

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)

 PAGE 1 OF 7
 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Right to Life of Michigan Political Action Committee		FEC IDENTIFICATION NUMBER ▼ C C00101212	
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee Western American Mailers		Date of Public Distribution/Dissemination MM / DD / YYYY	
Mailing Address 5510 - 33rd, SE		Amount 53.22	
City Grand Rapids	State MI	Zip Code 49512	Transaction ID : SE.11545
Purpose of Expenditure Postage, 1st CD Flier	Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 07 / 23 / 2014	
Name of Federal Candidate TERRI LYNN LAND		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: MI	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee Western American Mailers		Date of Public Distribution/Dissemination MM / DD / YYYY	
Mailing Address 5510 - 33rd, SE		Amount 74.23	
City Grand Rapids	State MI	Zip Code 49512	Transaction ID : SE.11546
Purpose of Expenditure Postage, 2nd CD Flier	Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 07 / 23 / 2014	
Name of Federal Candidate TERRI LYNN LAND		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: MI	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	127.45
(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.

Kristina Gruchow
[Electronically Filed]

Date

 MM / DD / YYYY
07 / 23 / 2014

Signature

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NAME OF COMMITTEE (In Full) Right to Life of Michigan Political Action Committee		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00101212 </div>
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		

Full Name of Payee Western American Mailers		Date of Public Distribution/Dissemination MM / DD / YYYY	
Mailing Address 5510 - 33rd, SE		Amount 209.42	
City Grand Rapids	State MI	Zip Code 49512	Transaction ID : SE.11547
Purpose of Expenditure Postage, 3rd CD Flier	Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 07 / 23 / 2014	
Name of Federal Candidate TERRI LYNN LAND		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: MI	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee Western American Mailers		Date of Public Distribution/Dissemination MM / DD / YYYY	
Mailing Address 5510 - 33rd, SE		Amount 139.61	
City Grand Rapids	State MI	Zip Code 49512	Transaction ID : SE.11548
Purpose of Expenditure Postage, 4th CD Flier	Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 07 / 23 / 2014	
Name of Federal Candidate TERRI LYNN LAND		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: MI	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	349.03
(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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Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		

Full Name of Payee Western American Mailers		Date of Public Distribution/Dissemination MM / DD / YYYY	
Mailing Address 5510 - 33rd, SE		Amount 220.99	
City Grand Rapids	State MI	Zip Code 49512	Transaction ID : SE.11549
Purpose of Expenditure Postage, 5th CD Flier	Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 07 / 23 / 2014	
Name of Federal Candidate TERRI LYNN LAND		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: MI	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee Western American Mailers		Date of Public Distribution/Dissemination MM / DD / YYYY	
Mailing Address 5510 - 33rd, SE		Amount 127.85	
City Grand Rapids	State MI	Zip Code 49512	Transaction ID : SE.11550
Purpose of Expenditure Postage, 6th CD Flier	Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 07 / 23 / 2014	
Name of Federal Candidate TERRI LYNN LAND		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: MI	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	348.84
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

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NAME OF COMMITTEE (In Full) Right to Life of Michigan Political Action Committee		FEC IDENTIFICATION NUMBER ▼ C C00101212	
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee Western American Mailers		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y	
Mailing Address 5510 - 33rd, SE		Amount 126.44	
City Grand Rapids	State MI	Zip Code 49512	Transaction ID : SE.11551
Purpose of Expenditure Postage, 7th CD Flier	Category/ Type 004	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 07 / 23 / 2014	
Name of Federal Candidate TERRI LYNN LAND		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: MI	
Calendar Year-To-Date Per Election for Office Sought 1017.16		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee Western American Mailers		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y	
Mailing Address 5510 - 33rd, SE		Amount 77.28	
City Grand Rapids	State MI	Zip Code 49512	Transaction ID : SE.11552
Purpose of Expenditure Postage, 8th CD Flier	Category/ Type 004	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 07 / 23 / 2014	
Name of Federal Candidate TERRI LYNN LAND		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: MI	
Calendar Year-To-Date Per Election for Office Sought 1094.44		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	203.72
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

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NAME OF COMMITTEE (In Full) Right to Life of Michigan Political Action Committee		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00101212 </div>
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		

Full Name of Payee Western American Mailers		Date of Public Distribution/Dissemination MM / DD / YYYY	
Mailing Address 5510 - 33rd, SE		Amount 100.44	
City Grand Rapids	State MI	Zip Code 49512	Transaction ID : SE.11553
Purpose of Expenditure Postage, 9th CD Flier	Category/Type 004		Date of Disbursement or Obligation MM / DD / YYYY 07 / 23 / 2014
Name of Federal Candidate TERRI LYNN LAND		<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: MI
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee Western American Mailers		Date of Public Distribution/Dissemination MM / DD / YYYY	
Mailing Address 5510 - 33rd, SE		Amount 63.74	
City Grand Rapids	State MI	Zip Code 49512	Transaction ID : SE.11554
Purpose of Expenditure Postage, 10th CD Flier	Category/Type 004		Date of Disbursement or Obligation MM / DD / YYYY 07 / 23 / 2014
Name of Federal Candidate TERRI LYNN LAND		<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: MI
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	164.18
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

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Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		MM / DD / YYYY

Full Name of Payee Western American Mailers		Date of Public Distribution/Dissemination MM / DD / YYYY
Mailing Address 5510 - 33rd, SE		Amount 53.30
City Grand Rapids	State MI	Zip Code 49512
Purpose of Expenditure Postage, 11th CD Flier	Category/ Type 004	Transaction ID : SE.11555 Date of Disbursement or Obligation MM / DD / YYYY 07 / 23 / 2014
Name of Federal Candidate TERRI LYNN LAND	<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: MI
Calendar Year-To-Date Per Election for Office Sought 1311.92		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee Western American Mailers		Date of Public Distribution/Dissemination MM / DD / YYYY
Mailing Address 5510 - 33rd, SE		Amount 174.10
City Grand Rapids	State MI	Zip Code 49512
Purpose of Expenditure Postage, 12th CD Flier	Category/ Type 004	Transaction ID : SE.11556 Date of Disbursement or Obligation MM / DD / YYYY 07 / 23 / 2014
Name of Federal Candidate TERRI LYNN LAND	<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: MI
Calendar Year-To-Date Per Election for Office Sought 1486.02		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	227.40
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

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NAME OF COMMITTEE (In Full) Right to Life of Michigan Political Action Committee		FEC IDENTIFICATION NUMBER ▼ C C00101212
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		MM / DD / YYYY

Full Name of Payee Western American Mailers		Date of Public Distribution/Dissemination MM / DD / YYYY
Mailing Address 5510 - 33rd, SE		Amount 91.75
City Grand Rapids	State MI	Zip Code 49512
Purpose of Expenditure Postage, 13th CD Flier	Category/ Type 004	Transaction ID : SE.11557 Date of Disbursement or Obligation MM / DD / YYYY 07 / 23 / 2014
Name of Federal Candidate TERRI LYNN LAND	<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: MI
Calendar Year-To-Date Per Election for Office Sought 1577.77		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee Western American Mailers		Date of Public Distribution/Dissemination MM / DD / YYYY
Mailing Address 5510 - 33rd, SE		Amount 102.89
City Grand Rapids	State MI	Zip Code 49512
Purpose of Expenditure Postage, 14th CD Flier	Category/ Type 004	Transaction ID : SE.11558 Date of Disbursement or Obligation MM / DD / YYYY 07 / 23 / 2014
Name of Federal Candidate TERRI LYNN LAND	<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: MI
Calendar Year-To-Date Per Election for Office Sought 1680.66		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	194.64
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	1615.26

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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