

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. 12FE4M5

TEXAS RIGHT TO LIFE POLITICAL ACTION C

ADDRESS (number and street) 9800 CENTRE PARKWAY SUITE 200

Check if different than previously reported. (ACC) HOUSTON TX 77036

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

C 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 Year-End 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 (12S)

Election on [MM] / [DD] / [YYYY] in the State of [ ]

- (d) 30-Day POST-Election Report for the:
- General (30G)  Runoff (30R)  Special (30S)

Election on 11 / 04 / 2014 in the State of TX

5. Covering Period 10 / 16 / 2014 through 11 / 24 / 2014

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 Mrs. Teresa Doyle [Electronically Filed] Date 12 / 05 / 2014

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

Office Use Only									
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**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

**TEXAS RIGHT TO LIFE POLITICAL ACTION C**

Report Covering the Period: From:  /  /  To:  /  /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2014"/>	<input type="text" value="10082.51"/>	<input type="text" value="10082.51"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="7385.13"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="0.00"/>	<input type="text" value="3080.00"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="7385.13"/>	<input type="text" value="13162.51"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="346.48"/>	<input type="text" value="6123.86"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="7038.65"/>	<input type="text" value="7038.65"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="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:  /  /  To:  /  /

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).....	0.00	2980.00
(ii) Unitemized .....	0.00	100.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	0.00	3080.00
(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	3080.00
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	0.00
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 Transfers (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	3080.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	0.00	3080.00

**DETAILED SUMMARY PAGE**  
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated 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	32.79
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	0.00	32.79
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	5000.00
24. Independent Expenditures (use Schedule E) .....	346.48	1091.07
25. Coordinated Party Expenditures (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) Allocated 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)) ..	346.48	6123.86
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	346.48	6123.86

**DETAILED SUMMARY PAGE**  
of Disbursements

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Page 5

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	3080.00
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	3080.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	0.00	32.79
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	32.79

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

NAME OF COMMITTEE (In Full) <b>TEXAS RIGHT TO LIFE POLITICAL ACTION C</b>		FEC IDENTIFICATION NUMBER <b>C</b> C00419242
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		MM / DD / YYYY

Full Name of Payee <b>Advanced Litho Printing</b>		Date of Public Distribution/Dissemination MM / DD / YYYY
Mailing Address 226 9th Avenue South		Amount 10.06
City Great Falls	State MT	Zip Code 59405
Purpose of Expenditure PRINTING NEWSLETTER WITH VOTER GUIDE	Category/Type 004	Transaction ID : <b>SE.5457</b> Date of Disbursement or Obligation MM / DD / YYYY 11 / 03 / 2014
Name of Federal Candidate JOHN CORNYN	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: TX
Calendar Year-To-Date Per Election for Office Sought	10.06	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee <b>Advanced Litho Printing</b>		Date of Public Distribution/Dissemination MM / DD / YYYY
Mailing Address 226 9th Avenue South		Amount 10.06
City Great Falls	State MT	Zip Code 59405
Purpose of Expenditure PRINTING NEWSLETTER WITH VOTER GUIDE	Category/Type 004	Transaction ID : <b>SE.5458</b> Date of Disbursement or Obligation MM / DD / YYYY 11 / 03 / 2014
Name of Federal Candidate LOUIE GOHMERT	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 01 <input type="checkbox"/> President <input type="checkbox"/> Senate State: TX
Calendar Year-To-Date Per Election for Office Sought	10.06	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....▶	20.12
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures.....▶	
(c) <b>TOTAL</b> 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. Teresa Doyle*  
Signature

[Electronically Filed] Date MM / DD / YYYY  
12 / 05 / 2014

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 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee
Advanced Litho Printing
Mailing Address
226 9th Avenue South
City
Great Falls State
MT Zip Code
59405
Purpose of Expenditure
PRINTING NEWSLETTER WITH VOTER GUIDE
Category/Type
004

Date of Public Distribution/Dissemination
Amount
10.06
Transaction ID : SE.5460
Date of Disbursement or Obligation
11 / 03 / 2014

Name of Federal Candidate
TED POE
Support
Office Sought: House
District: 02
State: TX

Disbursement For:
General
Calendar Year-To-Date
Per Election for Office Sought
10.06

Full Name of Payee
Advanced Litho Printing
Mailing Address
226 9th Avenue South
City
Great Falls State
MT Zip Code
59405
Purpose of Expenditure
PRINTING NEWSLETTER WITH VOTER GUIDE
Category/Type
004

Date of Public Distribution/Dissemination
Amount
10.06
Transaction ID : SE.5461
Date of Disbursement or Obligation
11 / 03 / 2014

Name of Federal Candidate
SAMUEL R HON. JOHNSON
Support
Office Sought: House
District: 03
State: TX

Disbursement For:
General
Calendar Year-To-Date
Per Election for Office Sought
10.06

(a) SUBTOTAL of Itemized Independent Expenditures..... 20.12
(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. Teresa Doyle
[Electronically Filed]
Date
12 / 05 / 2014
Signature

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

NAME OF COMMITTEE (In Full) <b>TEXAS RIGHT TO LIFE POLITICAL ACTION C</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <b>C</b> C00419242
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="margin-left: 20px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name of Payee <b>Advanced Litho Printing</b>	Date of Public Distribution/Dissemination <span style="margin-left: 20px;">M M / D D / Y Y Y Y Y Y</span>
Mailing Address 226 9th Avenue South	Amount <span style="margin-left: 20px;">10.06</span>
City Great Falls	State MT
Zip Code 59405	<b>Transaction ID : SE.5462</b>
Purpose of Expenditure PRINTING NEWSLETTER WITH VOTER GUIDE	Date of Disbursement or Obligation <span style="margin-left: 20px;">M M / D D / Y Y Y Y Y Y</span> 11 / 03 / 2014
Name of Federal Candidate JOHN LEE RATCLIFFE	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: <u>04</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>TX</u>
Calendar Year-To-Date Per Election for Office Sought <span style="margin-left: 20px;">53.77</span>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee <b>Advanced Litho Printing</b>	Date of Public Distribution/Dissemination <span style="margin-left: 20px;">M M / D D / Y Y Y Y Y Y</span>
Mailing Address 226 9th Avenue South	Amount <span style="margin-left: 20px;">10.06</span>
City Great Falls	State MT
Zip Code 59405	<b>Transaction ID : SE.5463</b>
Purpose of Expenditure PRINTING NEWSLETTER WITH VOTER GUIDE	Date of Disbursement or Obligation <span style="margin-left: 20px;">M M / D D / Y Y Y Y Y Y</span> 11 / 03 / 2014
Name of Federal Candidate JEB MR. HENSARLING	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: <u>05</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>TX</u>
Calendar Year-To-Date Per Election for Office Sought <span style="margin-left: 20px;">10.06</span>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....▶	<span style="margin-left: 20px;">20.12</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures.....▶	<span style="margin-left: 20px;"></span>
(c) <b>TOTAL</b> Independent Expenditures.....▶	<span style="margin-left: 20px;"></span>

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. Teresa Doyle*

[Electronically Filed]

Signature \_\_\_\_\_ Date M M / D D / Y Y Y Y Y Y  
12 / 05 / 2014



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 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee
Advanced Litho Printing
Mailing Address
226 9th Avenue South
City
Great Falls State
MT Zip Code
59405
Purpose of Expenditure
PRINTING NEWSLETTER WITH VOTER GUIDE
Category/Type
004
Name of Federal Candidate
JOE LINUS BARTON
Support
Office Sought: House District: 06
State: TX
Calendar Year-To-Date
Per Election for Office Sought
10.06

Date of Public Distribution/Dissemination
Amount
10.06
Transaction ID : SE.5464
Date of Disbursement or Obligation
11 / 03 / 2014
Disbursement For: General
2014

Full Name of Payee
Advanced Litho Printing
Mailing Address
226 9th Avenue South
City
Great Falls State
MT Zip Code
59405
Purpose of Expenditure
PRINTING NEWSLETTER WITH VOTER GUIDE
Category/Type
004
Name of Federal Candidate
JOHN CULBERSON
Support
Office Sought: House District: 07
State: TX
Calendar Year-To-Date
Per Election for Office Sought
10.06

Date of Public Distribution/Dissemination
Amount
10.06
Transaction ID : SE.5465
Date of Disbursement or Obligation
11 / 03 / 2014
Disbursement For: General
2014

(a) SUBTOTAL of Itemized Independent Expenditures..... 20.12
(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. Teresa Doyle
[Electronically Filed]
Date
12 / 05 / 2014
Signature

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

NAME OF COMMITTEE (In Full) <b>TEXAS RIGHT TO LIFE POLITICAL ACTION C</b>	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> C00419242
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="margin-left: 20px;">M M M / D D D / Y Y Y Y Y Y</span>	

Full Name of Payee <b>Advanced Litho Printing</b>	Date of Public Distribution/Dissemination <span style="margin-left: 20px;">M M M / D D D / Y Y Y Y Y Y</span>
Mailing Address 226 9th Avenue South	Amount <span style="margin-left: 20px;">10.06</span>
City Great Falls	State MT
Zip Code 59405	<b>Transaction ID : SE.5466</b>
Purpose of Expenditure PRINTING NEWSLETTER WITH VOTER GUIDE	Date of Disbursement or Obligation <span style="margin-left: 20px;">M M M / D D D / Y Y Y Y Y Y</span> 11 / 03 / 2014
Name of Federal Candidate KEVIN BRADY	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 08 State: TX
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <b>Advanced Litho Printing</b>	Date of Public Distribution/Dissemination <span style="margin-left: 20px;">M M M / D D D / Y Y Y Y Y Y</span>
Mailing Address 226 9th Avenue South	Amount <span style="margin-left: 20px;">10.06</span>
City Great Falls	State MT
Zip Code 59405	<b>Transaction ID : SE.5467</b>
Purpose of Expenditure PRINTING NEWSLETTER WITH VOTER GUIDE	Date of Disbursement or Obligation <span style="margin-left: 20px;">M M M / D D D / Y Y Y Y Y Y</span> 11 / 03 / 2014
Name of Federal Candidate MICHAEL MCCAUL	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 10 State: TX
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<span style="margin-left: 20px;">20.12</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<span style="margin-left: 20px;"></span>
(c) <b>TOTAL</b> Independent Expenditures..... ▶	<span style="margin-left: 20px;"></span>

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. Teresa Doyle*
[Electronically Filed]
Date M M M / D D D / Y Y Y Y Y Y  
12 / 05 / 2014

Signature

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

NAME OF COMMITTEE (In Full) <b>TEXAS RIGHT TO LIFE POLITICAL ACTION C</b>		FEC IDENTIFICATION NUMBER <b>C</b> C00419242
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		MM / DD / YYYY

Full Name of Payee <b>Advanced Litho Printing</b>		Date of Public Distribution/Dissemination MM / DD / YYYY
Mailing Address 226 9th Avenue South		Amount 10.06
City Great Falls	State MT	Zip Code 59405
Purpose of Expenditure PRINTING NEWSLETTER WITH VOTER GUIDE	Category/Type 004	Transaction ID : <b>SE.5468</b> Date of Disbursement or Obligation MM / DD / YYYY 11 / 03 / 2014
Name of Federal Candidate MICHAEL HONORABLE CONAWAY	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <u>11</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>TX</u>
Calendar Year-To-Date Per Election for Office Sought	10.06	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <b>Advanced Litho Printing</b>		Date of Public Distribution/Dissemination MM / DD / YYYY
Mailing Address 226 9th Avenue South		Amount 10.07
City Great Falls	State MT	Zip Code 59405
Purpose of Expenditure PRINTING NEWSLETTER WITH VOTER GUIDE	Category/Type 004	Transaction ID : <b>SE.5469</b> Date of Disbursement or Obligation MM / DD / YYYY 11 / 03 / 2014
Name of Federal Candidate MAC THORBERRY	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <u>13</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>TX</u>
Calendar Year-To-Date Per Election for Office Sought	10.07	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....▶	20.13
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures.....▶	
(c) <b>TOTAL</b> 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. Teresa Doyle*  
Signature

[Electronically Filed]

Date MM / DD / YYYY  
12 / 05 / 2014

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

NAME OF COMMITTEE (In Full) <b>TEXAS RIGHT TO LIFE POLITICAL ACTION C</b>		FEC IDENTIFICATION NUMBER <b>C</b> C00419242
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		MM / DD / YYYY

Full Name of Payee <b>Advanced Litho Printing</b>		Date of Public Distribution/Dissemination MM / DD / YYYY
Mailing Address 226 9th Avenue South		Amount 10.07
City Great Falls	State MT	Zip Code 59405
Purpose of Expenditure PRINTING NEWSLETTER WITH VOTER GUIDE	Category/Type 004	Transaction ID : <b>SE.5470</b> Date of Disbursement or Obligation MM / DD / YYYY 11 / 03 / 2014
Name of Federal Candidate RANDY WEBER	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <u>14</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>TX</u>
Calendar Year-To-Date Per Election for Office Sought	10.07	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <b>Advanced Litho Printing</b>		Date of Public Distribution/Dissemination MM / DD / YYYY
Mailing Address 226 9th Avenue South		Amount 10.07
City Great Falls	State MT	Zip Code 59405
Purpose of Expenditure PRINTING NEWSLETTER WITH VOTER GUIDE	Category/Type 004	Transaction ID : <b>SE.5471</b> Date of Disbursement or Obligation MM / DD / YYYY 11 / 03 / 2014
Name of Federal Candidate BILL FLORES	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <u>17</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>TX</u>
Calendar Year-To-Date Per Election for Office Sought	10.07	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....▶	20.14
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures.....▶	
(c) <b>TOTAL</b> 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. Teresa Doyle*  
Signature

[Electronically Filed]

Date MM / DD / YYYY  
12 / 05 / 2014

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

NAME OF COMMITTEE (In Full) <b>TEXAS RIGHT TO LIFE POLITICAL ACTION C</b>	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> C00419242
--	--

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 of Payee <b>Advanced Litho Printing</b>		Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	
Mailing Address 226 9th Avenue South		Amount <span style="border: 1px solid black; padding: 2px;">10.07</span>	
City Great Falls	State MT	Zip Code 59405	<b>Transaction ID : SE.5473</b>
Purpose of Expenditure PRINTING NEWSLETTER WITH VOTER GUIDE	Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 11 / 03 / 2014	
Name of Federal Candidate RANDY NEUGEBAUER		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <u>19</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>TX</u>
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">10.07</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <b>Advanced Litho Printing</b>		Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	
Mailing Address 226 9th Avenue South		Amount <span style="border: 1px solid black; padding: 2px;">10.07</span>	
City Great Falls	State MT	Zip Code 59405	<b>Transaction ID : SE.5474</b>
Purpose of Expenditure PRINTING NEWSLETTER WITH VOTER GUIDE	Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 11 / 03 / 2014	
Name of Federal Candidate LAMAR SMITH		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <u>21</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>TX</u>
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">10.07</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<span style="border: 1px solid black; padding: 2px;">20.14</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<span style="border: 1px solid black; padding: 2px;"> </span>
(c) <b>TOTAL</b> Independent Expenditures..... ▶	<span style="border: 1px solid black; padding: 2px;"> </span>

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. Teresa Doyle* [Electronically Filed] Date M M / D D / Y Y Y Y Y Y  
12 / 05 / 2014

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 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee
Advanced Litho Printing
Mailing Address
226 9th Avenue South
City
Great Falls State
MT Zip Code
59405
Purpose of Expenditure
PRINTING NEWSLETTER WITH VOTER GUIDE
Category/Type
004
Name of Federal Candidate
PETER GRAHAM OLSON
Support
Office Sought: House District: 22 State: TX
Calendar Year-To-Date
Per Election for Office Sought
10.07

Date of Public Distribution/Dissemination
Amount
10.07
Transaction ID : SE.5476
Date of Disbursement or Obligation
11 / 03 / 2014
Disbursement For: General
2014

Full Name of Payee
Advanced Litho Printing
Mailing Address
226 9th Avenue South
City
Great Falls State
MT Zip Code
59405
Purpose of Expenditure
PRINTING NEWSLETTER WITH VOTER GUIDE
Category/Type
004
Name of Federal Candidate
KENNY E MR. MARCHANT
Support
Office Sought: House District: 24 State: TX
Calendar Year-To-Date
Per Election for Office Sought
10.07

Date of Public Distribution/Dissemination
Amount
10.07
Transaction ID : SE.5477
Date of Disbursement or Obligation
11 / 03 / 2014
Disbursement For: General
2014

(a) SUBTOTAL of Itemized Independent Expenditures..... 20.14
(b) SUBTOTAL of Unitemized Independent Expenditures .....
(c) TOTAL Independent Expenditures.....

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Mrs. Teresa Doyle
[Electronically Filed]
Date
12 / 05 / 2014
Signature

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

NAME OF COMMITTEE (In Full) <b>TEXAS RIGHT TO LIFE POLITICAL ACTION C</b>		FEC IDENTIFICATION NUMBER <b>C</b> C00419242
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		MM / DD / YYYY

Full Name of Payee <b>Advanced Litho Printing</b>		Date of Public Distribution/Dissemination MM / DD / YYYY
Mailing Address 226 9th Avenue South		Amount 10.07
City Great Falls	State MT	Zip Code 59405
Purpose of Expenditure PRINTING NEWSLETTER WITH VOTER GUIDE	Category/Type 004	Transaction ID : <b>SE.5478</b> Date of Disbursement or Obligation MM / DD / YYYY 11 / 03 / 2014
Name of Federal Candidate ROGER WILLIAMS	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <u>25</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>TX</u>
Calendar Year-To-Date Per Election for Office Sought	10.07	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <b>Advanced Litho Printing</b>		Date of Public Distribution/Dissemination MM / DD / YYYY
Mailing Address 226 9th Avenue South		Amount 10.07
City Great Falls	State MT	Zip Code 59405
Purpose of Expenditure PRINTING NEWSLETTER WITH VOTER GUIDE	Category/Type 004	Transaction ID : <b>SE.5479</b> Date of Disbursement or Obligation MM / DD / YYYY 11 / 03 / 2014
Name of Federal Candidate MICHAEL C DR. BURGESS	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <u>26</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>TX</u>
Calendar Year-To-Date Per Election for Office Sought	10.07	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....▶	20.14
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures.....▶	
(c) <b>TOTAL</b> Independent Expenditures.....▶	

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Mrs. Teresa Doyle  
Signature

[Electronically Filed]

Date MM / DD / YYYY  
12 / 05 / 2014

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

NAME OF COMMITTEE (In Full) <b>TEXAS RIGHT TO LIFE POLITICAL ACTION C</b>	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> C00419242
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="float:right">M M M / D D D / Y Y Y Y Y Y</span>	

Full Name of Payee <b>Advanced Litho Printing</b>	Date of Public Distribution/Dissemination <span style="float:right">M M M / D D D / Y Y Y Y Y Y</span>
Mailing Address 226 9th Avenue South	Amount <span style="float:right">10.07</span>
City State Zip Code Great Falls MT 59405	<b>Transaction ID : SE.5480</b> Date of Disbursement or Obligation <span style="float:right">M M M / D D D / Y Y Y Y Y Y</span> 11 / 03 / 2014
Purpose of Expenditure PRINTING NEWSLETTER WITH VOTER GUIDE	Category/Type 004
Name of Federal Candidate RANDOLPH BLAKE FARENTHOLD	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 27 State: TX
Calendar Year-To-Date Per Election for Office Sought <span style="float:right">10.07</span>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <b>Advanced Litho Printing</b>	Date of Public Distribution/Dissemination <span style="float:right">M M M / D D D / Y Y Y Y Y Y</span>
Mailing Address 226 9th Avenue South	Amount <span style="float:right">10.07</span>
City State Zip Code Great Falls MT 59405	<b>Transaction ID : SE.5481</b> Date of Disbursement or Obligation <span style="float:right">M M M / D D D / Y Y Y Y Y Y</span> 11 / 03 / 2014
Purpose of Expenditure PRINTING NEWSLETTER WITH VOTER GUIDE	Category/Type 004
Name of Federal Candidate JOHN CARTER	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 31 State: TX
Calendar Year-To-Date Per Election for Office Sought <span style="float:right">10.07</span>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<span style="float:right">20.14</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	
(c) <b>TOTAL</b> Independent Expenditures..... ▶	

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Date M M M / D D D / Y Y Y Y Y Y  
12 / 05 / 2014

Signature Mrs. Teresa Doyle [Electronically Filed]



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

NAME OF COMMITTEE (In Full) <b>TEXAS RIGHT TO LIFE POLITICAL ACTION C</b>	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> C00419242
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="margin-left: 20px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name of Payee <b>Advanced Litho Printing</b>	Date of Public Distribution/Dissemination <span style="margin-left: 20px;">M M / D D / Y Y Y Y Y Y</span>
Mailing Address 226 9th Avenue South	Amount <span style="margin-left: 20px;">10.07</span>
City Great Falls	State MT
Zip Code 59405	<b>Transaction ID : SE.5482</b>
Purpose of Expenditure PRINTING NEWSLETTER WITH VOTER GUIDE	Date of Disbursement or Obligation <span style="margin-left: 20px;">M M / D D / Y Y Y Y Y Y</span> 11 / 03 / 2014
Name of Federal Candidate PETE SESSIONS	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: <u>32</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>TX</u>
Calendar Year-To-Date Per Election for Office Sought <span style="margin-left: 20px;">10.07</span>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <b>Advanced Litho Printing</b>	Date of Public Distribution/Dissemination <span style="margin-left: 20px;">M M / D D / Y Y Y Y Y Y</span>
Mailing Address 226 9th Avenue South	Amount <span style="margin-left: 20px;">10.07</span>
City Great Falls	State MT
Zip Code 59405	<b>Transaction ID : SE.5484</b>
Purpose of Expenditure PRINTING NEWSLETTER WITH VOTER GUIDE	Date of Disbursement or Obligation <span style="margin-left: 20px;">M M / D D / Y Y Y Y Y Y</span> 11 / 03 / 2014
Name of Federal Candidate SUSAN NARVAIZ	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: <u>35</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>TX</u>
Calendar Year-To-Date Per Election for Office Sought <span style="margin-left: 20px;">10.07</span>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<span style="margin-left: 20px;">20.14</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<span style="margin-left: 20px;"></span>
(c) <b>TOTAL</b> Independent Expenditures..... ▶	<span style="margin-left: 20px;"></span>

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. Teresa Doyle*  
 Signature \_\_\_\_\_ [Electronically Filed] Date M M / D D / Y Y Y Y Y Y  
12 / 05 / 2014

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 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee
Advanced Litho Printing
Mailing Address
226 9th Avenue South
City
Great Falls State
MT Zip Code
59405
Purpose of Expenditure
PRINTING NEWSLETTER WITH VOTER GUIDE
Category/Type
004

Date of Public Distribution/Dissemination
Amount
10.07
Transaction ID : SE.5486
Date of Disbursement or Obligation
11 / 03 / 2014

Name of Federal Candidate
BRIAN BABIN
Support
Office Sought: House
District: 36
State: TX

Disbursement For: General
Calendar Year-To-Date
Per Election for Office Sought
10.07

Full Name of Payee
United States Postal Service
Mailing Address
6500 De Moss Dr
City
Houston State
TX Zip Code
77074
Purpose of Expenditure
POSTAGE FOR NEWSLETTER WITH VOTER GUIDE
Category/Type
001

Date of Public Distribution/Dissemination
Amount
3.80
Transaction ID : SE.5416
Date of Disbursement or Obligation
11 / 06 / 2014

Name of Federal Candidate
JOHN CORNYN
Support
Office Sought: Senate
State: TX

Disbursement For: General
Calendar Year-To-Date
Per Election for Office Sought
13.86

(a) SUBTOTAL of Itemized Independent Expenditures 13.87
(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. Teresa Doyle
[Electronically Filed]
Date 12 / 05 / 2014
Signature

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

NAME OF COMMITTEE (In Full) <b>TEXAS RIGHT TO LIFE POLITICAL ACTION C</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <b>C</b> C00419242
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="margin-left: 20px;">M M M / D D D / Y Y Y Y Y Y</span>	

Full Name of Payee <b>United States Postal Service</b>	Date of Public Distribution/Dissemination <span style="margin-left: 20px;">M M M / D D D / Y Y Y Y Y Y</span>
Mailing Address 6500 De Moss Dr	Amount <span style="margin-left: 20px;">3.80</span>
City State Zip Code Houston TX 77074	<b>Transaction ID : SE.5417</b> Date of Disbursement or Obligation <span style="margin-left: 20px;">M M M / D D D / Y Y Y Y Y Y</span> 11 / 06 / 2014
Purpose of Expenditure POSTAGE FOR NEWSLETTER WITH VOTER GUIDE	Category/Type 001
Name of Federal Candidate LOUIE GOHMERT	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 01 State: TX
Calendar Year-To-Date Per Election for Office Sought <span style="margin-left: 20px;">13.86</span>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <b>United States Postal Service</b>	Date of Public Distribution/Dissemination <span style="margin-left: 20px;">M M M / D D D / Y Y Y Y Y Y</span>
Mailing Address 6500 De Moss Dr	Amount <span style="margin-left: 20px;">3.80</span>
City State Zip Code Houston TX 77074	<b>Transaction ID : SE.5418</b> Date of Disbursement or Obligation <span style="margin-left: 20px;">M M M / D D D / Y Y Y Y Y Y</span> 11 / 06 / 2014
Purpose of Expenditure POSTAGE FOR NEWSLETTER WITH VOTER GUIDE	Category/Type 001
Name of Federal Candidate TED POE	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 02 State: TX
Calendar Year-To-Date Per Election for Office Sought <span style="margin-left: 20px;">13.86</span>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<span style="margin-left: 20px;">7.60</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<span style="margin-left: 20px;"> </span>
(c) <b>TOTAL</b> Independent Expenditures..... ▶	<span style="margin-left: 20px;"> </span>

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*Mrs. Teresa Doyle*

[Electronically Filed]

Signature \_\_\_\_\_ Date M M M / D D D / Y Y Y Y Y Y  
12 / 05 / 2014

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 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee: United States Postal Service
Mailing Address: 6500 De Moss Dr
City: Houston State: TX Zip Code: 77074
Purpose of Expenditure: POSTAGE FOR NEWSLETTER WITH VOTER GUIDE
Category/Type: 001
Date of Public Distribution/Dissemination: 11/06/2014
Amount: 3.80
Transaction ID: SE.5419
Date of Disbursement or Obligation: 11/06/2014
Name of Federal Candidate: SAMUEL R HON. JOHNSON
Support: [X] Oppose: [ ]
Office Sought: House [X] Senate [ ]
District: 03 State: TX
Calendar Year-To-Date Per Election for Office Sought: 13.86
Disbursement For: Primary [ ] General [X] Other [ ]

Full Name of Payee: United States Postal Service
Mailing Address: 6500 De Moss Dr
City: Houston State: TX Zip Code: 77074
Purpose of Expenditure: POSTAGE FOR NEWSLETTER WITH VOTER GUIDE
Category/Type: 001
Date of Public Distribution/Dissemination: 11/06/2014
Amount: 3.80
Transaction ID: SE.5423
Date of Disbursement or Obligation: 11/06/2014
Name of Federal Candidate: JEB MR. HENSARLING
Support: [X] Oppose: [ ]
Office Sought: House [X] Senate [ ]
District: 05 State: TX
Calendar Year-To-Date Per Election for Office Sought: 13.86
Disbursement For: Primary [ ] General [X] Other [ ]

(a) SUBTOTAL of Itemized Independent Expenditures: 7.60
(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. Teresa Doyle [Electronically Filed] Date 12/05/2014
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 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee: United States Postal Service
Mailing Address: 6500 De Moss Dr
City: Houston State: TX Zip Code: 77074
Purpose of Expenditure: POSTAGE FOR NEWSLETTER WITH VOTER GUIDE
Category/Type: 001
Date of Public Distribution/Dissemination: 11/06/2014
Amount: 3.80
Transaction ID: SE.5425
Date of Disbursement or Obligation: 11/06/2014
Name of Federal Candidate: JOE LINUS BARTON
Support: [X] Oppose: [ ]
Office Sought: [X] House [ ] President [ ] Senate
District: 07 State: TX
Calendar Year-To-Date Per Election for Office Sought: 13.86
Disbursement For: [ ] Primary [X] General 2014 [ ] Other (specify)

Full Name of Payee: United States Postal Service
Mailing Address: 6500 De Moss Dr
City: Houston State: TX Zip Code: 77074
Purpose of Expenditure: POSTAGE FOR NEWSLETTER WITH VOTER GUIDE
Category/Type: 001
Date of Public Distribution/Dissemination: 11/06/2014
Amount: 3.80
Transaction ID: SE.5427
Date of Disbursement or Obligation: 11/06/2014
Name of Federal Candidate: KEVIN BRADY
Support: [X] Oppose: [ ]
Office Sought: [X] House [ ] President [ ] Senate
District: 08 State: TX
Calendar Year-To-Date Per Election for Office Sought: 13.86
Disbursement For: [ ] Primary [X] General 2014 [ ] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures..... 7.60
(b) SUBTOTAL of Unitemized Independent Expenditures .....
(c) TOTAL Independent Expenditures.....

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Mrs. Teresa Doyle
[Electronically Filed]
Date 12/05/2014
Signature

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

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

Full Name of Payee <b>United States Postal Service</b>		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y
Mailing Address 6500 De Moss Dr		Amount 3.79
City Houston	State TX	Zip Code 77074
Purpose of Expenditure POSTAGE FOR NEWSLETTER WITH VOTER GUIDE		Transaction ID : <b>SE.5428</b>
Category/Type 001		Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 11 / 06 / 2014
Name of Federal Candidate MICHAEL MCCAUL	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <u>10</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>TX</u>
Calendar Year-To-Date Per Election for Office Sought	13.85	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <b>United States Postal Service</b>		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y
Mailing Address 6500 De Moss Dr		Amount 3.79
City Houston	State TX	Zip Code 77074
Purpose of Expenditure POSTAGE FOR NEWSLETTER WITH VOTER GUIDE		Transaction ID : <b>SE.5429</b>
Category/Type 001		Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 11 / 06 / 2014
Name of Federal Candidate K. MICHAEL HON. CONAWAY	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <u>11</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>TX</u>
Calendar Year-To-Date Per Election for Office Sought	13.85	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	7.58
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	
(c) <b>TOTAL</b> 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. Teresa Doyle*  
Signature

[Electronically Filed] Date M M / D D / Y Y Y Y Y Y  
12 / 05 / 2014

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 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee: United States Postal Service
Mailing Address: 6500 De Moss Dr
City: Houston State: TX Zip Code: 77074
Purpose of Expenditure: POSTAGE FOR NEWSLETTER WITH VOTER GUIDE
Category/Type: 001
Date of Public Distribution/Dissemination: 11/06/2014
Amount: 3.79
Transaction ID: SE.5430
Name of Federal Candidate: MAC THORNBERRY
Support: [X]
Office Sought: House District: 13 State: TX
Disbursement For: General 2014
Calendar Year-To-Date Per Election for Office Sought: 13.86

Full Name of Payee: United States Postal Service
Mailing Address: 6500 De Moss Dr
City: Houston State: TX Zip Code: 77074
Purpose of Expenditure: POSTAGE FOR NEWSLETTER WITH VOTER GUIDE
Category/Type: 001
Date of Public Distribution/Dissemination: 11/06/2014
Amount: 3.79
Transaction ID: SE.5431
Name of Federal Candidate: RANDY WEBER
Support: [X]
Office Sought: House District: 14 State: TX
Disbursement For: General 2014
Calendar Year-To-Date Per Election for Office Sought: 13.86

(a) SUBTOTAL of Itemized Independent Expenditures: 7.58
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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Mrs. Teresa Doyle
[Electronically Filed]
Date: 12/05/2014
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 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee: United States Postal Service
Mailing Address: 6500 De Moss Dr
City: Houston State: TX Zip Code: 77074
Purpose of Expenditure: POSTAGE FOR NEWSLETTER WITH VOTER GUIDE
Category/Type: 001
Date of Public Distribution/Dissemination: 11/06/2014
Amount: 3.79
Transaction ID: SE.5432
Name of Federal Candidate: BILL FLORES
Support: [X] Oppose: [ ]
Office Sought: House [X] Senate [ ]
District: 17 State: TX
Calendar Year-To-Date Per Election for Office Sought: 13.86
Disbursement For: Primary [ ] General [X] Other [ ]

Full Name of Payee: United States Postal Service
Mailing Address: 6500 De Moss Dr
City: Houston State: TX Zip Code: 77074
Purpose of Expenditure: POSTAGE FOR NEWSLETTER WITH VOTER GUIDE
Category/Type: 001
Date of Public Distribution/Dissemination: 11/06/2014
Amount: 3.79
Transaction ID: SE.5434
Name of Federal Candidate: RANDY NEUGEBAUER
Support: [X] Oppose: [ ]
Office Sought: House [X] Senate [ ]
District: 19 State: TX
Calendar Year-To-Date Per Election for Office Sought: 13.86
Disbursement For: Primary [ ] General [X] Other [ ]

(a) SUBTOTAL of Itemized Independent Expenditures: 7.58
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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Mrs. Teresa Doyle
[Electronically Filed]
Date: 12/05/2014
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 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee: United States Postal Service
Mailing Address: 6500 De Moss Dr
City: Houston State: TX Zip Code: 77074
Purpose of Expenditure: POSTAGE FOR NEWSLETTER WITH VOTER GUIDE
Category/Type: 001
Date of Public Distribution/Dissemination: 11/06/2014
Amount: 3.79
Transaction ID: SE.5435
Name of Federal Candidate: LAMAR SMITH
Support: [X] Oppose: [ ]
Office Sought: House [X] Senate [ ]
District: 21 State: TX
Disbursement For: Primary [ ] General [X] Other [ ]
Calendar Year-To-Date Per Election for Office Sought: 13.86

Full Name of Payee: United States Postal Service
Mailing Address: 6500 De Moss Dr
City: Houston State: TX Zip Code: 77074
Purpose of Expenditure: POSTAGE FOR NEWSLETTER WITH VOTER GUIDE
Category/Type: 001
Date of Public Distribution/Dissemination: 11/06/2014
Amount: 3.79
Transaction ID: SE.5437
Name of Federal Candidate: PETER GRAHAM OLSON
Support: [X] Oppose: [ ]
Office Sought: House [X] Senate [ ]
District: 22 State: TX
Disbursement For: Primary [ ] General [X] Other [ ]
Calendar Year-To-Date Per Election for Office Sought: 13.86

(a) SUBTOTAL of Itemized Independent Expenditures: 7.58
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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Mrs. Teresa Doyle
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Date: 12/05/2014
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 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee: United States Postal Service
Mailing Address: 6500 De Moss Dr
City: Houston State: TX Zip Code: 77074
Purpose of Expenditure: POSTAGE FOR NEWSLETTER WITH VOTER GUIDE
Category/Type: 001
Name of Federal Candidate: KENNY E MR. MARCHANT
Support: [X]
Office Sought: [X] House District: 24 State: TX
Calendar Year-To-Date Per Election for Office Sought: 13.86
Disbursement For: [X] General 2014

Full Name of Payee: United States Postal Service
Mailing Address: 6500 De Moss Dr
City: Houston State: TX Zip Code: 77074
Purpose of Expenditure: POSTAGE FOR NEWSLETTER WITH VOTER GUIDE
Category/Type: 001
Name of Federal Candidate: ROGER WILLIAMS
Support: [X]
Office Sought: [X] House District: 25 State: TX
Calendar Year-To-Date Per Election for Office Sought: 13.86
Disbursement For: [X] General 2014

(a) SUBTOTAL of Itemized Independent Expenditures: 7.58
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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Mrs. Teresa Doyle
[Electronically Filed]
Date: 12 / 05 / 2014

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 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee: United States Postal Service
Mailing Address: 6500 De Moss Dr
City: Houston State: TX Zip Code: 77074
Purpose of Expenditure: POSTAGE FOR NEWSLETTER WITH VOTER GUIDE
Category/Type: 001
Date of Public Distribution/Dissemination: 11/06/2014
Amount: 3.79
Transaction ID: SE.5442
Name of Federal Candidate: MICHAEL C DR. BURGESS
Support: [X] Oppose: [ ]
Office Sought: House [X] Senate [ ]
District: 26 State: TX
Calendar Year-To-Date Per Election for Office Sought: 13.86
Disbursement For: Primary [ ] General [X] Other [ ]

Full Name of Payee: United States Postal Service
Mailing Address: 6500 De Moss Dr
City: Houston State: TX Zip Code: 77074
Purpose of Expenditure: POSTAGE FOR NEWSLETTER WITH VOTER GUIDE
Category/Type: 001
Date of Public Distribution/Dissemination: 11/06/2014
Amount: 3.80
Transaction ID: SE.5445
Name of Federal Candidate: JOHN LEE RATCLIFFE
Support: [X] Oppose: [ ]
Office Sought: House [X] Senate [ ]
District: 04 State: TX
Calendar Year-To-Date Per Election for Office Sought: 57.57
Disbursement For: Primary [ ] General [X] Other [ ]

(a) SUBTOTAL of Itemized Independent Expenditures: 7.59
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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Mrs. Teresa Doyle
[Electronically Filed]
Date: 12/05/2014
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 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee
United States Postal Service
Mailing Address
6500 De Moss Dr
City
Houston State
TX Zip Code
77074
Date of Public Distribution/Dissemination
Amount
3.79
Transaction ID : SE.5446
Date of Disbursement or Obligation
11 / 06 / 2014
Purpose of Expenditure
POSTAGE FOR NEWSLETTER WITH VOTER GUIDE
Category/Type
001
Name of Federal Candidate
RANDOLPH BLAKE FARENTHOLD
Support
Office Sought: House District: 27
State: TX
Calendar Year-To-Date
Per Election for Office Sought
13.86
Disbursement For: General
2014

Full Name of Payee
United States Postal Service
Mailing Address
6500 De Moss Dr
City
Houston State
TX Zip Code
77074
Date of Public Distribution/Dissemination
Amount
3.79
Transaction ID : SE.5447
Date of Disbursement or Obligation
11 / 06 / 2014
Purpose of Expenditure
POSTAGE FOR NEWSLETTER WITH VOTER GUIDE
Category/Type
001
Name of Federal Candidate
JOHN CARTER
Support
Office Sought: House District: 31
State: TX
Calendar Year-To-Date
Per Election for Office Sought
13.86
Disbursement For: General
2014

(a) SUBTOTAL of Itemized Independent Expenditures..... 7.58
(b) SUBTOTAL of Unitemized Independent Expenditures .....
(c) TOTAL Independent Expenditures.....

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Mrs. Teresa Doyle
[Electronically Filed]
Date
12 / 05 / 2014
Signature

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

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

Full Name of Payee <b>United States Postal Service</b>	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 6500 De Moss Dr	Amount <input type="text"/> 3.79
City State Zip Code Houston TX 77074	Transaction ID : <b>SE.5449</b>
Purpose of Expenditure POSTAGE FOR NEWSLETTER WITH VOTER GUIDE	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Category/Type 001	<input type="text"/> 11 / <input type="text"/> 06 / <input type="text"/> 2014
Name of Federal Candidate PETE SESSIONS	Office Sought: <input checked="" type="checkbox"/> House District: 32 <input type="checkbox"/> President <input type="checkbox"/> Senate State: TX
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶
<input type="text"/> 13.86	

Full Name of Payee <b>United States Postal Service</b>	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 6500 De Moss Dr	Amount <input type="text"/> 3.79
City State Zip Code Houston TX 77074	Transaction ID : <b>SE.5450</b>
Purpose of Expenditure POSTAGE FOR NEWSLETTER WITH VOTER GUIDE	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Category/Type 001	<input type="text"/> 11 / <input type="text"/> 06 / <input type="text"/> 2014
Name of Federal Candidate SUSAN NARVAIZ	Office Sought: <input checked="" type="checkbox"/> House District: 35 <input type="checkbox"/> President <input type="checkbox"/> Senate State: TX
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶
<input type="text"/> 13.86	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<input type="text"/> 7.58
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures..... ▶	<input type="text"/>
(c) <b>TOTAL</b> Independent Expenditures..... ▶	<input type="text"/>

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Signature Mrs. Teresa Doyle [Electronically Filed] Date  12 /  05 /  2014

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 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee
United States Postal Service
Mailing Address
6500 De Moss Dr
City
Houston State
TX Zip Code
77074
Date of Public Distribution/Dissemination
Amount
3.79
Transaction ID : SE.5452
Date of Disbursement or Obligation
11 / 06 / 2014
Purpose of Expenditure
POSTAGE FOR NEWSLETTER WITH VOTER GUIDE
Category/Type
001
Name of Federal Candidate
BRIAN BABIN
Support
Office Sought: House District: 36
State: TX
Calendar Year-To-Date
Per Election for Office Sought
13.86
Disbursement For: General
2014

Full Name of Payee
United States Postal Service
Mailing Address
6500 De Moss Dr
City
Houston State
TX Zip Code
77074
Date of Public Distribution/Dissemination
Amount
3.80
Transaction ID : SE.5455
Date of Disbursement or Obligation
11 / 06 / 2014
Purpose of Expenditure
POSTAGE FOR NEWSLETTER WITH VOTER GUIDE
Category/Type
001
Name of Federal Candidate
JOHN CULBERSON
Support
Office Sought: House District: 07
State: TX
Calendar Year-To-Date
Per Election for Office Sought
17.66
Disbursement For: General
2014

(a) SUBTOTAL of Itemized Independent Expenditures..... 7.59
(b) SUBTOTAL of Unitemized Independent Expenditures .....
(c) TOTAL Independent Expenditures..... 346.48

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Mrs. Teresa Doyle
[Electronically Filed]
Date 12 / 05 / 2014
Signature