Other Than Political Committees (b) Political Party Committees (b) Political Committees (c) Other Political Committees (c) Other Political Committees (c) Other Political Committees (c) Other Political Committees	II. Disbursements COLUMN A Total This Period Operating Expenditures: (a) Allocated Federal/Non-Federal Activity (from Schedule H4) (i) Federal Share

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	FEC Form 3X (Rev. 02/2003)		JMMARY PAGE ursements	Page 5	
-111.	Net Contributions/Operating Ex- penditurep	COLUMN A Total This Period		COLUMN B Calendar Year-to-Date	
	Total Contributions (other than loans) (from Line 11(d), page 3)	e (*)	,350.00	, 3,235.00	
	Total Contribution Refunds (from Line 28(d))	;	, .00	, , .00	
	Net Contributions (other than loans) (subtract Line 34 from Line 33)		350.00	, 3,235.00	
	Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	, ,	,311.30	, 2,321.97	
	Offsets to Operating Expenditures (from Line 15, page 3)		, .00	, ,	
38.	Net Operating Expenditures (subtract Line 37 from Line 36)	3	,311.30	, 2,321 97	

SSOURI RIGHT TO LIFE FEDERAL PsLitical Action Committy Jolken, Ron Distress Jolken, Ron Date of Disbursement Date of Disbursement Jost Cambridge Circle. Date of Disbursement Date of Disbursement Jost Amount of Each Disbursement this Period Date of Disbursement Disbursement this Period Jandidati Name Mailtip ic Disbursement For: Category/ Type Amount of Each Disbursement this Period Jandidati Name Mailtip ic Disbursement For: Category/ Type Date of Disbursement Jandidati Name It on the (ast, First, Middle Initia) Date of Disbursement Mailtip ic Jailing Address Disbursement For: Date of Disbursement Date of Disbursement Jailing Address Mailtip ic Mailtip ic Date of Disbursement Jailing Address Mailtip ic Mailtip ic Date of Disbursement Jailing Address State Zip Code Date of Disbursement this Period Jailing Address Mailtip ic Date of Disbursement this Period Jailing Address Market Marie Senate President <th></th> <th></th> <th></th> <th></th> <th></th>					
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is Source Picker To LiFE FEDERAL Pic LiticAL Action/ Committy In Name (Last, First, Middle Initia) Jolken , Ron Date of Disbursement Date of Disbursement Joing Address Mob Category/ Trobe of Disbursement Date of Disbursement Date of Disbursement Market Name Mob Los / 16 g Amount of Each Disbursement this Period Andrates Name Disbursement For: Category/ Type Amount of Each Disbursement this Period Ate: Mob Last First, Middle Initial) Date of Disbursement M.S. Pastmastur Other (specify) v Date of Disbursement Ming Address State Zip Code Most Last First, Middle Initial) Date of Disbursement M.S. Pastmastur Other (specify) v Date of Disbursement Ming Address Disbursement For: Disbursement For: State Zip Code ND Category/ Type Middae Name Disbursement For: Disbursement For: Disbursement For: State Zip Code ND Category/ Type , 3 6 Z, 5o Middae Name Disbursement For:					
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and date Name Catagory/ Type Catagory/ Type , , 225.00 Multiple House Disbursement For:	unana of Dieleuropat				
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Telfevson Cuty MD LSI01 Category/ irpose of Disborsement Amount of Each Disbursement this Period Senate Disbursement For: Senate Primary III Name (Last, First, Middle Initial) Date of Disbursement ate: Disbursement ty State Zip Code Type ty State Tice Sought: House District: District: III Name (Last, First, Middle Initial) Date of Disbursement ate: Disbursement ardidate Name Category/ Type iffice Sought: House President Disbursement For: ardidate Name Category/ Type ate: Disbursement For: President Disbursement For: President Disbursement For: President Other (specify) ▼ ate: District:		State Zip Code			
Amount of Each Disbursement this Period Amount of Each Disbursement Amount of Each Disbursement this Period	Tefferson City 1	ND 65101			
undidate N4me Category/ Type Gategory/ Type 362.50 fice Sought: House Disbursement For: General President Other (specify) ▼ General ate: M 0 District: Disbursement For: Ill Name (Last, First, Middle Initial) Date of Disbursement ailing Address M M / 0 0 / Y Y Y ty State Zip Code urpose of Disbursement Amount of Each Disbursement this Period andidate Name Category/ Type , '' '' '' '' ''''''''''''''''''''''''	Postage on News/e	Her .	004	Amount of Each Dis	sbursement this Period
fice Sought: House Disbursement For: Senate President Disbursement For: President Other (specify) ▼ ate: /// 0 District: III Name (Last, First, Middle Initial) alling Address ty State Zip Code ardidate Name Category/ tice Sought: House Disbursement For: Senate President Disbursement For: Primary General Primary General Primary General Primary General Other (specify) ▼	andidate Name		Category/		36250
ate: M 0 District: ate: District: ate: District:	office Sought: House Disbursen	nent For:	туре	3	, -
ate: M 0 District: Date of Disbursement alling Address M M / D D / Y Y Y Y alling Address M M / D D / Y Y Y Y ty State Zip Code irpose of Disbursement Amount of Each Disbursement this Period andidate Name Category/ Type , , , fice Sought: House Disbursement For: President Amount of Each Disbursement this Period ate: Disbursement For: Other (specify) ▼ Amount of Each Disbursement this Period		• 🗀			
ailing Address ty ty State Zip Code urpose of Disbursement arrdidate Name Category/ Type filee Sought: House Disbursement For: President President Category/ Type Amount of Each Disbursement this Period Amount of Each Disbursement this Period ate: District: Category/ Type Amount of Each Disbursement this Period ate: District: Amount of Each Disbursement this Period Amount of Each Disbursement this Period Disbursement For: President District: District: District:		•			
ailing Address M M / D D / Y Y Y Y ty State Zip Code urpose of Disbursement Amount of Each Disbursement this Period ardidate Name Category/ Type fifce Sought: House President Primary Other (specify) ✓	ull Name (Last, First, Middle Initial)			Date of Disburseme	ant
ty State Zip Code irpose of Disbursement ardidate Name fice Sought: House Disbursement For: Senate President Disbursement For: Senate Primary General Other (specify) ▼					
irpose of Disbursement arrdidate Name Category/ Type Amount of Each Disbursement this Period ffice Sought: House Disbursement For: Senate President Amount of Each Disbursement this Period this Peri	lailing Address				
andidate Name Category/ Type Amount of Each Disbursement this Period ffice Sought: House Disbursement For: Senate , Primary General Other (specify) General ate: District: Other (specify)	ity S	State Zip Code			
ardidate Name Category/ fice Sought: House Disbursement For: Senate Primary General President Other (specify) ▼ ate: District:	urpose of Disbursement				
ifice Sought: House Disbursement For: Senate Primary General President Other (specify) ▼	andidate Name		.	Amount of Each Dis	sbursement this Period
ate: District: Primary General Other (specify) ▼				9.	,
ate: District:					
		Other (specify)			
AI This Period (last page this line number only)		<u> </u>			
Al This Period (last page this line number only)	TOTAL of Disbursements This Page (optional)		····· •	3	,587.50
	AL This Period (last page this line number only)		b	-	587.50

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FEC Schedule B (Form 3X) Rev. 02/2003

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SCHEDULE D (FEC Form 3X)	(lice concerts PAGE / OF /
DEBTS AND OBLIGATIONS	-schedule(s) FOR LINE NUMBER:
Excluding Loans	for each (check only one) 9 numbered line)
NAME OF COMMITTEE (In Full)	
Missouri Right To Life Federal Politica	1 Action Committee
A. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Graves, SAMUEL B	
Mailing Address	
IID South IOth City State Zip Code	
Tarkio MO 64491	
Outstanding Balance Beginning This Period	
, 1,087.00	,
Amount Incurred This Period Payment This Period	Outstanding Balance at Close of This Period
, , .00 , , .	00 , 1,087.00
B. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Mailing Address	
City State Zip Code	
Outstanding Balance Beginning This Period	
, , · ·	
Amount Incurred This Period Payment This Period	Outstanding Balance at Close of This Period
, , , , , , , , , , , , , , , , , , ,	• , , .
C. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Mailing Address	
City State Zip Code	·
Outstanding Balance Beginning This Period	
, , ,	
Amount Incurred This Period Payment This Period	Outstanding Balance at Close of This Period
, , , , , , , , , , , , , , , , , , ,	. , , .
	1 4 7 7 4 7
1) SUBTOTALS This Period This Page (optional)	, 1,087.00 , 1,087.00
2) TOTALS This Period (last page this line number only)	▶ , 1,087.00
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page of	only)► , /, 08/.00

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SCHEDULE D (FEC Form 3X)	(Use separate PAGE / OF 2
DEBTS AND OBLIGATIONS	schedule(s) FOR LINE NUMBER:
Excluding Loans	for each (check only one) 9 numbered line) 10
NAME OF COMMITTEE (In Full)	······································
Missouri RIGHT TO LIFE FEDERAL Politica	AL ACTION COMMITTEE
A. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
TRACKSIDE Marketing	Lucit During
Mailing Address 84 Jeanie Dr.	Website Design
City State Zip Code Four Seasons MO 65049	
Outstanding Balance Beginning This Period	
68.75	
Amount Incurred This Period Payment This Period	Outstanding Balance at Close of This Period
, , .00 , , .	.00 , , 68.75
B. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Brown Printing	Disting 10
Mailing Address	- Printing on fund valser
Mailing Address POBOX 2/70 City State Zip Code	fund valser
Jefferson City MO 65102	
Outstanding Balance Beginning This Period	
, , .00	
Amount Incurred This Period Payment This Period	Outstanding Balance at Close of This Period
	.00 , , 903.19
C. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Brown Printing	
Mailing Address PD BOX 2170	- Printing on - fund raiser
City State Zin Code	- fund raiser
Jefferson City MD 65102	
Outstanding Balance Beginning This Period	
, , .00	
Amount Incurred This Period Payment This Period	Outstanding Balance at Close of This Period
, ,785.48 , ,	. 00 , ,785.48
1) SUBTOTALS This Period This Page (optional)	, /,757.42
2) TOTALS This Period (last page this line number only)	, , , , , , , , , , , , , , , , ,
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page of	

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SCHEDULE D (FEC Form 3X)				PAGE	OF
		separate edule(s)			
DEBTS AND OBLIGATIONS		r each		only one)	n9
Excluding Loans	numb	pered line)			X 10
NAME OF COMMITTEE (In Full)					•
MISSOUKI RIGHT TO LIFE FEDERAL POL	ITICA	L ACT	ion	COMM	TTEE
A. Full Name (Last, First, Middle Initial) of Debtor or Creditor		Nature of D	ebt (Purp	ose):	
The Link		_		-	
Mailing Address		Nou	15	Relea Vice	50
POBOX 640			~		
City State Zip Code TOWA FALLS IA 50126-0640	0	Ċ	Der	vice	
Outstanding Balance Beginning This Period					
.00					
Amount Incurred This Period Payment This Period		Outstandir	a Belenc	e et Close (of This Period
	0 A -	Outstanui	ig Dalanc		
, , 37.50 , , .	00		3	ۍ , ث	37.50
B. Full Name (Last, First, Middle Initial) of Debtor or Creditor		Nature of D	ebt (Purp	ose):	
			•••		
Mailing Address					
City State Zip Code					
			·	<u> </u>	
Outstanding Balance Beginning This Period					
, , ·					
Amount Incurred This Period Payment This Period		Outstandli	ng Balanc	e at Close	of This Period
			•		-
5 5 • 1 • 5 • 1			3	3 ·	•
C. Full Name (Last, First, Middle Initial) of Debtor or Creditor		Nature of D	ebt (Purp	ose):	
Mailing Address					
City State Zip Code					
Outstanding Balance Beginning This Period					
· · · · ·					,
Amount Incurred This Period Payment This Period		Outstandi	ng Balanc	e at Close	of This Period
, , , , , , , , , , , , , , , , , , ,			,	,	
			,	, 	
1) SUBTOTALS This Period This Page (optional)	⊾		•••	į	37 50
	····· P		,	, U	
2) TOTALS This Period (last page this line number only)	►	•	3	1,79	87.50 14.92
			•		
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)	····· >		,	. 3	•
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page or	nlv) 🕨		_	-	_

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SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

ITEMIZED INDEPENDENT EXPENDITURES	FOR LINE 24 OF FORM 3X					
NAME OF COMMITTEE (In Full)						
MISSOURI RIGHT TO LIFE FEDERAL POLITI	ICAL FEC IDENTIFICATION NUMBER ▼					
ACTION COMMIT	EE C 00157958					
Check if 24-hour notice 48-hour notice						
Full Name (Last, First, Middle Initial) of Payee	Date					
U.S. POSTMASTER	07'14'2010					
Mailing Address	01 7 2010					
131 W. HIGH ST	Amount					
City State Zip Code	2795					
Jefferson City no 65101	, , 32,95					
Purpose of Expenditure	ffice Sought: House State: MD					
Pastage on Newsletter Category 004	Senate District:					
Name of Federal Candidate Supported or Opposed by Expenditure:	President					
	heck One: 📈 Support 🗌 Oppose					
	sbursement For: X Primary General					
for Office Sought , , 3X.75	Other (specify)					
Full Name (Last, First, Middle Initial) of Payee	Date					
U.S. POSTMASTER						
	- "07' °14' žo'io					
131 W. HIGH ST.	Amount					
City State Zip Code	32.95					
Jefferson City Mo 65101						
	ffice Sought: House State: MO					
POSTAGE ON NEWS/ett Type 004.	Senate District:					
Name of Federal Candidate Supported or Opposed by Expenditure:	President					
Martin Baker C	heck One: 🛛 Support 🗌 Oppose					
	isbursement For: R Primary General					
Calendar Year-To-Date Per Election for Office Sought , , , 3295						
	Other (specify)					
(a) SUBTOTAL of Itemized Independent Expenditures						
	, , <u> </u>					
(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.						
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Date	· · · · · ·					
Signature						

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FEC Schedule E (Form 3X) Rev. 02/2003

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SCHEDULE E (FEC Form 3X)				•
ITEMIZED INDEPENDENT EXPENDITURES				OF 6 4 OF FORM 3X
NAME OF COMMITTEE (In Full)	ارم ب	FEC IDEN	TIFICATIC	
MISSOURI RIGHT TO LIFE FEDERAL POLI ACTION COMM				7958
Check if 24-hour notice 48-hour notice		000		1 1 30
Full Name (Last, First, Middle Initial) of Payee	Date			
U.S. POSTMASTER		[™] ~ [™] ~′′	211	2010
Mailing Address		01	1	2010
131 W. HIGH ST City State Zip Code	Amoi	unt		
City Jefferson City Mo 65101		,	,	32,95
Purpose of Expenditure Category/ 004	Office Sou		ouse	State: MO
Postage on Newsletter Category/ 004			enate resident	District: 2
Name of Federal Candidate Supported or Opposed by Expenditure:	Check One		resident Support	Oppose
Todd Akin		·· 🗵 ·		
Calendar Year-To-Date Per Election for Office Sought , , 32.95		ent For: 🔀		General
for Office Sought , , 5×.75		Other (specif	^{y)} ►	
Full Name (Last, First, Middle Initial) of Payee	Date)		
U.S. POSTMASTER Mailing Address		"0"7'	"/4'	2010
131 W. HIGH ST.	Amo	unt		
City State Zip Code Jefferson City Mo 65101		,	,	32 95
Purpose of Expenditure	Office Sou	oht: N	louse	State: MO
POSTRGE ON NEWS/etter Type 004			Senate	District: 3
Name of Federal Candidate Supported or Opposed by Expenditure:		F	President	
Ed Martin	Check On	e: 🗙 S	Support	Oppose
Calendar Year-To-Date Per Election	Disbursem	ent For: 🗙	Primary	General
for Office Sought , , 32.95		Other (specif		
	<u> </u>			
(a) SUBTOTAL of Itemized Independent Expenditures				65.90
		,	,	60.7
(b) SUBTOTAL of Uniternized Independent Expenditures	" >			
·		,	,	•
(c) TOTAL Independent Expenditures	·· ►	,	,	
	<u></u>			
Under penalty of perjury I certify that the independent expenditures reported herein were with, or at the request or suggestion of, any candidate or authorized committee or agent of	not made in	cooperation	, consulta	tion, or concert
party committee) any political party committee or its agent.			ig entry i	
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Signature			•	• •
Signature				

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SCHEDULE E (FEC Form 3X)	
ITEMIZED INDEPENDENT EXPENDITURES	PAGE 3 OF 6 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (IN FUII) MISSOURI RIGHT TO LIFE FEDERAL POLI	FEC IDENTIFICATION NUMBER
MISSOURI RIGHT TO DEE FEDERAL FOLD	TURE
Check if 24-hour notice 48-hour notice	000137738
Full Name (Last, First, Middle Initial) of Payee	Date
U.S. POSTMASTER	"07"14' 2010
Mailing Address	
131 W. HIGH ST	Amount
City State Zip Code Jefferson City Mo 65101	, , <i>32,95</i>
	Office Sought: House State: MD
Tustage off the	Senate District: 24
Name of Federal Candidate Supported or Opposed by Expenditure:	Check One: Support Oppose
IKE SKELTON	Check One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought , , 32.95	Disbursement For: X Primary General
for Office Sought , , 3 < . 7 S	Other (specify)
Full Name (Last, First, Middle Initial) of Payee	Date
U.S. POSTMASTER	"o"7' "1"4' "2'o"1'o
131 W. HIGH ST.	Amount
City State Zip Code Jefferson City Mo 65101	, , <i>32.95</i>
Purpose of Expenditure	Office Sought: V House State: MO
POSTAGE ON NEWS/etter Category 004	Senate District: 4
Name of Federal Candidate Supported or Opposed by Expenditure:	President
VICKY HARTZLER	Check One: X Support Oppose
Calendar Year-To-Date Per Election	Disbursement For: Primary General
for Office Sought ; ; 32.95	Other (specify)
· · · · ·	
(a) SUBTOTAL of Itemized Independent Expenditures	• , , 65.90
(b) SUBTOTAL of Unitemized Independent Expenditures	
	s , .
(c) TOTAL Independent Expenditures	
	· · · · ·
Under penalty of perjury I certify that the independent expenditures reported herein were with, or at the request or suggestion of, any candidate or authorized committee or agent o	not made in cooperation, consultation, or concert of either, or (if the reporting entity is not a political
party committee) any political party committee or its agent.	
Date)

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SCHEDULE E (FEC Form 3X)	_
ITEMIZED INDEPENDENT EXPENDITURES	PAGE 4 OF
	FOR LINE 24 OF FORM 3X
MANE OF COMMITTEE (IN FULL) MISSOURI RIGHT TO LIFE FEDERAL POL	TICAL FEC IDENTIFICATION NUMBER
ACTION COMM	ITTEE C 00157958
Check if 24-hour notice 48-hour notice	
Full Name (Last, First, Middle Initial) of Payee	Date
U.S. POSTMASTER	- "0"7' "14' 20 jo
Mailing Address	
131 W. HIGH ST	Amount
City State Zip Code	32.96
Jefferson City no 65101	
Purpose of Expenditure Postage on Newsletter Category/ DO4	Office Sought: House State: MO
	Senate District:
Name of Federal Candidate Supported or Opposed by Expenditure:	
JACOB TURK	-Check One: X Support Oppose
Calendar Year-To-Date Per Election	Disbursement For: Primary General
for Office Sought , , 32.95	Other (specify)
Full Name (Last, First, Middle Initial) of Payee	Date
U.S. POSTMASTER	
Mailing Address	"07' "14' '20'1'0
131 W. HIGH ST.	Amount
City State Zip Code	
Jefferson City Mo 65101	, , 32.9 5
Purpose of Expenditure	Office Sought: House State: MO
POSTRGE ON NEWS/etter Type 004	Senate District:
Name of Federal Candidate Supported or Opposed by Expenditure:	President
SAM GRAVES	Check One: X Support Oppose
Calendar Year-To-Date Per Election	Disbursement For: Primary General
for Office Sought , , 32.95	Other (specify)
<u></u>	
· · · · · · · · · · · · · · · · · · ·	
(a) SUBTOTAL of Itemized Independent Expenditures	▶ , , 65.92
(b) SUBTOTAL of Uniternized Independent Expenditures	
(c) TOTAL Independent Expenditures	··· ► 3 3 +
· · · · · · · · · · · · · · · · · · ·	
Under penalty of perjury I certify that the independent expanditures 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 party committee) any political party committee or its agent.	of either, or (if the reporting entity is not a political
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SCHEDULE E (FEC Form 3X)			
ITEMIZED INDEPENDENT EXPENDITURES	PAGE 5 OF 6		
NAME OF COMMITTEE (In Full)	FOR LINE 24 OF FORM 3X		
MISSOURI RIGHT TO LIFE FEDERAL POL	FEC IDENTIFICATION NUMBER		
ACTION COMM	UTTEE C 00157958		
Check if 24-hour notice 48-hour notice			
Full Name (Last, First, Middle Initial) of Payee	Date		
U.S. POSTMASTER	07 14 2010		
Mailing Address			
131 W. HIGH ST City State Zip Code	Amount		
Jefferson City no 65101	, , 32,9 6		
Purpose of Expenditure			
Postage on Newsletter Category/ 004	Senate District: 7		
Name of Federal Candidate Supported or Opposed by Expenditure:	President		
BILLY LONG	Check One: X Support Oppose		
Calendar Year-To-Date Per Election	Disbursement For: X Primary General		
	Other (specify)		
Full Name (Last, First, Middle Initial) of Payee	Date		
U.S. POSTMASTER			
Mailing Address			
131 W. HIGH ST.	Amount		
City Jefferson City Mo 65101	, , 32.96		
Purpose of Expenditure POSTRGE ON NEWS/efter Category/ Type 004	Confice Sought: House State: MD Senate District: State: State: MD		
Name of Federal Candidate Supported or Opposed by Expenditure:	President		
Jo Ann Emerson	Check One: 🔀 Support 🗌 Oppose		
	Disbursement For: R Primary General		
Calendar Year-To-Date Per Election for Office Sought , , , 32,95	Other (specify)		
· · · · · · · · · · · · · · · · · · ·	_		
(a) SUBTOTAL of Itemized Independent Expenditures	····► , , 65.92		
(b) SUBTOTAL of Uniternized Independent Expenditures	···· > , , , , , , , , , , , , , , , , , , ,		
(a) TOTAL Independent Expenditures			
(c) TOTAL Independent Expenditures	···· > , , , ,		
Under penalty of perjury t 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.			
Da	мм/оо/үүүү 1e		
Signature			

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SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

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ITEMIZED INDEPENDENT EXPENDITURES	PAGE 6 OF 6	
NAME OF COMMITTEE (In Full)	·····	
MISSOURI RIGHT TO LIFE FEDERAL POLITICAL FECTIDENTIFICATION NUMBER		
ACTION COMMI	TEE C 00157958	
Check if 24-hour notice 48-hour notice		
Full Name (Last, First, Middle Initial) of Payee	Date	
4.5. POSTMASTER	M M / D D / Y Y Y Y	
Mailing Address	- "07." 14 2010	
131 W. High ST.	Amount	
City State Zip Code	-	
Jefferson City mo 65101	, , 32.96	
Purpose of Expenditure	ffice Sought: House State: MO	
Postage on Newsletter Type 004 Name of Federal Candidate Supported or Opposed by Expenditure:	Senate District: 9	
	President	
Blaine Luctkeneyer C	heck One: 🙀 Support 🗌 Oppose	
	isbursement For: X Primary General	
Calendar Year-To-Date Per Election for Office Sought , , 32.96	Other (specify)	
Full Name (Last, First, Middle Initial) of Payee	Date	
Mailing Address	-	
	Amount	
City State Zip Code		
City State Zip Code		
	, , .	
Category	ffice Sought: House State:	
Туре	Senate District:	
Name of Federal Candidate Supported or Opposed by Expenditure:	President	
c	heck One: Support Oppose	
Delender Vers To Date Day Floation	isbursement For: Primary General	
Calendar Year-To-Date Per Election for Office Sought	Other (specify)	
· · ·		
(a) SUBTOTAL of itemized Independent Expenditures		
	, ,,//	
(b) SUBTOTAL of Unitemized Independent Expenditures		
	, , ·	
(c) TOTAL Independent Expenditures	170 40	
	, , , , , , , , 80	
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.		
Patricia M. Skain Date D7 22 2010		
Signature Date 07 22 2010		

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Federal Election ENVELOPE REPLACEMENT PAGE The FEC added this page to the end of th	E FOR INC	COMING DOCUMENTS	
Hand Delivered		Date of Receipt	
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USPS Registered/Certified		Postmarked (R/C)	
USPS Priority Mail	····	Postmarked	
Delivery Confirmation [™] or Signature Confirmation [™] Label			
USPS Express Mail		Postmarked	
Postmark Illegible		······································	
No Postmark			
Overnight Delivery Service (Specify):	ups	Shipping Date	
	Next	Business Day Delivery	
Received from House Records & Regis	stration Off	Date of Receipt ice	
Received from Senate Public Records	Office	Date of Receipt	
Received from Electronic Filing Office		Date of Receipt	
Other (Specify):	[Date of Receipt or Postmarked	
R		10/13/10	
(3/2005)	····	DATE PREPARED	