24 hour notice of independent expenditure, on : 12/30/1899

National Right to Life Political Action Committee

512 10th Street, N.W.

Washington DC 20004

10/31/2002 12 : 03

FEC ID No. C00111278

SCHEDULE E (FEC Form 3X)

ITEMIZED INDEPENDENT EXPENDITURES

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full): National Right to Life Political Action Committee

FEC IDENTIFICATION NUMBER: C00111278

Full Name (Last, First, Middle Initial) of Payee: In Touch Systems

Mailing Address: 5149 Cotton Rd.

City: Roswell State: NM Zip Code: 88201-

Date: 10 30 2002

Transaction ID: 1031200238E8857

Amount: 1055.43

Purpose of Expenditure:

Category/Type:

Name of Federal Candidate supported or opposed by expenditure:

Office Sought: ___ House ___ Senate ___ Presidential

State: ____ District: ____

Check One: X Support ___ Oppose

Full Name (Last, First, Middle Initial) of Payee: In Touch Systems

Mailing Address: 5149 Cotton Rd.

City: Roswell State: NM Zip Code: 88201-

Date: 10 30 2002

Transaction ID: 1031200238E8858

Amount: 1731.55

Purpose of Expenditure:

Category/Type:

Name of Federal Candidate supported or opposed by expenditure: ALLARD, A WAYNE

Office Sought: ___ House X Senate ___ Presidential

State: CO District: 00

Check One: X Support ___ Oppose

Full Name (Last, First, Middle Initial) of Payee: In Touch Systems

Mailing Address: 5149 Cotton Rd.

City: Roswell State: NM Zip Code: 88201-

Date: 10 30 2002

Transaction ID: 1031200238E8860

Amount: 2982.10

Purpose of Expenditure:

Category/Type:

Name of Federal Candidate supported or opposed by expenditure: CORNYN, JOHN

Office Sought: ___ House X Senate ___ Presidential

State: TX District: 00

Check One: X Support ___ Oppose

(a) SUBTOTAL of Itemized Independent Expenditures ..... $ **5769.08**

(b) SUBTOTAL of Unitemized Independent Expenditures ..... $ **0.00**

(c) TOTAL Independent Expenditures ..... $

[illegible]

Subscribed and sworn to before me this M M D D Y Y Y Y day of

My Commission expires: M M D D Y Y Y Y

Signature

Date M M D D Y Y Y Y

NOTARY PUBLIC

FEC Schedule E (Form 3X) (Revised 2003)

24 hour notice of independent expenditure, on :

FEC ID No.

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)

FEC IDENTIFICATION NUMBER

Full Name (Last, First, Middle Initial) of Payee	Purpose of Expenditure	Category/ Type
In Touch Systems		
Mailing Address: 5149 Cotton Rd.	Name of Federal Candidate supported or opposed by expenditure: SUNUNU, JOHN E	
City: Roswell; State: NM; Zip Code: 88201-		
Date: 10 30 2002	Transaction ID: 1031200238E8659; Amount: 1077.33	Office Sought: ___ House; X Senate; ___ Presidential; State: NH; District: 00; Check One: X Support; Oppose

Full Name (Last, First, Middle Initial) of Payee	Purpose of Expenditure	Category/ Type
Kkcs		
Mailing Address: 5145 Continental Drive	Name of Federal Candidate supported or opposed by expenditure: ALLARD, A WAYNE	
City: Colorado Springs; State: CO; Zip Code: 80948-		
Date: 10 30 2002	Transaction ID: 1031200238E8661; Amount: 1650.00	Office Sought: House; X Senate; Presidential; State: CO; District: 00; Check One: X Support; Oppose

Full Name (Last, First, Middle Initial) of Payee	Purpose of Expenditure	Category/ Type
Kldr		
Mailing Address: P.O. Box 130	Name of Federal Candidate supported or opposed by expenditure: TALENT, JAMES MATTHES	
City: Poplar Bluff; State: MO; Zip Code: 63902-		
Date: 10 30 2002	Transaction ID: 1031200025E8666; Amount: 2040.00	Office Sought: ___ House; X Senate; Presidential; State: MO; District: 00; Check One: X Support; Oppose

(a) SUBTOTAL of Itemized Independent Expenditures ..... $ **4767.33**

(b) SUBTOTAL of Unitemized Independent Expenditures ..... $ **0.00**

(c) TOTAL Independent Expenditures ..... $

[illegible]

Subscribed and sworn to before me this M M D D Y Y Y Y day of

My Commission expires: M M D D Y Y Y Y

Signature

Date M M D D Y Y Y Y

NOTARY PUBLIC

24 hour notice of independent expenditure, on :

FEC ID No.

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)

FEC IDENTIFICATION NUMBER

Full Name (Last, First, Middle Initial) of Payee: Kpnc
Mailing Address: 3050 Post Oak Blvd.
City: Houston State: TX Zip Code: 77056-
Date: 10 30 2002
Transaction ID: 1031200238E8663
Amount: 4200.00
Purpose of Expenditure:
Category/Type:
Name of Federal Candidate supported or opposed by expenditure: REISER, THOMAS A
Office Sought: X House ___ Senate ___ Presidential
State: TX District: 25
Check One: X Support ___ Oppose

Full Name (Last, First, Middle Initial) of Payee: Kpnc
Mailing Address: 3050 Post Oak Blvd.
City: Houston State: TX Zip Code: 77056-
Date: 10 30 2002
Transaction ID: 1031200238E8662
Amount: 4200.00
Purpose of Expenditure:
Category/Type:
Name of Federal Candidate supported or opposed by expenditure: CORNYN, JOHN
Office Sought: ___ House X Senate ___ Presidential
State: TX District: 00
Check One: X Support ___ Oppose

Full Name (Last, First, Middle Initial) of Payee: WKAK
Mailing Address: 1104 W. Broad Ave.
City: Albany State: GA Zip Code: 31707-
Date: 10 30 2002
Transaction ID: 1031200238E8654
Amount: 1050.00
Purpose of Expenditure:
Category/Type:
Name of Federal Candidate supported or opposed by expenditure: CHAMBLISS, SAXBY
Office Sought: ___ House X Senate ___ Presidential
State: GA District: 00
Check One: X Support ___ Oppose

(a) SUBTOTAL of Itemized Independent Expenditures ..... $ 9450.00
(b) SUBTOTAL of Unitemized Independent Expenditures ..... $ 0.00
(c) TOTAL Independent Expenditures ..... $

[illegible]

Subscribed and sworn to before me this M M D D Y Y Y Y day of

My Commission expires: M M D D Y Y Y Y

Signature
Date M M D D Y Y Y Y

NOTARY PUBLIC

24 hour notice of independent expenditure, on :

FEC ID No.

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)

FEC IDENTIFICATION NUMBER

Full Name (Last, First, Middle Initial) of Payee	Purpose of Expenditure	Category/ Type
Wjcl		
Mailing Address: 214 TV Circle	Name of Federal Candidate supported or opposed by expenditure: CHAMBLISS, SAXBY	
City: Savannah; State: GA; Zip Code: 31406-		
Date: 10 30 2002	Transaction ID: 1031200238E8664; Amount: 1005.00	Office Sought: ___ House; X Senate; ___ Presidential; State: GA; District: 00; Check One: X Support; Oppose

Full Name (Last, First, Middle Initial) of Payee	Purpose of Expenditure	Category/ Type
Wjcl		
Mailing Address: 214 TV Circle	Name of Federal Candidate supported or opposed by expenditure:	
City: Savannah; State: GA; Zip Code: 31406-		
Date: 10 30 2002	Transaction ID: 1031200238E8665; Amount: 1005.00	Office Sought: House; Senate; ___ Presidential; State: ___; District: ___; Check One: X Support; Oppose

Full Name (Last, First, Middle Initial) of Payee	Purpose of Expenditure	Category/ Type
Wngc-fm		
Mailing Address: 950 Bobbin Mill Road	Name of Federal Candidate supported or opposed by expenditure: CHAMBLISS, SAXBY	
City: Athens; State: GA; Zip Code: 30606-		
Date: 10 30 2002	Transaction ID: 1031200238E8655; Amount: 2670.00	Office Sought: ___ House; X Senate; Presidential; State: GA; District: 00; Check One: X Support; Oppose

(a) SUBTOTAL of Itemized Independent Expenditures ..... $ 4680.00

(b) SUBTOTAL of Unitemized Independent Expenditures ..... $ 0.00

(c) TOTAL Independent Expenditures ..... $

[illegible]

Subscribed and sworn to before me this M M D D Y Y Y Y day of

My Commission expires: M M D D Y Y Y Y

Signature

Date M M D D Y Y Y Y

NOTARY PUBLIC

FEC Schedule E (Form 3X) (Revised 2003)

24 hour notice of independent expenditure, on :

FEC ID No.

SCHEDULE E (FEC Form 3X)

ITEMIZED INDEPENDENT EXPENDITURES

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER

Full Name (Last, First, Middle Initial) of Payee	Purpose of Expenditure	
Wipch		Category/ Type
Mailing Address 1819 Peachtree Street	Name of Federal Candidate supported or opposed by expenditure: CHAMBLISS, SAXBY	
City: Atlanta State: GA Zip Code: 30309-		
Date: M M 10 D D 30 Y Y Y Y 2002	**Transaction ID:** 1031200238E8656 Amount: 15000.00	Office Sought: ___ House; X Senate; ___ Presidential State: GA District: 00 Check One: X Support ___ Oppose

(a) SUBTOTAL of Itemized Independent Expenditures	15000.00	
(b) SUBTOTAL of Unitemized Independent Expenditures	0.00	
(c) TOTAL Independent Expenditures		39666.41

[illegible] Subscribed and sworn to before me this M M D D Y Y Y Y day of

My Commission expires: M M D D Y Y Y Y

Signature

Date M M D D Y Y Y Y

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