24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

SCHEDULE E)	PAGE 1 OF 1 FOR SE OF FORM 24/48
NAME OF COMMITTE (In Full) Nevada Right to Life Political Action Committee	FEC IDENTIFICATION NUMBER ▼
Nevada Night to Life i olitical Action Committee	C C00484634
Check If X 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	to.
National Right to Life Committee, Inc.	11 02 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 512 10th Street, NW	ount
City State Zip Code	
Washington DC 20004-1401	1789.83
Purpose of Expenditure Telephone Number Rental Category/ Type Office So	ught: House State:
	Senate District: President
Name of Federal Candidate Supported or Opposed by Expenditure: MITT ROMNEY Check Or	
Calendar Year-To-Date Per Election Disburser 2012	ment For: Primary General Other (specify)
Full Name (Last, First, Middle Initial) of Payee Dat	
Date	M M / D D / Y Y Y Y
Mailing Address	
	nount
City State Zip Code	
Purpose of Expenditure Category/ Type Office So	Consts ——
Name of Federal Candidate Supported or Opposed by Expenditure:	President District:
Check Or	ne: Support Oppose
Calendar Year-To-Date Per Election for Office Sought Disburser	ment For: ☐ Primary ☐ General Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	1789.83
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	1789.83
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.	
Maureen Klippenstein [Electronically Filed] Date 11	/ D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature	