

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 National Right to Life Victory Fund

ADDRESS (number and street) 512 10th Street, NW Washington DC 20004

2. FEC IDENTIFICATION NUMBER C C00509893 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year, Termination Report (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31 (c) 12-Day PRE-Election Report for the: Primary, General, Runoff, Convention, Special (d) 30-Day POST-Election Report for the: General, Runoff, Special

5. Covering Period 08 / 03 / 2014 through 09 / 30 / 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 Wayne Cockfield

Signature of Treasurer Wayne Cockfield [Electronically Filed] Date 10 / 15 / 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.

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

**National Right to Life Victory Fund**

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"/>		199545.70
(b) Cash on Hand at Beginning of Reporting Period.....	469733.09	
(c) Total Receipts (from Line 19) .....	183055.69	860577.74
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	652788.78	1060123.44
7. Total Disbursements (from Line 31).....	161859.64	569194.30
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	490929.14	490929.14
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	221827.10	

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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

**National Right to Life Victory Fund**

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).....	80018.75	400657.65
(ii) Unitemized .....	103036.94	449920.09
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	183055.69	850577.74
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	10000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	183055.69	860577.74
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))..... ▶	183055.69	860577.74
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	183055.69	860577.74

**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 .....	146697.58	520684.01
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	146697.58	520684.01
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E) .....	15162.06	43354.29
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	5156.00
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)) ..	161859.64	569194.30
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	161859.64	569194.30

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

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) .....	183055.69	860577.74
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	183055.69	860577.74
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	146697.58	520684.01
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	146697.58	520684.01

: 97 `A-G79 @C5 B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFH`G7 <98I @ `CF`-H9A-N5HCB

Form/Schedule: F3XN  
Transaction ID :

Memo#1: The Committee is aware of the regulations regarding the disclosure of the name, address, employer and occupation of every contributor who contributes more than \$200 aggregate in a calendar year. The Committee fully discloses all contributor names and other information as they are indicated by the contributor. Every solicitation includes a clear and conspicuous request for the contributor information and informs the contributor of the requirements of federal law to report this information. If the information is not received with the contribution, the contributor is contacted per FEC guidelines by mail, telephone or email to obtain the missing information. All requests clearly ask for the missing information without soliciting further contributions, inform the contributor of the requirements of federal law for reporting this information, and, if the request is by mail, include a pre-addressed return envelope.

Form/Schedule:  
Transaction ID:

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 89
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**National Right to Life Victory Fund**

**A. Jennifer Choi**  
Full Name (Last, First, Middle Initial)

Mailing Address 3209 Sandy Ln

City Glenview State IL Zip Code 60026-1148

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Information Requested

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
08 / 05 / 2014  
**Transaction ID : AB70FF1C2C28C40C999A**

Amount of Each Receipt this Period  
1000.00

**B. Michael Dolan**  
Full Name (Last, First, Middle Initial)

Mailing Address 311 Musial Circle

City Bolingbrook State IL Zip Code 60440-1885

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Information Requested

2nd Request

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 202.64

Date of Receipt  
08 / 06 / 2014  
**Transaction ID : A130023F7D36541C782C**

Amount of Each Receipt this Period  
25.33

**C. Diane Cahill**  
Full Name (Last, First, Middle Initial)

Mailing Address 7613 Thunderbird Ln

City Colorado Springs State CO Zip Code 80919-2649

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Information Requested

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
08 / 06 / 2014  
**Transaction ID : AF0F1626DD7464CF0853**

Amount of Each Receipt this Period  
300.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1325.33

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 8 OF 89
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**National Right to Life Victory Fund**

**A. Jean Knilans**  
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 624

City South Beloit State IL Zip Code 61080-0624

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Information Requested Information Requested

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
08 / 06 / 2014  
**Transaction ID : A67A89BCCE80D4B3E861**

Amount of Each Receipt this Period  
250.00

**B. L Marjean Wolgemuth**  
Full Name (Last, First, Middle Initial)

Mailing Address 1940 E Mount Hope Rd

City Manheim State PA Zip Code 17545-8794

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
T & D Excavating, Inc. Office Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
08 / 07 / 2014  
**Transaction ID : ADB6AE0E0F6284C18AA6**

Amount of Each Receipt this Period  
250.00

**C. Dianne Rice**  
Full Name (Last, First, Middle Initial)

Mailing Address 4945 Morven Rd

City Jacksonville State FL Zip Code 32210-8301

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Information Requested Information Requested

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
08 / 07 / 2014  
**Transaction ID : AC8249F582D974F05B58**

Amount of Each Receipt this Period  
300.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 800.00

**TOTAL** This Period (last page this line number only)..... ▶



**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 9 OF 89
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**National Right to Life Victory Fund**

**A. Lisa Rockwell**  
Full Name (Last, First, Middle Initial)

Mailing Address 89 Mark Smith Dr

City Mandeville State LA Zip Code 70471-5301

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Information Requested

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 13 / 2014

**Transaction ID : A7F74AADE863944BEA3A**

Amount of Each Receipt this Period  
 400.00

**B. Henry Tembrock**  
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 30

City Elk River State MN Zip Code 55330-0030

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Information Requested

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 20 / 2014

**Transaction ID : A4E0981EEE4D8418CBC7**

Amount of Each Receipt this Period  
 100.00

**C. Gaylynn Neas**  
Full Name (Last, First, Middle Initial)

Mailing Address 1402 Meadow Branch Dr

City Sugar Land State TX Zip Code 77479-4064

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Information Requested

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 21 / 2014

**Transaction ID : A9AFF02DAF95B4D01964**

Amount of Each Receipt this Period  
 300.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	800.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 89
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**National Right to Life Victory Fund**

Full Name (Last, First, Middle Initial) <b>A. Charles Hawkins</b>		Date of Receipt
Mailing Address 5527 Monardi Cir		<input type="text" value="08"/> / <input type="text" value="21"/> / <input type="text" value="2014"/>
City	State	Zip Code
Cincinnati	OH	45213-2631
FEC ID number of contributing federal political committee.		Transaction ID : <b>A5969BF66CC464A83ADE</b>
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="150.00"/>
Name of Employer	Occupation	
Information Requested	Information Requested	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="300.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Frederick J White</b>		Date of Receipt
Mailing Address 583 Unadilla St		<input type="text" value="08"/> / <input type="text" value="22"/> / <input type="text" value="2014"/>
City	State	Zip Code
Shreveport	LA	71106-1239
FEC ID number of contributing federal political committee.		Transaction ID : <b>AC3144F9FF04F4F6C9CD</b>
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="300.00"/>
Name of Employer	Occupation	
Information Requested	Information Requested	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="300.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Gerald Gianoli</b>		Date of Receipt
Mailing Address 3 Lake Forest Drive		<input type="text" value="08"/> / <input type="text" value="22"/> / <input type="text" value="2014"/>
City	State	Zip Code
Covington	LA	70433-4539
FEC ID number of contributing federal political committee.		Transaction ID : <b>A7EE953234426462C956</b>
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="1000.00"/>
Name of Employer	Occupation	
Information Requested	Information Requested	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="1000.00"/>	
<input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="1450.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 89
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**National Right to Life Victory Fund**

**A. Laura Broussard**  
Full Name (Last, First, Middle Initial)

Mailing Address 3928 Bayou Boulevard

City New Iberia State LA Zip Code 70563-3010

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Information Requested Information Requested

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  
08 / 22 / 2014  
**Transaction ID : A7F8D5B2BB65445EE9F8**

Amount of Each Receipt this Period  
100.00

**B. Lynn Clapper**  
Full Name (Last, First, Middle Initial)

Mailing Address 3504 Scenic Dr

City Mobile State AL Zip Code 36605-4422

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Donagitey Mech Contractor Mechanical Contractor

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
08 / 22 / 2014  
**Transaction ID : ABCCE92E283E747E0807**

Amount of Each Receipt this Period  
500.00

**C. Germaine Smith**  
Full Name (Last, First, Middle Initial)

Mailing Address 137 Shannon Rd

City Lafayette State LA Zip Code 70503-3510

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Information Requested Information Requested

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
08 / 22 / 2014  
**Transaction ID : AD8893854CD4A4D2F827**

Amount of Each Receipt this Period  
1000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1600.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 12 OF 89
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**National Right to Life Victory Fund**

**A. Robert Barousse**  
Full Name (Last, First, Middle Initial)

Mailing Address 828 S Vermont St

City Covington State LA Zip Code 70433-3739

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Information Requested

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 22 / 2014

**Transaction ID : AE635683C092F4DE9A8A**

Amount of Each Receipt this Period  
 250.00

**B. Lewis Nolan**  
Full Name (Last, First, Middle Initial)

Mailing Address 395 Laura Drive

City Mandeville State LA Zip Code 70448

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Information Requested

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 22 / 2014

**Transaction ID : A0C8A7662542B4B16A66**

Amount of Each Receipt this Period  
 500.00

**C. Balcony Enterprises**  
Full Name (Last, First, Middle Initial)

Mailing Address 4738 Utica Street

City Metairie State LA Zip Code 70006-6522

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Information Requested

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 22 / 2014

**Transaction ID : A9F79B20FC8854FE19BD**

Amount of Each Receipt this Period  
 1000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1750.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 89
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**National Right to Life Victory Fund**

**A. Kristi Pederson**  
Full Name (Last, First, Middle Initial)

Mailing Address 25833 340th Ave NW

City Warren State MN Zip Code 56762-9199

FEC ID number of contributing federal political committee. **C**

Name of Employer Information Requested  
Occupation Information Requested

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt  
**08 / 25 / 2014**

**Transaction ID : A30BB8CF5253A4614AE0**

Amount of Each Receipt this Period  
**150.00**

**B. Christina Becker**  
Full Name (Last, First, Middle Initial)

Mailing Address 2300 W Kentucky Ave

City Denver State CO Zip Code 80223-2510

FEC ID number of contributing federal political committee. **C**

Name of Employer Information Requested  
Occupation Information Requested

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **220.00**

Date of Receipt  
**08 / 25 / 2014**

**Transaction ID : A7BE5D611A1C84CEC844**

Amount of Each Receipt this Period  
**60.00**

**C. Theresa Weakley**  
Full Name (Last, First, Middle Initial)

Mailing Address 373 W Smith St

City Bonfield State IL Zip Code 60913-6931

FEC ID number of contributing federal political committee. **C**

Name of Employer Information Requested  
Occupation Information Requested

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt  
**08 / 29 / 2014**

**Transaction ID : AE3D6DC036FE14AD8B7C**

Amount of Each Receipt this Period  
**300.00**

**SUBTOTAL** of Receipts This Page (optional)..... **510.00**

**TOTAL** This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 89
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**National Right to Life Victory Fund**

Full Name (Last, First, Middle Initial)  
**A. Mary Ellen McCorry**

Mailing Address 11019 Wiloray Ave

City Shelby Township State MI Zip Code 48317-1676

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Information Requested Information Requested

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
240.00

Date of Receipt  
08 / 29 / 2014  
**Transaction ID : A38969528F5E14045BDD**

Amount of Each Receipt this Period  
120.00

Full Name (Last, First, Middle Initial)  
**B. James Bloom**

Mailing Address 3721 94th Ave SW

City Taylor State ND Zip Code 58656-9709

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Self-employed Farming

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
450.00

Date of Receipt  
08 / 29 / 2014  
**Transaction ID : AC0A671E9C2674EA085F**

Amount of Each Receipt this Period  
200.00

Full Name (Last, First, Middle Initial)  
**C. National Right to Life Committee**

Mailing Address 512 10th St NrthWst

City Washington State DC Zip Code 20044

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
243200.47

Date of Receipt  
08 / 30 / 2014  
**Transaction ID : AC0DE9D6DE9D1468595B**

Amount of Each Receipt this Period  
46.84

In-kind: Telephone

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 366.84

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 89
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**National Right to Life Victory Fund**

**A. National Right to Life Committee**

Full Name (Last, First, Middle Initial)  
Mailing Address 512 10th St NrthWst

City Washington	State DC	Zip Code 20044
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
------------------	------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
243200.47

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	30	/	2014

**Transaction ID : A60EDF8D6D3544CF3B66**

Amount of Each Receipt this Period  
256.31

In-kind:Printing

**B. National Right to Life Committee**

Full Name (Last, First, Middle Initial)  
Mailing Address 512 10th St NrthWst

City Washington	State DC	Zip Code 20044
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
------------------	------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
243200.47

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	30	/	2014

**Transaction ID : AB373E926773C4FD6ACC**

Amount of Each Receipt this Period  
393.75

In-kind:Travel

**C. National Right to Life Committee**

Full Name (Last, First, Middle Initial)  
Mailing Address 512 10th St NrthWst

City Washington	State DC	Zip Code 20044
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
------------------	------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
243200.47

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	30	/	2014

**Transaction ID : A860B7387FAFB4BABB96**

Amount of Each Receipt this Period  
812.05

In-kind:Fundraising Phone Calls

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1462.11
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 89
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**National Right to Life Victory Fund**

**A. National Right to Life Committee**

Full Name (Last, First, Middle Initial)  
Mailing Address 512 10th St NrthWst

City Washington State DC Zip Code 20044

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
243200.47

Date of Receipt  
08 / 30 / 2014  
**Transaction ID : A97F4618087204272A61**

Amount of Each Receipt this Period  
1111.99

In-kind: InKind-Meals

**B. National Right to Life Committee**

Full Name (Last, First, Middle Initial)  
Mailing Address 512 10th St NrthWst

City Washington State DC Zip Code 20044

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
243200.47

Date of Receipt  
08 / 30 / 2014  
**Transaction ID : A9A35473E352D492FAB9**

Amount of Each Receipt this Period  
1118.09

In-kind: Office Supplies

**C. National Right to Life Committee**

Full Name (Last, First, Middle Initial)  
Mailing Address 512 10th St NrthWst

City Washington State DC Zip Code 20044

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
243200.47

Date of Receipt  
08 / 30 / 2014  
**Transaction ID : A1EC72CDF83E94885B7E**

Amount of Each Receipt this Period  
1300.95

In-kind: Computer

<b>SUBTOTAL</b> of Receipts This Page (optional).....	3531.03
<b>TOTAL</b> This Period (last page this line number only).....	



**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 89
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**National Right to Life Victory Fund**

Full Name (Last, First, Middle Initial) <b>A. National Right to Life Committee</b>		Date of Receipt
Mailing Address 512 10th St NrthWst		<input type="text" value="08"/> / <input type="text" value="30"/> / <input type="text" value="2014"/>
City	State	Zip Code
Washington	DC	20044
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : ABD564C6E98254A07B18</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
		<input type="text" value="2811.15"/>
Receipt For:	Aggregate Year-to-Date ▼	In-kind: InKind-Rent
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="243200.47"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. National Right to Life Committee</b>		Date of Receipt
Mailing Address 512 10th St NrthWst		<input type="text" value="08"/> / <input type="text" value="30"/> / <input type="text" value="2014"/>
City	State	Zip Code
Washington	DC	20044
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : A6F7D07E9A882497CABF</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
		<input type="text" value="4373.58"/>
Receipt For:	Aggregate Year-to-Date ▼	In-kind: Fundraising Consulting
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="243200.47"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. National Right to Life Committee</b>		Date of Receipt
Mailing Address 512 10th St NrthWst		<input type="text" value="08"/> / <input type="text" value="30"/> / <input type="text" value="2014"/>
City	State	Zip Code
Washington	DC	20044
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : A301025BB89934E69A7E</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
		<input type="text" value="7260.46"/>
Receipt For:	Aggregate Year-to-Date ▼	In-kind: InKind-Postage
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="243200.47"/>	
<input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<input type="text" value="14445.19"/>
<b>TOTAL</b> This Period (last page this line number only).....	<input type="text" value=""/>

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 89
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**National Right to Life Victory Fund**

**A. National Right to Life Committee**

Full Name (Last, First, Middle Initial)  
Mailing Address 512 10th St NrthWst

City Washington State DC Zip Code 20044

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
243200.47

Date of Receipt  
08 / 30 / 2014  
**Transaction ID : A3767487D3B294608BC2**

Amount of Each Receipt this Period  
11471.40

In-kind: InKind-Staff Time

**B. Michael Dolan**

Full Name (Last, First, Middle Initial)  
Mailing Address 311 Musial Circle

City Bolingbrook State IL Zip Code 60440-1885

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
2nd Request Information Requested

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
227.97

Date of Receipt  
09 / 05 / 2014  
**Transaction ID : AB6A34DB9BF02448E8E2**

Amount of Each Receipt this Period  
25.33

**C. Jeffery Norkus**

Full Name (Last, First, Middle Initial)  
Mailing Address 20 Eagle Claw Dr

City Hilton Head Island State SC Zip Code 29926-1853

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
IBM Planning

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
700.00

Date of Receipt  
09 / 05 / 2014  
**Transaction ID : AB6FF37065C8A46DE995**

Amount of Each Receipt this Period  
700.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....	12196.73
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 89
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**National Right to Life Victory Fund**

Full Name (Last, First, Middle Initial) <b>A. Beverly Bronsink</b>		Date of Receipt
Mailing Address 3868 B Drive S		<input type="text" value="09"/> / <input type="text" value="05"/> / <input type="text" value="2014"/>
City	State	Zip Code
Battle Creek	MI	49015-9344
FEC ID number of contributing federal political committee.		<b>Transaction ID : AD0964B9461B44609BCB</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="500.00"/>
Name of Employer	Occupation	
Beverly Bronsink	Retired	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="500.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Roberta Sullivan</b>		Date of Receipt
Mailing Address 23 Wendy Ln		<input type="text" value="09"/> / <input type="text" value="10"/> / <input type="text" value="2014"/>
City	State	Zip Code
Asheville	NC	28805-9726
FEC ID number of contributing federal political committee.		<b>Transaction ID : A0089E07C0D0B4C629EE</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="500.00"/>
Name of Employer	Occupation	
Information Requested	Information Requested	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="500.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Cheryl Webster</b>		Date of Receipt
Mailing Address 3485 Haas Dr		<input type="text" value="09"/> / <input type="text" value="10"/> / <input type="text" value="2014"/>
City	State	Zip Code
Aptos	CA	95003-3217
FEC ID number of contributing federal political committee.		<b>Transaction ID : A31CCFEF24C7142AAABB</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="500.00"/>
Name of Employer	Occupation	
Information Requested	Information Requested	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="500.00"/>	
<input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="1500.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text" value=""/>

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 89
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)  
**National Right to Life Victory Fund**

**A. Edna Willis**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1297 Bethel Church Rd  
 City Omega State GA Zip Code 31775-3705  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer None Occupation Homemaker  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **230.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 10 / 2014  
**Transaction ID : ABD15F4B9EFC44F5D83D**  
 Amount of Each Receipt this Period  
**100.00**

**B. Monica Wetsel**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7824 Cervin Dr  
 City Amarillo State TX Zip Code 79121-1206  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Information Requested Occupation Information Requested  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **225.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 10 / 2014  
**Transaction ID : A549607EAF8064478856**  
 Amount of Each Receipt this Period  
**125.00**

**C. James Heid**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 12013 NW 14th Ave  
 City Vancouver State WA Zip Code 98685-2404  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Legacy Health System Occupation Physician  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **250.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 11 / 2014  
**Transaction ID : A5E759CB85E4944F8884**  
 Amount of Each Receipt this Period  
**250.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>475.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 89
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**National Right to Life Victory Fund**

Full Name (Last, First, Middle Initial)  
**A. Marcelo DosSantos**

Mailing Address PO Box 12205

City State Zip Code  
Rock Hill SC 29731-2205

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Information Requested Information Requested

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
09 / 17 / 2014  
**Transaction ID : A24247040E3E74B5F93E**

Amount of Each Receipt this Period  
300.00

Full Name (Last, First, Middle Initial)  
**B. Nabers Johnson**

Mailing Address 8335 Beech Ln

City State Zip Code  
Warrenton VA 20186-9764

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Information Requested Information Requested

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
09 / 18 / 2014  
**Transaction ID : AB276839CF2284E26B90**

Amount of Each Receipt this Period  
500.00

Full Name (Last, First, Middle Initial)  
**C. Terence Weiland**

Mailing Address 5450 Bodenburg Loop Rd

City State Zip Code  
Palmer AK 99645-8551

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Pioneer Farms LLC Farmer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
09 / 19 / 2014  
**Transaction ID : AAE3B4584ECD444D0937**

Amount of Each Receipt this Period  
500.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1300.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 89
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**National Right to Life Victory Fund**

Full Name (Last, First, Middle Initial)  
**A. Michael R Bailey**

Mailing Address 315 Brown St

City Wauconda State IL Zip Code 60084-1713

FEC ID number of contributing federal political committee. **C**

Name of Employer None Occupation Information Requested

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 19 / 2014  
**Transaction ID : A72E7249EC7014061BF0**

Amount of Each Receipt this Period  
500.00

Full Name (Last, First, Middle Initial)  
**B. Richard Kavanagh**

Mailing Address 401 Ashley Dr

City New Lenox State IL Zip Code 60451-1165

FEC ID number of contributing federal political committee. **C**

Name of Employer Information Requested Occupation Information Requested

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 19 / 2014  
**Transaction ID : ADE85089101554A02A4C**

Amount of Each Receipt this Period  
250.00

Full Name (Last, First, Middle Initial)  
**C. Maria Gordon**

Mailing Address 952 Peter Ave

City Big Bear City State CA Zip Code 92314-9396

FEC ID number of contributing federal political committee. **C**

Name of Employer Information Requested Occupation Information Requested

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
225.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 19 / 2014  
**Transaction ID : A57777CBD47414BD28B2**

Amount of Each Receipt this Period  
25.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 775.00

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 89
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**National Right to Life Victory Fund**

**A. Susana Aguirre**  
Full Name (Last, First, Middle Initial)

Mailing Address 1315 W Santa Fe Ave

City Merced State CA Zip Code 95340-3458

FEC ID number of contributing federal political committee. **C**

Name of Employer Information Requested  
Occupation Information Requested

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
225.00

Date of Receipt  
09 / 19 / 2014  
**Transaction ID : A51A624C54AF344A2921**

Amount of Each Receipt this Period  
250.00

**B. Theresa Fischer**  
Full Name (Last, First, Middle Initial)

Mailing Address 8304 160th Ave SW

City Rhome State ND Zip Code 58651-9729

FEC ID number of contributing federal political committee. **C**

Name of Employer Information Requested  
Occupation Information Requested

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
09 / 24 / 2014  
**Transaction ID : A34029C3AB4C144B8987**

Amount of Each Receipt this Period  
250.00

**C. Leslie Forsythe**  
Full Name (Last, First, Middle Initial)

Mailing Address 693 Robins Gate

City Akron State OH Zip Code 44319-5418

FEC ID number of contributing federal political committee. **C**

Name of Employer Information Requested  
Occupation Information Requested

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
09 / 24 / 2014  
**Transaction ID : A18D30323AABC4424BDD**

Amount of Each Receipt this Period  
100.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	375.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 89
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**National Right to Life Victory Fund**

Full Name (Last, First, Middle Initial)  
**A. Lawrence Esswein**

Mailing Address 6011 Leona St

City State Zip Code  
Saint Louis MO 63116-2920

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Information Requested Information Requested

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
09 / 24 / 2014  
Transaction ID : **AF77B03DD507F4E5BBDE**

Amount of Each Receipt this Period  
1000.00

Full Name (Last, First, Middle Initial)  
**B. William Pincus**

Mailing Address 1938 Berkley Ln

City State Zip Code  
Asheboro NC 27205-4182

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Information Requested Information Requested

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1200.00

Date of Receipt  
09 / 24 / 2014  
Transaction ID : **A44DF509F8CAA4FCBB0C**

Amount of Each Receipt this Period  
1000.00

Full Name (Last, First, Middle Initial)  
**C. James Bohan**

Mailing Address 3940 Dora Dr

City State Zip Code  
Harrisburg PA 17110-3618

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Information Requested Information Requested

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
09 / 24 / 2014  
Transaction ID : **ADA70763152C64E4BA7B**

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 2250.00

**TOTAL** This Period (last page this line number only)..... ▶



**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 89
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**National Right to Life Victory Fund**

Full Name (Last, First, Middle Initial)  
**A. Cynthia Ohl**

Mailing Address 3408 S Coral St

City Sioux City	State IA	Zip Code 51106-4020
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Information Requested	Occupation Information Requested
---	-------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
09		24		2014

**Transaction ID : A5EE37F5741CD47BD91C**

Amount of Each Receipt this Period  
300.00

Full Name (Last, First, Middle Initial)  
**B. Garry Burry**

Mailing Address 622 Woodlake Drive

City Louisville	State KY	Zip Code 40245-5121
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Information Requested	Occupation Information Requested
---	-------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
09		25		2014

**Transaction ID : AAB01BC7096CB4A57B06**

Amount of Each Receipt this Period  
250.00

Full Name (Last, First, Middle Initial)  
**C. Ann Carty**

Mailing Address 174 Summit Ave Apt 33

City Summit	State NJ	Zip Code 07901-2980
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Information Requested	Occupation Information Requested
---	-------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
09		25		2014

**Transaction ID : A866FD09EDC9B4466A28**

Amount of Each Receipt this Period  
300.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	850.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 26 OF 89
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**National Right to Life Victory Fund**

**A. Barbara Lacour**  
Full Name (Last, First, Middle Initial)  
Mailing Address 21 Colonial Ln  
City New Orleans State LA Zip Code 70123-4608  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation Information Requested  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
09 / 26 / 2014  
**Transaction ID : A51D91F797C914019B1E**  
Amount of Each Receipt this Period  
300.00

**B. Robert Hoffmann**  
Full Name (Last, First, Middle Initial)  
Mailing Address 41 Notre Dame Dr  
City Delran State NJ Zip Code 08075-1717  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation Active Environmental Environmental Consulting  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
09 / 29 / 2014  
**Transaction ID : A4BF9E338D8814DE5926**  
Amount of Each Receipt this Period  
1000.00

**c. National Right to Life Committee**  
Full Name (Last, First, Middle Initial)  
Mailing Address 512 10th St NrthWst  
City Washington State DC Zip Code 20044  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 274156.99

Date of Receipt  
09 / 30 / 2014  
**Transaction ID : A8B22C1CC83B041B6984**  
Amount of Each Receipt this Period  
46.84  
In-kind: InKind-Telephone

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1346.84  
**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 89
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**National Right to Life Victory Fund**

**A. National Right to Life Committee**

Full Name (Last, First, Middle Initial)  
Mailing Address 512 10th St NrthWst

City Washington State DC Zip Code 20044

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
274156.99

Date of Receipt  
09 / 30 / 2014  
**Transaction ID : A82591A6BB5EC40A4A07**

Amount of Each Receipt this Period  
256.31

In-kind: InKind-Printing

**B. National Right to Life Committee**

Full Name (Last, First, Middle Initial)  
Mailing Address 512 10th St NrthWst

City Washington State DC Zip Code 20044

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
274156.99

Date of Receipt  
09 / 30 / 2014  
**Transaction ID : A44CF838897D749CA844**

Amount of Each Receipt this Period  
393.75

In-kind: InKind-Travel

**C. National Right to Life Committee**

Full Name (Last, First, Middle Initial)  
Mailing Address 512 10th St NrthWst

City Washington State DC Zip Code 20044

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
274156.99

Date of Receipt  
09 / 30 / 2014  
**Transaction ID : A56404F7C943A44728ED**

Amount of Each Receipt this Period  
812.05

In-kind: Fundraising Phone Calls

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1462.11
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 89
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**National Right to Life Victory Fund**

**A. National Right to Life Committee**

Full Name (Last, First, Middle Initial)  
Mailing Address 512 10th St NrthWst

City Washington State DC Zip Code 20044

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
274156.99

Date of Receipt  
09 / 30 / 2014  
**Transaction ID : A0A50FFEA50A54E00A1D**

Amount of Each Receipt this Period  
1111.99

In-kind: InKind-Meals

**B. National Right to Life Committee**

Full Name (Last, First, Middle Initial)  
Mailing Address 512 10th St NrthWst

City Washington State DC Zip Code 20044

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
274156.99

Date of Receipt  
09 / 30 / 2014  
**Transaction ID : AD43C7BB985024D51924**

Amount of Each Receipt this Period  
1118.09

In-kind: InKind-Office Supplies

**C. National Right to Life Committee**

Full Name (Last, First, Middle Initial)  
Mailing Address 512 10th St NrthWst

City Washington State DC Zip Code 20044

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
274156.99

Date of Receipt  
09 / 30 / 2014  
**Transaction ID : AF05224649AF34AF08D4**

Amount of Each Receipt this Period  
1300.94

In-kind: InKind-Computer

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	3531.02
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 89
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**National Right to Life Victory Fund**

Full Name (Last, First, Middle Initial) <b>A. National Right to Life Committee</b>		Date of Receipt
Mailing Address 512 10th St NrthWst		<input type="text" value="09"/> / <input type="text" value="30"/> / <input type="text" value="2014"/>
City	State	Zip Code
Washington	DC	20044
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : A97FDC5A4FFCA40D7B36</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
		<input type="text" value="2811.14"/>
Receipt For:	Aggregate Year-to-Date ▼	In-kind: InKind-Rent
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="274156.99"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. National Right to Life Committee</b>		Date of Receipt
Mailing Address 512 10th St NrthWst		<input type="text" value="09"/> / <input type="text" value="30"/> / <input type="text" value="2014"/>
City	State	Zip Code
Washington	DC	20044
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : AB26E5268ACC54198A18</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
		<input type="text" value="4373.57"/>
Receipt For:	Aggregate Year-to-Date ▼	In-kind: InKind-Fundraising Consulting
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="274156.99"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. National Right to Life Committee</b>		Date of Receipt
Mailing Address 512 10th St NrthWst		<input type="text" value="09"/> / <input type="text" value="30"/> / <input type="text" value="2014"/>
City	State	Zip Code
Washington	DC	20044
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : AA2F0FEA23CFF49649B9</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
		<input type="text" value="7260.45"/>
Receipt For:	Aggregate Year-to-Date ▼	In-kind: InKind-Postage
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="274156.99"/>	
<input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<input type="text" value="14445.16"/>
<b>TOTAL</b> This Period (last page this line number only).....	<input type="text"/>

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:	PAGE 30 OF 89
(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**National Right to Life Victory Fund**

**A. National Right to Life Committee**

Full Name (Last, First, Middle Initial)  
Mailing Address 512 10th St NrthWst

City Washington State DC Zip Code 20044

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
274156.99

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : ADC705FFC14784FEB9E3**

Amount of Each Receipt this Period  
11471.39

In-kind: Staff Time

**B.**

Full Name (Last, First, Middle Initial)  
Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

**C.**

Full Name (Last, First, Middle Initial)  
Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	11471.39
<b>TOTAL</b> This Period (last page this line number only).....▶	80018.75

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**National Right to Life Victory Fund**

Full Name (Last, First, Middle Initial)

**A. National Right to Life Committee**

Mailing Address 512 10th St NrthWst

City Washington State DC Zip Code 20044

Purpose of Disbursement  
In-kind:Telephone

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼  
Other2014

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		3	0		2	0	1	4

Transaction ID : **BC0DE9D6DE9D1468595B**

Amount of Each Disbursement this Period

4	6	.	8	4
---	---	---	---	---

Full Name (Last, First, Middle Initial)

**B. National Right to Life Committee**

Mailing Address 512 10th St NrthWst

City Washington State DC Zip Code 20044

Purpose of Disbursement  
In-kind:Printing

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼  
Other2014

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		3	0		2	0	1	4

Transaction ID : **B60EDF8D6D3544CF3B66**

Amount of Each Disbursement this Period

2	5	6	.	3	1
---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**C. National Right to Life Committee**

Mailing Address 512 10th St NrthWst

City Washington State DC Zip Code 20044

Purpose of Disbursement  
In-kind:Travel

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼  
Other2014

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		3	0		2	0	1	4

Transaction ID : **BB373E926773C4FD6ACC**

Amount of Each Disbursement this Period

3	9	3	.	7	5
---	---	---	---	---	---

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

6	9	6	.	9	0
---	---	---	---	---	---

**TOTAL** This Period (last page this line number only)..... ▶

6	9	6	.	9	0
---	---	---	---	---	---

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**National Right to Life Victory Fund**

Full Name (Last, First, Middle Initial)

**A. National Right to Life Committee**

Mailing Address 512 10th St NrthWst

City Washington State DC Zip Code 20044

Purpose of Disbursement  
In-kind:Fundraising Phone Calls

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For: 2014  
 Primary  General  
 Other (specify) Other2014

Date of Disbursement

MM / DD / YYYY  
08 / 30 / 2014

Transaction ID : B860B7387FAFB4BABB96

Amount of Each Disbursement this Period

812.05

Full Name (Last, First, Middle Initial)

**B. National Right to Life Committee**

Mailing Address 512 10th St NrthWst

City Washington State DC Zip Code 20044

Purpose of Disbursement  
In-kind:InKind-Meals

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For: 2014  
 Primary  General  
 Other (specify) Other2014

Date of Disbursement

MM / DD / YYYY  
08 / 30 / 2014

Transaction ID : B97F4618087204272A61

Amount of Each Disbursement this Period

1111.99

Full Name (Last, First, Middle Initial)

**C. National Right to Life Committee**

Mailing Address 512 10th St NrthWst

City Washington State DC Zip Code 20044

Purpose of Disbursement  
In-kind:Office Supplies

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For: 2014  
 Primary  General  
 Other (specify) Other2014

Date of Disbursement

MM / DD / YYYY  
08 / 30 / 2014

Transaction ID : B9A35473E352D492FAB9

Amount of Each Disbursement this Period

1118.09

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

3042.13



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**National Right to Life Victory Fund**

Full Name (Last, First, Middle Initial)

**A. National Right to Life Committee**

Mailing Address 512 10th St NrthWst

City Washington State DC Zip Code 20044

Purpose of Disbursement  
In-kind:Computer

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼  
Other2014

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		3	0		2	0	1	4

Transaction ID : B1EC72CDF83E94885B7E

Amount of Each Disbursement this Period

1	3	0	0	.	9	5
---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**B. National Right to Life Committee**

Mailing Address 512 10th St NrthWst

City Washington State DC Zip Code 20044

Purpose of Disbursement  
In-kind:InKind-Rent

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼  
Other2014

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		3	0		2	0	1	4

Transaction ID : BBD564C6E98254A07B18

Amount of Each Disbursement this Period

2	8	1	1	.	1	5
---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**C. National Right to Life Committee**

Mailing Address 512 10th St NrthWst

City Washington State DC Zip Code 20044

Purpose of Disbursement  
In-kind:Fundraising Consulting

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼  
Other2014

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		3	0		2	0	1	4

Transaction ID : B6F7D07E9A882497CABF

Amount of Each Disbursement this Period

4	3	7	3	.	5	8
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

8	4	8	5	.	6	8
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**National Right to Life Victory Fund**

Full Name (Last, First, Middle Initial)

**A. National Right to Life Committee**

Mailing Address 512 10th St NrthWst

City Washington State DC Zip Code 20044

Purpose of Disbursement  
In-kind:InKind-Postage

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For: 2014  
 Primary  General  
 Other (specify) Other2014

Date of Disbursement

MM / DD / YYYY  
08 / 30 / 2014

Transaction ID : B301025BB89934E69A7E

Amount of Each Disbursement this Period

7260.46

Full Name (Last, First, Middle Initial)

**B. National Right to Life Committee**

Mailing Address 512 10th St NrthWst

City Washington State DC Zip Code 20044

Purpose of Disbursement  
In-kind:InKind-Staff Time

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For: 2014  
 Primary  General  
 Other (specify) Other2014

Date of Disbursement

MM / DD / YYYY  
08 / 30 / 2014

Transaction ID : B3767487D3B294608BC2

Amount of Each Disbursement this Period

11471.40

Full Name (Last, First, Middle Initial)

**C. National Right to Life Committee**

Mailing Address 512 10th St NrthWst

City Washington State DC Zip Code 20044

Purpose of Disbursement  
In-kind:InKind-Telephone

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For: 2014  
 Primary  General  
 Other (specify) Other2014

Date of Disbursement

MM / DD / YYYY  
09 / 30 / 2014

Transaction ID : B8B22C1CC83B041B6984

Amount of Each Disbursement this Period

46.84

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

18778.70

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**National Right to Life Victory Fund**

Full Name (Last, First, Middle Initial)

**A. National Right to Life Committee**

Mailing Address 512 10th St NrthWst

City Washington State DC Zip Code 20044

Purpose of Disbursement  
In-kind:InKind-Printing

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2014  
 Primary  General  
 Other (specify) Other2014

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 30 / 2014

Transaction ID : B82591A6BB5EC40A4A07

Amount of Each Disbursement this Period

256.31

Full Name (Last, First, Middle Initial)

**B. National Right to Life Committee**

Mailing Address 512 10th St NrthWst

City Washington State DC Zip Code 20044

Purpose of Disbursement  
In-kind:InKind-Travel

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2014  
 Primary  General  
 Other (specify) Other2014

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 30 / 2014

Transaction ID : B44CF838897D749CA844

Amount of Each Disbursement this Period

393.75

Full Name (Last, First, Middle Initial)

**C. National Right to Life Committee**

Mailing Address 512 10th St NrthWst

City Washington State DC Zip Code 20044

Purpose of Disbursement  
In-kind:Fundraising Phone Calls

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2014  
 Primary  General  
 Other (specify) Other2014

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 30 / 2014

Transaction ID : B56404F7C943A44728ED

Amount of Each Disbursement this Period

812.05

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

1462.11

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**National Right to Life Victory Fund**

Full Name (Last, First, Middle Initial)

**A. National Right to Life Committee**

Mailing Address 512 10th St NrthWst

City Washington State DC Zip Code 20044

Purpose of Disbursement  
In-kind:InKind-Meals

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼  
Other2014

State: District:

Date of Disbursement

MM / DD / YYYY  
09 / 30 / 2014

Transaction ID : B0A50FFEA50A54E00A1D

Amount of Each Disbursement this Period

1111.99

Full Name (Last, First, Middle Initial)

**B. National Right to Life Committee**

Mailing Address 512 10th St NrthWst

City Washington State DC Zip Code 20044

Purpose of Disbursement  
In-kind:InKind-Office Supplies

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼  
Other2014

State: District:

Date of Disbursement

MM / DD / YYYY  
09 / 30 / 2014

Transaction ID : BD43C7BB985024D51924

Amount of Each Disbursement this Period

1118.09

Full Name (Last, First, Middle Initial)

**C. National Right to Life Committee**

Mailing Address 512 10th St NrthWst

City Washington State DC Zip Code 20044

Purpose of Disbursement  
In-kind:InKind-Computer

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼  
Other2014

State: District:

Date of Disbursement

MM / DD / YYYY  
09 / 30 / 2014

Transaction ID : BF05224649AF34AF08D4

Amount of Each Disbursement this Period

1300.94

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

3531.02

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**National Right to Life Victory Fund**

Full Name (Last, First, Middle Initial)

**A. National Right to Life Committee**

Mailing Address 512 10th St NrthWst

City Washington State DC Zip Code 20044

Purpose of Disbursement  
In-kind:InKind-Rent

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For: 2014  
 Primary  General  
 Other (specify) Other2014

Date of Disbursement

MM / DD / YYYY  
09 / 30 / 2014

Transaction ID : B97FDC5A4FFCA40D7B36

Amount of Each Disbursement this Period

2811.14

Full Name (Last, First, Middle Initial)

**B. National Right to Life Committee**

Mailing Address 512 10th St NrthWst

City Washington State DC Zip Code 20044

Purpose of Disbursement  
In-kind:InKind-Fundraising Consulting

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For: 2014  
 Primary  General  
 Other (specify) Other2014

Date of Disbursement

MM / DD / YYYY  
09 / 30 / 2014

Transaction ID : BB26E5268ACC54198A18

Amount of Each Disbursement this Period

4373.57

Full Name (Last, First, Middle Initial)

**C. National Right to Life Committee**

Mailing Address 512 10th St NrthWst

City Washington State DC Zip Code 20044

Purpose of Disbursement  
In-kind:InKind-Postage

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For: 2014  
 Primary  General  
 Other (specify) Other2014

Date of Disbursement

MM / DD / YYYY  
09 / 30 / 2014

Transaction ID : BA2F0FEA23CFF49649B9

Amount of Each Disbursement this Period

7260.45

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

14445.16

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**National Right to Life Victory Fund**

Full Name (Last, First, Middle Initial)

**A. National Right to Life Committee**

Mailing Address 512 10th St NrthWst

City Washington State DC Zip Code 20044

Purpose of Disbursement  
In-kind:Staff Time

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For: 2014  
 Primary  General  
 Other (specify) Other2014

Date of Disbursement

MM / DD / YYYY  
09 / 30 / 2014

**Transaction ID : BDC705FFC14784FEB9E3**

Amount of Each Disbursement this Period

11471.39

Full Name (Last, First, Middle Initial)

**B. CMA3**

Mailing Address PO Box 63020

City San Francisco State CA Zip Code 94163-0001

Purpose of Disbursement  
Merchant Fee

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
08 / 04 / 2014

**Transaction ID : B2B03A39344CD4F158CC**

Amount of Each Disbursement this Period

792.33

Full Name (Last, First, Middle Initial)

**C. SunTrust Bank**

Mailing Address PO Box 622227

City Orlando State FL Zip Code 32862-2227

Purpose of Disbursement  
Merchant Fee

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
08 / 11 / 2014

**Transaction ID : B2B1F0A32CD0247099FA**

Amount of Each Disbursement this Period

107.75

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

12371.47

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**National Right to Life Victory Fund**

Full Name (Last, First, Middle Initial)

**A. MDS Communications Corporation**

Mailing Address 545 W Juanita Ave

City Mesa State AZ Zip Code 85210-6033

Purpose of Disbursement  
Fundraising Phone Calls

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
08 / 12 / 2014

Transaction ID : BC048E2C9F9A64888AD9

Amount of Each Disbursement this Period

10564.71

Full Name (Last, First, Middle Initial)

**B. MDS Communications Corporation**

Mailing Address 545 W Juanita Ave

City Mesa State AZ Zip Code 85210-6033

Purpose of Disbursement  
Fundraising Phone Calls

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
08 / 14 / 2014

Transaction ID : B673BE4E7919B49B9936

Amount of Each Disbursement this Period

5437.00

Full Name (Last, First, Middle Initial)

**C. MDS Communications Corporation**

Mailing Address 545 W Juanita Ave

City Mesa State AZ Zip Code 85210-6033

Purpose of Disbursement  
Fundraising Phone Calls

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
08 / 15 / 2014

Transaction ID : BAF2640A852154F33AD8

Amount of Each Disbursement this Period

21502.00

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

37503.71

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**National Right to Life Victory Fund**

Full Name (Last, First, Middle Initial)

**A. SunTrust Bank**

Mailing Address PO Box 622227

City Orlando State FL Zip Code 32862-2227

Purpose of Disbursement  
Bank Fee

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
08 / 29 / 2014

Transaction ID : B663FBF7204BB4EDD863

Amount of Each Disbursement this Period

30.00

Full Name (Last, First, Middle Initial)

**B. SunTrust Bank**

Mailing Address PO Box 622227

City Orlando State FL Zip Code 32862-2227

Purpose of Disbursement  
Bank Fee

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
08 / 29 / 2014

Transaction ID : B20165077E0364F9FB69

Amount of Each Disbursement this Period

1067.00

Full Name (Last, First, Middle Initial)

**C. CMA3**

Mailing Address PO Box 63020

City San Francisco State CA Zip Code 94163-0001

Purpose of Disbursement  
Merchant Fees

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 03 / 2014

Transaction ID : B1B92DFF6EDDD4A308BC

Amount of Each Disbursement this Period

200.19

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

1297.19



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**National Right to Life Victory Fund**

Full Name (Last, First, Middle Initial)

**A. MDS Communications Corporation**

Mailing Address 545 W Juanita Ave

City Mesa State AZ Zip Code 85210-6033

Purpose of Disbursement  
Fundraising Phone Calls

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 08 / 2014

Transaction ID : B257CDF38C9144D85954

Amount of Each Disbursement this Period

1275.48

Full Name (Last, First, Middle Initial)

**B. MDS Communications Corporation**

Mailing Address 545 W Juanita Ave

City Mesa State AZ Zip Code 85210-6033

Purpose of Disbursement  
Fundraising Phone Calls

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 08 / 2014

Transaction ID : B51FB3C9103B34F6DA4A

Amount of Each Disbursement this Period

18738.44

Full Name (Last, First, Middle Initial)

**C. SunTrust Bank**

Mailing Address PO Box 622227

City Orlando State FL Zip Code 32862-2227

Purpose of Disbursement  
Merchant Fees

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 10 / 2014

Transaction ID : B01C3FB1010E546E2B6D

Amount of Each Disbursement this Period

119.51

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

20133.43

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**National Right to Life Victory Fund**

Full Name (Last, First, Middle Initial)

**A. SunTrust Bank**

Mailing Address PO Box 622227

City Orlando State FL Zip Code 32862-2227

Purpose of Disbursement  
Account Analysis Fee

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	9		2	0	1	4

Transaction ID : BFF716DFD107A4C7A817

Amount of Each Disbursement this Period

2	3	0	7	.	2	0
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Full Name (Last, First, Middle Initial)

**B. SunTrust Bank**

Mailing Address PO Box 622227

City Orlando State FL Zip Code 32862-2227

Purpose of Disbursement  
Account Analysis Fee

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	0		2	0	1	4

Transaction ID : BC496029A80D04D47869

Amount of Each Disbursement this Period

2	0	4	9	.	0	8
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Full Name (Last, First, Middle Initial)

**C. MDS Communications Corporation**

Mailing Address 545 W Juanita Ave

City Mesa State AZ Zip Code 85210-6033

Purpose of Disbursement  
Fundraising Phone Calls

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	4		2	0	1	4

Transaction ID : B464566BB33274DB5AF4

Amount of Each Disbursement this Period

5	7	2	1	.	5	5
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

1	0	0	7	.	7	7	.	8	3
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**National Right to Life Victory Fund**

Full Name (Last, First, Middle Initial)

**A. Strategic Fundraising**

Mailing Address 7591 9th St N

City State Zip Code  
Saint Paul MN 55128-6626

Purpose of Disbursement  
Fundraising Phone Calls

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	4		2	0	1	4

Transaction ID : B936808E17E154FAFB0B

Amount of Each Disbursement this Period

4	4	0	0
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Full Name (Last, First, Middle Initial)

**B. MDS Communications Corporation**

Mailing Address 545 W Juanita Ave

City State Zip Code  
Mesa AZ 85210-6033

Purpose of Disbursement  
Fundraising Phone Calls

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	4		2	0	1	4

Transaction ID : B06ED69B9E20B44D5BA2

Amount of Each Disbursement this Period

9	6	1	1	.	7	3
---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**C. MDS Communications Corporation**

Mailing Address 545 W Juanita Ave

City State Zip Code  
Mesa AZ 85210-6033

Purpose of Disbursement  
Fundraising Phone Calls

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	4		2	0	1	4

Transaction ID : BF007BE3B856945359B2

Amount of Each Disbursement this Period

1	5	6	7	.	5	2
---	---	---	---	---	---	---

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

1	1	6	1	.	9	2	5
---	---	---	---	---	---	---	---

--	--	--	--	--	--	--	--

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**National Right to Life Victory Fund**

Full Name (Last, First, Middle Initial)

**A. American Express**

Mailing Address PO Box 53852

City Phoenix State AZ Zip Code 85072-3852

Purpose of Disbursement  
Merchant Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 30 / 2014

Transaction ID : BFE34D83AA1594307998

Amount of Each Disbursement this Period

30.50

Full Name (Last, First, Middle Initial)

**B. SunTrust Bank**

Mailing Address PO Box 622227

City Orlando State FL Zip Code 32862-2227

Purpose of Disbursement  
Bank Fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 30 / 2014

Transaction ID : B9C78DA1CEF0E4CB5BC8

Amount of Each Disbursement this Period

472.50

Full Name (Last, First, Middle Initial)

**C. The Lamar Companies**

Mailing Address PO Box 37067

City Shreveport State LA Zip Code 71133-7067

Purpose of Disbursement  
Debt Repayment for Landrieu Advertising

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
08 / 06 / 2014

Transaction ID : BAF6DC66BFF734EB4884

Amount of Each Disbursement this Period

2750.00

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

3253.00

146697.58

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 45 OF 89
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**National Right to Life Victory Fund**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>FLS Connect, LLC</b>	Nature of Debt (Purpose): Fundraising Phone Calls (Est.)
Mailing Address 7300 Hudson Blvd N	
City State Zip Code Saint Paul MN 55128-7141	

Outstanding Balance Beginning This Period 1135.05	<b>Transaction ID : DD1AAB82EF6B54BF98AB</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1135.05

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>HSP Direct</b>	Nature of Debt (Purpose): Fundraising Phone Calls (est)
Mailing Address 13755 Sunrise Valley Dr	
City State Zip Code Herndon VA 20171-4664	

Outstanding Balance Beginning This Period 14238.91	<b>Transaction ID : DF65CF028AAFF45B38DE</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 14238.91

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>FLS Connect, LLC</b>	Nature of Debt (Purpose): Fundraising Phone Calls (EST.)
Mailing Address 7300 Hudson Blvd N	
City State Zip Code Saint Paul MN 55128-7141	

Outstanding Balance Beginning This Period 2162.00	<b>Transaction ID : D57DD56A6FE59420CA77</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 2162.00

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	17535.96
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 46 OF 89
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**National Right to Life Victory Fund**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>FLS Connect, LLC</b>	Nature of Debt (Purpose): Fundraising Phone Calls (est)
Mailing Address 7300 Hudson Blvd N	
City State Zip Code Saint Paul MN 55128-7141	

Outstanding Balance Beginning This Period <input type="text" value="1024.60"/>	<b>Transaction ID : DE84AEBB36D12476C95C</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="1024.60"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>FLS Connect, LLC</b>	Nature of Debt (Purpose): Fundraising Phone Calls (est)
Mailing Address 7300 Hudson Blvd N	
City State Zip Code Saint Paul MN 55128-7141	

Outstanding Balance Beginning This Period <input type="text" value="658.00"/>	<b>Transaction ID : DCFAF8CE6EC184DA8A74</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="658.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>InfoCision</b>	Nature of Debt (Purpose): Fundraising Phone Calls (est)
Mailing Address 325 Springside Dr	
City State Zip Code Akron OH 44333-2434	

Outstanding Balance Beginning This Period <input type="text" value="2145.55"/>	<b>Transaction ID : D35A8F81C0F624BC7A3A</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="2145.55"/>

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	<input type="text" value="3828.15"/>
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	<input type="text"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	<input type="text"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 47 OF 89
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**National Right to Life Victory Fund**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>InfoCision</b>	Nature of Debt (Purpose): Fundraising Phone Calls (est)
Mailing Address 325 Springside Dr	
City State Zip Code Akron OH 44333-2434	

Outstanding Balance Beginning This Period 428.40	<b>Transaction ID : D9BE25F78EE33433385B</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 428.40

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>FLS Connect, LLC</b>	Nature of Debt (Purpose): Fundraising Phone Calls (est)
Mailing Address 7300 Hudson Blvd N	
City State Zip Code Saint Paul MN 55128-7141	

Outstanding Balance Beginning This Period 554.60	<b>Transaction ID : DF74C813B077446ABABD</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 554.60

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>MDS Communications Corporation</b>	Nature of Debt (Purpose): Fundraising Phone Calls (est)
Mailing Address 545 W Juanita Ave	
City State Zip Code Mesa AZ 85210-6033	

Outstanding Balance Beginning This Period 1189.40	<b>Transaction ID : DFDDF264AEFEC4B07BA7</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1189.40

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	2172.40
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 48 OF 89
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**National Right to Life Victory Fund**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>MDS Communications Corporation</b>	Nature of Debt (Purpose): Fundraising Phone Calls (est)
Mailing Address 545 W Juanita Ave	
City State Zip Code Mesa AZ 85210-6033	

Outstanding Balance Beginning This Period 490.85	<b>Transaction ID : DB78E559D41394A3C9A2</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 490.85

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>MDS Communications Corporation</b>	Nature of Debt (Purpose): Fundraising Phone Calls (est)
Mailing Address 545 W Juanita Ave	
City State Zip Code Mesa AZ 85210-6033	

Outstanding Balance Beginning This Period 1604.36	<b>Transaction ID : D3E50DE45A78E4B23B45</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1604.36

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>MDS Communications Corporation</b>	Nature of Debt (Purpose): Fundraising Phone Calls (est)
Mailing Address 545 W Juanita Ave	
City State Zip Code Mesa AZ 85210-6033	

Outstanding Balance Beginning This Period 557.08	<b>Transaction ID : D144DF9F3E76345A3825</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 557.08

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	2652.29
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	



**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 49 OF 89
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**National Right to Life Victory Fund**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>MDS Communications Corporation</b>	Nature of Debt (Purpose): Fundraising Phone Calls (est)
Mailing Address 545 W Juanita Ave	
City State Zip Code Mesa AZ 85210-6033	

Outstanding Balance Beginning This Period <input type="text" value="1479.34"/>	<b>Transaction ID : DDACEFD36F0914BB7A36</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="1479.34"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>InfoCision</b>	Nature of Debt (Purpose): Fundraising Phone Calls (EST)
Mailing Address 325 Springside Dr	
City State Zip Code Akron OH 44333-2434	

Outstanding Balance Beginning This Period <input type="text" value="215.80"/>	<b>Transaction ID : DB359F526D6C14FEEA48</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="215.80"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>InfoCision</b>	Nature of Debt (Purpose): Fundraising Phone Calls (est)
Mailing Address 325 Springside Dr	
City State Zip Code Akron OH 44333-2434	

Outstanding Balance Beginning This Period <input type="text" value="78.00"/>	<b>Transaction ID : D684C6B480FBC43AAA2D</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="78.00"/>

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	<input type="text" value="1773.14"/>
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	<input type="text"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	<input type="text"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 50 OF 89
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**National Right to Life Victory Fund**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>InfoCision</b>	Nature of Debt (Purpose): Fundraising Phone Calls (est)
Mailing Address 325 Springside Dr	
City State Zip Code Akron OH 44333-2434	

Outstanding Balance Beginning This Period <input type="text" value="487.06"/>	<b>Transaction ID : DD06C0A560C204B39AA4</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="487.06"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>InfoCision</b>	Nature of Debt (Purpose): Fundraising Phone Calls (est)
Mailing Address 325 Springside Dr	
City State Zip Code Akron OH 44333-2434	

Outstanding Balance Beginning This Period <input type="text" value="546.77"/>	<b>Transaction ID : D69585CBEE21E4921928</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="546.77"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>InfoCision</b>	Nature of Debt (Purpose): Fundraising Phone Calls opposing Obama(est)
Mailing Address 325 Springside Dr	
City State Zip Code Akron OH 44333-2434	

Outstanding Balance Beginning This Period <input type="text" value="2706.00"/>	<b>Transaction ID : D75B81B1EC91A4559955</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="2706.00"/>

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	<input type="text" value="3739.83"/>
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	<input type="text"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	<input type="text"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 51 OF 89
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**National Right to Life Victory Fund**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>InfoCision</b>	Nature of Debt (Purpose): Fundraising Phone Calls opposing Obama(est)
Mailing Address 325 Springside Dr	
City State Zip Code Akron OH 44333-2434	

Outstanding Balance Beginning This Period 3956.70	<b>Transaction ID : D96B1689FF8A440E498F</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 3956.70

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>InfoCision</b>	Nature of Debt (Purpose): Fundraising Phone Calls opposing Obama(est)
Mailing Address 325 Springside Dr	
City State Zip Code Akron OH 44333-2434	

Outstanding Balance Beginning This Period 2719.20	<b>Transaction ID : D97C6CF35FF2145D2B9B</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 2719.20

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>InfoCision</b>	Nature of Debt (Purpose): Fundraising Phone Calls opposing Obama(est)
Mailing Address 325 Springside Dr	
City State Zip Code Akron OH 44333-2434	

Outstanding Balance Beginning This Period 2963.60	<b>Transaction ID : D94E23EDB18814963AAC</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 2963.60

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	9639.50
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 52 OF 89
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**National Right to Life Victory Fund**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>InfoCision</b>	Nature of Debt (Purpose): Fundraising Phone Calls opposing Obama(est)
Mailing Address 325 Springside Dr	
City State Zip Code Akron OH 44333-2434	

Outstanding Balance Beginning This Period 388.00	<b>Transaction ID : D0F71671E513245DAAF9</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 388.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>InfoCision</b>	Nature of Debt (Purpose): Fundraising Phone Calls opposing Obama(est)
Mailing Address 325 Springside Dr	
City State Zip Code Akron OH 44333-2434	

Outstanding Balance Beginning This Period 2088.90	<b>Transaction ID : D810B6F2BE2C24B1AA1D</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 2088.90

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>MDS Communications Corporation</b>	Nature of Debt (Purpose): Fundraising Phone Calls Opposing Obama (est)
Mailing Address 545 W Juanita Ave	
City State Zip Code Mesa AZ 85210-6033	

Outstanding Balance Beginning This Period 925.38	<b>Transaction ID : DF437D1B12B28421CB97</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 925.38

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	3402.28
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 53 OF 89
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**National Right to Life Victory Fund**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>InfoCision</b>	Nature of Debt (Purpose): Fundraising Phone Calls opposing Obama(est)
Mailing Address 325 Springside Dr	
City State Zip Code Akron OH 44333-2434	

Outstanding Balance Beginning This Period 3206.20	Transaction ID : DF8C50C1AB21444F3A71	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 3206.20

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>InfoCision</b>	Nature of Debt (Purpose): Fundraising Phone Calls opposing Obama(est)
Mailing Address 325 Springside Dr	
City State Zip Code Akron OH 44333-2434	

Outstanding Balance Beginning This Period 4846.85	Transaction ID : D04263CA1B5E643048E7	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 4846.85

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>MDS Communications Corporation</b>	Nature of Debt (Purpose): Fundraising Phone Calls Opposing Obama (est)
Mailing Address 545 W Juanita Ave	
City State Zip Code Mesa AZ 85210-6033	

Outstanding Balance Beginning This Period 2596.21	Transaction ID : DE964A3BADA294D97BA9	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 2596.21

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	10649.26
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 54 OF 89
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**National Right to Life Victory Fund**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>MDS Communications Corporation</b>		Nature of Debt (Purpose): Fundraising Phone Calls Opposing Obama (est)
Mailing Address 545 W Juanita Ave		
City Mesa	State AZ	Zip Code 85210-6033

Outstanding Balance Beginning This Period <input type="text" value="1663.56"/>	<b>Transaction ID : DD67924369E0A4125A25</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="1663.56"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>InfoCision</b>		Nature of Debt (Purpose): Fundraising Phone Calls Opposing Obama (est)
Mailing Address 325 Springside Dr		
City Akron	State OH	Zip Code 44333-2434

Outstanding Balance Beginning This Period <input type="text" value="4838.60"/>	<b>Transaction ID : DDC72B3130441494D990</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="4838.60"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>MDS Communications Corporation</b>		Nature of Debt (Purpose): Fundraising Phone Calls Opposing Obama (est)
Mailing Address 545 W Juanita Ave		
City Mesa	State AZ	Zip Code 85210-6033

Outstanding Balance Beginning This Period <input type="text" value="895.32"/>	<b>Transaction ID : D95DEECA52817405F87D</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="895.32"/>

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	<input type="text" value="7397.48"/>
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	<input type="text"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	<input type="text"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 55 OF 89
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**National Right to Life Victory Fund**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>InfoCision</b>	Nature of Debt (Purpose): Fundraising Phone Calls opposing Obama(est)
Mailing Address 325 Springside Dr	
City State Zip Code Akron OH 44333-2434	

Outstanding Balance Beginning This Period 5333.90	Transaction ID : DCFA920BB9D2A466EBDF	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 5333.90

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>MDS Communications Corporation</b>	Nature of Debt (Purpose): Fundraising Phone Calls opposing Obama(est)
Mailing Address 545 W Juanita Ave	
City State Zip Code Mesa AZ 85210-6033	

Outstanding Balance Beginning This Period 1352.19	Transaction ID : DB6608C95BE1F4E068D2	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1352.19

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>InfoCision</b>	Nature of Debt (Purpose): Fundraising Phone Calls opposing Obama(est)
Mailing Address 325 Springside Dr	
City State Zip Code Akron OH 44333-2434	

Outstanding Balance Beginning This Period 2817.90	Transaction ID : DDD7C4A2666114669A00	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 2817.90

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	9503.99
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 56 OF 89
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**National Right to Life Victory Fund**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>InfoCision</b>	Nature of Debt (Purpose): Fundraising Phone Calls opposing Obama(est)
Mailing Address 325 Springside Dr	
City State Zip Code Akron OH 44333-2434	

Outstanding Balance Beginning This Period 6030.40	<b>Transaction ID : D9641FA496EBB4C6B921</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 6030.40

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>MDS Communications Corporation</b>	Nature of Debt (Purpose): Fundraising Phone Calls opposing Obama(est)
Mailing Address 545 W Juanita Ave	
City State Zip Code Mesa AZ 85210-6033	

Outstanding Balance Beginning This Period 2074.36	<b>Transaction ID : D8554AD9B77DB46E4B7F</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 2074.36

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>InfoCision</b>	Nature of Debt (Purpose): Fundraising Phone Calls opposing Obama(est)
Mailing Address 325 Springside Dr	
City State Zip Code Akron OH 44333-2434	

Outstanding Balance Beginning This Period 2049.30	<b>Transaction ID : D48591AA11E6F4FB9ADE</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 2049.30

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	10154.06
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	



**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 57 OF 89
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**National Right to Life Victory Fund**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>InfoCision</b>	Nature of Debt (Purpose): Fundraising Phone Calls opposing Obama(est)
Mailing Address 325 Springside Dr	
City State Zip Code Akron OH 44333-2434	

Outstanding Balance Beginning This Period 2570.50	<b>Transaction ID : DBC3013DEA1E341B583D</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 2570.50

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>InfoCision</b>	Nature of Debt (Purpose): Fundraising Phone Calls opposing Obama(est)
Mailing Address 325 Springside Dr	
City State Zip Code Akron OH 44333-2434	

Outstanding Balance Beginning This Period 2255.40	<b>Transaction ID : D2F30CF5967F847CCA27</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 2255.40

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>MDS Communications Corporation</b>	Nature of Debt (Purpose): Fundraising Phone Calls opposing Obama(est)
Mailing Address 545 W Juanita Ave	
City State Zip Code Mesa AZ 85210-6033	

Outstanding Balance Beginning This Period 7336.63	<b>Transaction ID : D9A6EAC4C8C85414D9D4</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 7336.63

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	12162.53
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 58 OF 89
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**National Right to Life Victory Fund**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>InfoCision</b>	Nature of Debt (Purpose): Fundraising Phone Calls opposing Obama(est)
Mailing Address 325 Springside Dr	
City State Zip Code Akron OH 44333-2434	

Outstanding Balance Beginning This Period <input type="text" value="712.80"/>	<b>Transaction ID : D03ACE2B7A7704D90A23</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="712.80"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>InfoCision</b>	Nature of Debt (Purpose): Fundraising Phone Calls opposing Obama(est)
Mailing Address 325 Springside Dr	
City State Zip Code Akron OH 44333-2434	

Outstanding Balance Beginning This Period <input type="text" value="544.50"/>	<b>Transaction ID : DC5B380E06CBC4B58826</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="544.50"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>MDS Communications Corporation</b>	Nature of Debt (Purpose): Fundraising Phone Calls Opposing Obama (est)
Mailing Address 545 W Juanita Ave	
City State Zip Code Mesa AZ 85210-6033	

Outstanding Balance Beginning This Period <input type="text" value="0.34"/>	<b>Transaction ID : DF0E8FF5985EF4963847</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="0.34"/>

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	<input type="text" value="1257.64"/>
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	<input type="text"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	<input type="text"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 59 OF 89
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**National Right to Life Victory Fund**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>InfoCision</b>	Nature of Debt (Purpose): Fundraising Phone Calls Opposing Obama (est)
Mailing Address 325 Springside Dr	
City State Zip Code Akron OH 44333-2434	

Outstanding Balance Beginning This Period 4608.80	<b>Transaction ID : D8366DA0CD9244C5C84A</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 4608.80

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>InfoCision</b>	Nature of Debt (Purpose): Fundraising Phone Calls Opposing Obama (est)
Mailing Address 325 Springside Dr	
City State Zip Code Akron OH 44333-2434	

Outstanding Balance Beginning This Period 584.10	<b>Transaction ID : D0AAB6FC4ECFA40C5B49</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 584.10

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>InfoCision</b>	Nature of Debt (Purpose): Fundraising Phone Calls Opposing Obama (est)
Mailing Address 325 Springside Dr	
City State Zip Code Akron OH 44333-2434	

Outstanding Balance Beginning This Period 5246.30	<b>Transaction ID : DD3304477FE4D42F1904</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 5246.30

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	10439.20
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 60 OF 89
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**National Right to Life Victory Fund**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>InfoCision</b>	Nature of Debt (Purpose): Fundraising Phone Calls Opposing Obama (est)
Mailing Address 325 Springside Dr	
City State Zip Code Akron OH 44333-2434	

Outstanding Balance Beginning This Period 5015.90	<b>Transaction ID : D2EE4855BF362491BAF6</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 5015.90

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Strategic Fundraising</b>	Nature of Debt (Purpose): Fundraising Phone Calls Opposing Obama (est)
Mailing Address 7591 9th St N	
City State Zip Code Saint Paul MN 55128-6626	

Outstanding Balance Beginning This Period 0.20	<b>Transaction ID : DD878ECCC5D3F4CCF88C</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 0.20

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>InfoCision</b>	Nature of Debt (Purpose): Fundraising Phone Calls Opposing Obama (est)
Mailing Address 325 Springside Dr	
City State Zip Code Akron OH 44333-2434	

Outstanding Balance Beginning This Period 2493.90	<b>Transaction ID : D103C07B924C240C0960</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 2493.90

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	7510.00
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 61 OF 89
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**National Right to Life Victory Fund**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>InfoCision</b>		Nature of Debt (Purpose): Fundraising Phone Calls Opposing Obama (est)
Mailing Address 325 Springside Dr		
City Akron	State OH	Zip Code 44333-2434

Outstanding Balance Beginning This Period 2448.30	<b>Transaction ID : D81FDBF0935294895974</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 2448.30

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>InfoCision</b>		Nature of Debt (Purpose): Fundraising Phone Calls Opposing Obama (est)
Mailing Address 325 Springside Dr		
City Akron	State OH	Zip Code 44333-2434

Outstanding Balance Beginning This Period 2440.00	<b>Transaction ID : D90256654C591498DA0E</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 2440.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>InfoCision</b>		Nature of Debt (Purpose): Fundraising Phone Calls Opposing Obama (est)
Mailing Address 325 Springside Dr		
City Akron	State OH	Zip Code 44333-2434

Outstanding Balance Beginning This Period 7665.30	<b>Transaction ID : DF4DFD16DD03C4247AE0</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 7665.30

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	12553.60
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 62 OF 89
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**National Right to Life Victory Fund**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>InfoCision</b>	Nature of Debt (Purpose): Fundraising Phone Calls Opposing Obama (est)
Mailing Address 325 Springside Dr	
City State Zip Code Akron OH 44333-2434	

Outstanding Balance Beginning This Period 1576.00	<b>Transaction ID : D3BA6A8EDFDEB42DE93E</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1576.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>InfoCision</b>	Nature of Debt (Purpose): Fundraising Phone Calls Opposing Obama (Est.)
Mailing Address 325 Springside Dr	
City State Zip Code Akron OH 44333-2434	

Outstanding Balance Beginning This Period 5333.00	<b>Transaction ID : D135EDBF482FD4C2F9A5</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 5333.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Strategic Fundraising</b>	Nature of Debt (Purpose): Fundraising Phone Calls Opposing Obama (Est.)
Mailing Address 7591 9th St N	
City State Zip Code Saint Paul MN 55128-6626	

Outstanding Balance Beginning This Period 1.00	<b>Transaction ID : D5AEFEF32F48746C5822</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1.00

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	6910.00
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 63 OF 89
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**National Right to Life Victory Fund**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>InfoCision</b>	Nature of Debt (Purpose): Fundraising Phone Calls Opposing Obama (Est.)
Mailing Address 325 Springside Dr	
City State Zip Code Akron OH 44333-2434	

Outstanding Balance Beginning This Period 2298.00	<b>Transaction ID : DCCA63A2A24E04450BFC</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 2298.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Strategic Fundraising</b>	Nature of Debt (Purpose): Fundraising Phone Calls Opposing Obama (est)
Mailing Address 7591 9th St N	
City State Zip Code Saint Paul MN 55128-6626	

Outstanding Balance Beginning This Period 1604.25	<b>Transaction ID : DBE9146C3B07B449F820</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1604.25

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>InfoCision</b>	Nature of Debt (Purpose): Fundraising Phone Calls Opposing Obama (est)
Mailing Address 325 Springside Dr	
City State Zip Code Akron OH 44333-2434	

Outstanding Balance Beginning This Period 4959.00	<b>Transaction ID : D6A795B27778B467FAFE</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 4959.00

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	8861.25
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 64 OF 89
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**National Right to Life Victory Fund**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>InfoCision</b>	Nature of Debt (Purpose): Fundraising Phone Calls Opposing Obama (est)
Mailing Address 325 Springside Dr	
City State Zip Code Akron OH 44333-2434	

Outstanding Balance Beginning This Period <input type="text" value="3254.00"/>	<b>Transaction ID : DB197BCEFCED440C8F0</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="3254.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>InfoCision</b>	Nature of Debt (Purpose): Fundraising Phone Calls Opposing Obama (est)
Mailing Address 325 Springside Dr	
City State Zip Code Akron OH 44333-2434	

Outstanding Balance Beginning This Period <input type="text" value="2637.50"/>	<b>Transaction ID : D3E2914C33ACE4D5DB82</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="2637.50"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Strategic Fundraising</b>	Nature of Debt (Purpose): Fundraising Phone Calls Opposing Obama (est)
Mailing Address 7591 9th St N	
City State Zip Code Saint Paul MN 55128-6626	

Outstanding Balance Beginning This Period <input type="text" value="657.00"/>	<b>Transaction ID : DEBBA9AEE0CC94CA2AB</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="657.00"/>

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	<input type="text" value="6548.50"/>
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	<input type="text"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	<input type="text"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>



**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 65 OF 89
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**National Right to Life Victory Fund**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>InfoCision</b>	Nature of Debt (Purpose): Fundraising Phone Calls opposing Obama (est)
Mailing Address 325 Springside Dr	
City State Zip Code Akron OH 44333-2434	

Outstanding Balance Beginning This Period 2029.00	<b>Transaction ID : D95BBE1E00BF545A2920</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 2029.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Strategic Fundraising</b>	Nature of Debt (Purpose): Fundraising Phone Calls Opposing Obama (est)
Mailing Address 7591 9th St N	
City State Zip Code Saint Paul MN 55128-6626	

Outstanding Balance Beginning This Period 947.25	<b>Transaction ID : D0A6753B538AD4FCDB78</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 947.25

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>InfoCision</b>	Nature of Debt (Purpose): Fundraising Phone Calls Opposing Obama (est)
Mailing Address 325 Springside Dr	
City State Zip Code Akron OH 44333-2434	

Outstanding Balance Beginning This Period 1875.00	<b>Transaction ID : D7E6D54854F1A426DA01</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1875.00

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	4851.25
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 66 OF 89
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**National Right to Life Victory Fund**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Strategic Fundraising</b>	Nature of Debt (Purpose): Fundraising Phone Calls Opposing Obama (est)
Mailing Address 7591 9th St N	
City State Zip Code Saint Paul MN 55128-6626	

Outstanding Balance Beginning This Period 963.00	<b>Transaction ID : D04A2467B21784DADB7B</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 963.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>InfoCision</b>	Nature of Debt (Purpose): Fundraising Phone Calls Opposing Obama (est)
Mailing Address 325 Springside Dr	
City State Zip Code Akron OH 44333-2434	

Outstanding Balance Beginning This Period 5654.60	<b>Transaction ID : D0F33E0861454452E8BD</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 5654.60

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Strategic Fundraising</b>	Nature of Debt (Purpose): Fundraising Phone Calls Opposing Obama (est)
Mailing Address 7591 9th St N	
City State Zip Code Saint Paul MN 55128-6626	

Outstanding Balance Beginning This Period 1093.50	<b>Transaction ID : D0D0FFCB0BBFC4CEC8C3</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1093.50

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	7711.10
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 67 OF 89
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**National Right to Life Victory Fund**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>InfoCision</b>	Nature of Debt (Purpose): Fundraising Phone Calls Opposing Obama (est)
Mailing Address 325 Springside Dr	
City State Zip Code Akron OH 44333-2434	

Outstanding Balance Beginning This Period 1125.54	<b>Transaction ID : D2A8B4DF8F4984BBEB46</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1125.54

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>MDS Communications Corporation</b>	Nature of Debt (Purpose): Fundraising Phone Calls Opposing Obama (est)
Mailing Address 545 W Juanita Ave	
City State Zip Code Mesa AZ 85210-6033	

Outstanding Balance Beginning This Period 1272.02	<b>Transaction ID : DDE348291ADDA401F821</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1272.02

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>InfoCision</b>	Nature of Debt (Purpose): Printing Brochures Opposing Obama
Mailing Address 325 Springside Dr	
City State Zip Code Akron OH 44333-2434	

Outstanding Balance Beginning This Period 13313.74	<b>Transaction ID : D9C3B69EDBABD45DF983</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 13313.74

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	15711.30
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 68 OF 89
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**National Right to Life Victory Fund**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Strategic Fundraising</b>	Nature of Debt (Purpose): Fundraising Phone Calls Opposing Obama (est)
Mailing Address 7591 9th St N	
City State Zip Code Saint Paul MN 55128-6626	

Outstanding Balance Beginning This Period 1000.00	<b>Transaction ID : DB9ABC3559B90485CBF5</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>InfoCision</b>	Nature of Debt (Purpose): GOTV Calls Opposing Obama (est)
Mailing Address 325 Springside Dr	
City State Zip Code Akron OH 44333-2434	

Outstanding Balance Beginning This Period 287.23	<b>Transaction ID : D6524CD874597426C9F6</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 287.23

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>InfoCision</b>	Nature of Debt (Purpose): Fundraising Phone Calls Opposing Obama (est)
Mailing Address 325 Springside Dr	
City State Zip Code Akron OH 44333-2434	

Outstanding Balance Beginning This Period 3000.00	<b>Transaction ID : D81A06B1C459D42B4AD7</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 3000.00

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	4287.23
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 69 OF 89
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**National Right to Life Victory Fund**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>InfoCision</b>	Nature of Debt (Purpose): GOTV Calls Opposing Obama (est)
Mailing Address 325 Springside Dr	
City State Zip Code Akron OH 44333-2434	

Outstanding Balance Beginning This Period 1581.76	<b>Transaction ID : DBB2F96476FAB427EA52</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1581.76

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>InfoCision</b>	Nature of Debt (Purpose): Fundraising Phone Calls Opposing Obama (est)
Mailing Address 325 Springside Dr	
City State Zip Code Akron OH 44333-2434	

Outstanding Balance Beginning This Period 13622.65	<b>Transaction ID : D49360E4ACCE7438CB73</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 13622.65

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>InfoCision</b>	Nature of Debt (Purpose): GOTV Calls Opposing Obama (est)
Mailing Address 325 Springside Dr	
City State Zip Code Akron OH 44333-2434	

Outstanding Balance Beginning This Period 499.80	<b>Transaction ID : D2B60640FFBC94E92811</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 499.80

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	15704.21
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 70 OF 89
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**National Right to Life Victory Fund**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>InfoCision</b>	Nature of Debt (Purpose): GOTV Calls Opposing Obama (est)
Mailing Address 325 Springside Dr	
City State Zip Code Akron OH 44333-2434	

Outstanding Balance Beginning This Period 1672.67	<b>Transaction ID : DB987D8850BC8454AB34</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1672.67

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>InfoCision</b>	Nature of Debt (Purpose): Fundraising Phone Calls Opposing Obama (Est.)
Mailing Address 325 Springside Dr	
City State Zip Code Akron OH 44333-2434	

Outstanding Balance Beginning This Period 2093.09	<b>Transaction ID : D9A24EE2C638A4EEE964</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 2093.09

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Strategic Fundraising</b>	Nature of Debt (Purpose): Fundraising Phone Calls for Marshall Sanford (est.)
Mailing Address 7591 9th St N	
City State Zip Code Saint Paul MN 55128-6626	

Outstanding Balance Beginning This Period 1264.50	<b>Transaction ID : DF8F8436265D145CAADA</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1264.50

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	5030.26
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 71 OF 89
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**National Right to Life Victory Fund**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Strategic Fundraising</b>	Nature of Debt (Purpose): Fundraising Phone Calls for Marshall Sanford (Est.)
Mailing Address 7591 9th St N	
City State Zip Code Saint Paul MN 55128-6626	

Outstanding Balance Beginning This Period 1480.50	<b>Transaction ID : DD7D1A08C752540749CF</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1480.50

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Strategic Fundraising</b>	Nature of Debt (Purpose): Fundraising phone calls for Marshall Sanford (est.)
Mailing Address 7591 9th St N	
City State Zip Code Saint Paul MN 55128-6626	

Outstanding Balance Beginning This Period 542.25	<b>Transaction ID : DE64B6A8DA75148E0A97</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 542.25

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Strategic Fundraising</b>	Nature of Debt (Purpose): Fundraising Phone Calls for Marshall Sanford (Est.)
Mailing Address 7591 9th St N	
City State Zip Code Saint Paul MN 55128-6626	

Outstanding Balance Beginning This Period 396.00	<b>Transaction ID : D17FE80EFA27D4D6DBF3</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 396.00

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	2418.75
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 72 OF 89
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**National Right to Life Victory Fund**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Strategic Fundraising</b>	Nature of Debt (Purpose): Fundraising Phone Calls for Marshall Sanford (Est.)
Mailing Address 7591 9th St N	
City State Zip Code Saint Paul MN 55128-6626	

Outstanding Balance Beginning This Period 279.00	<b>Transaction ID : DCE0D9B6D5DFE4B16900</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 279.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Strategic Fundraising</b>	Nature of Debt (Purpose): Fundraising Phone Calls for Marshall Sanford (Est.)
Mailing Address 7591 9th St N	
City State Zip Code Saint Paul MN 55128-6626	

Outstanding Balance Beginning This Period 542.25	<b>Transaction ID : D151ACCD25834629A68</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 542.25

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Strategic Fundraising</b>	Nature of Debt (Purpose): Fundraising Phone Calls for Jason Smith (Est.)
Mailing Address 7591 9th St N	
City State Zip Code Saint Paul MN 55128-6626	

Outstanding Balance Beginning This Period 234.00	<b>Transaction ID : DFD8D6283DC4444699B7</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 234.00

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	1055.25
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	



**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 73 OF 89
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**National Right to Life Victory Fund**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Strategic Fundraising</b>	Nature of Debt (Purpose): Fundraising Phone Calls for Jason Smith (Est.)
Mailing Address 7591 9th St N	
City State Zip Code Saint Paul MN 55128-6626	

Outstanding Balance Beginning This Period 506.25	Transaction ID : D106BAE5AE700418EBFC	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 506.25

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>The Lamar Companies</b>	Nature of Debt (Purpose): IE-Landrieu-Advertising
Mailing Address PO Box 37067	
City State Zip Code Shreveport LA 71133-7067	

Outstanding Balance Beginning This Period 2750.00	Transaction ID : D1417DC93ED044C81917	
Amount Incurred This Period 0.00	Payment This Period 2750.00	Outstanding Balance at Close of This Period 0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>MDS Communications Corporation</b>	Nature of Debt (Purpose): Fundraising Consulting
Mailing Address 545 W Juanita Ave	
City State Zip Code Mesa AZ 85210-6033	

Outstanding Balance Beginning This Period 0.00	Transaction ID : D8CC64B36BB9C467D965	
Amount Incurred This Period 15860.44	Payment This Period 0.00	Outstanding Balance at Close of This Period 15860.44

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	16366.69
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	221827.10
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	0.00
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	221827.10

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

NAME OF COMMITTEE (In Full) <b>National Right to Life Victory Fund</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <b>C</b> C00509893
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>Japs-Olson Company</b>	Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y <b>09 / 03 / 2014</b>
Mailing Address 7500 Excelsior Blvd	Amount <b>9.46</b>
City State Zip Code Minneapolis MN 55426-4503	<b>Transaction ID : E7CA4EDE1730A4697A58</b> Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y
Purpose of Expenditure IE-Sullivan-Postage	Category/Type
Name of Federal Candidate Dan Sullivan	<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: <b>AK</b>
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) ▶ _____
	<b>20.72</b>

Full Name of Payee <b>Japs-Olson Company</b>	Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y <b>09 / 03 / 2014</b>
Mailing Address 7500 Excelsior Blvd	Amount <b>55.04</b>
City State Zip Code Minneapolis MN 55426-4503	<b>Transaction ID : ED2FCFF164B1C4B4F8A4</b> Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y
Purpose of Expenditure IE-Rounds-Postage	Category/Type
Name of Federal Candidate Marion Michael Rounds	<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: <b>SD</b>
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) ▶ _____
	<b>120.58</b>

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<b>64.50</b>
(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.

*Wayne Cockfield*

Signature \_\_\_\_\_ [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y  
**10 / 15 / 2014**

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

NAME OF COMMITTEE (In Full) <b>National Right to Life Victory Fund</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 1.5em; font-weight: bold; border: 1px solid black; display: inline-block; width: 20px; height: 20px; vertical-align: middle; text-align: center; line-height: 20px;">C</span> <span style="font-size: 1.2em; vertical-align: middle;">C00509893</span> </div>
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="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name of Payee <b>Japs-Olson Company</b>	Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>                      09 / 03 / 2014                 </div>
Mailing Address 7500 Excelsior Blvd	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> <span style="font-size: 1.2em;">48.20</span> </div>
City State Zip Code Minneapolis MN 55426-4503	<b>Transaction ID : E18A1B853BC1B478D8B3</b> Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> </div>
Purpose of Expenditure IE-Cotton-Printing	Category/Type <span style="border: 1px solid black; padding: 2px;"> </span>
Name of Federal Candidate Thomas Cotton	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: AR
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;"> <span style="font-size: 1.2em;">88.68</span> </div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <b>Japs-Olson Company</b>	Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>                      09 / 03 / 2014                 </div>
Mailing Address 7500 Excelsior Blvd	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> <span style="font-size: 1.2em;">425.40</span> </div>
City State Zip Code Minneapolis MN 55426-4503	<b>Transaction ID : ED253D363C04C4DDA8A'</b> Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px;"> <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> </div>
Purpose of Expenditure IE-Land-Postage	Category/Type <span style="border: 1px solid black; padding: 2px;"> </span>
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 <input type="checkbox"/> President State: MI
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;"> <span style="font-size: 1.2em;">931.95</span> </div>	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..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> <span style="font-size: 1.2em;">473.60</span> </div>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> <span style="font-size: 1.2em;"> </span> </div>
(c) <b>TOTAL</b> Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> <span style="font-size: 1.2em;"> </span> </div>

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.

*Wayne Cockfield*
[Electronically Filed]
Date M M / D D / Y Y Y Y Y Y 10 / 15 / 2014

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Right to Life Victory Fund
FEC IDENTIFICATION NUMBER C C00509893
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Japs-Olson Company
Mailing Address 7500 Excelsior Blvd
City Minneapolis State MN Zip Code 55426-4503
Purpose of Expenditure IE-Capito-Printing Category/Type

Date of Public Distribution/Dissemination 09 / 03 / 2014
Amount 67.12
Transaction ID : EE5B6D5D89F0D419E9C4
Date of Disbursement or Obligation

Name of Federal Candidate Shelley Moore Capito
Support Oppose
Office Sought: House Senate State: WV
Calendar Year-To-Date Per Election for Office Sought 123.49

Disbursement For: Primary General 2014 Other (specify)

Full Name of Payee Japs-Olson Company
Mailing Address 7500 Excelsior Blvd
City Minneapolis State MN Zip Code 55426-4503
Purpose of Expenditure IE-Gillespie-Postage Category/Type

Date of Public Distribution/Dissemination 09 / 03 / 2014
Amount 175.91
Transaction ID : EAD77CDA1770C42E29D7
Date of Disbursement or Obligation

Name of Federal Candidate Edward W Gillespie
Support Oppose
Office Sought: House Senate State: VA
Calendar Year-To-Date Per Election for Office Sought 385.38

Disbursement For: Primary General 2014 Other (specify)

Table with 2 columns: Description and Amount. (a) SUBTOTAL of Itemized Independent Expenditures 243.03, (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.

Wayne Cockfield
Signature

[Electronically Filed]

Date 10 / 15 / 2014

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Right to Life Victory Fund
FEC IDENTIFICATION NUMBER C C00509893
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Japs-Olson Company
Mailing Address 7500 Excelsior Blvd
City Minneapolis State MN Zip Code 55426-4503
Purpose of Expenditure IE-Shaheen-Printing
Name of Federal Candidate Jeanne Shaheen
Calendar Year-To-Date Per Election for Office Sought 63.40

Date of Public Distribution/Dissemination 09 / 03 / 2014
Amount 34.46
Transaction ID : E7881A05DE5F94AFBFA
Date of Disbursement or Obligation
Office Sought: House District:
President Senate State: NH
Disbursement For: Primary General 2014 Other (specify)

Full Name of Payee Japs-Olson Company
Mailing Address 7500 Excelsior Blvd
City Minneapolis State MN Zip Code 55426-4503
Purpose of Expenditure IE-Land-Printing
Name of Federal Candidate Terri Lynn Land
Calendar Year-To-Date Per Election for Office Sought 931.95

Date of Public Distribution/Dissemination 09 / 03 / 2014
Amount 506.55
Transaction ID : E9EEEEAB34BE124B98826
Date of Disbursement or Obligation
Office Sought: House District:
President Senate State: MI
Disbursement For: Primary General 2014 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 541.01
(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.

Wayne Cockfield [Electronically Filed] Date 10 / 15 / 2014
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Right to Life Victory Fund
FEC IDENTIFICATION NUMBER C C00509893
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Japs-Olson Company
Mailing Address 7500 Excelsior Blvd
City Minneapolis State MN Zip Code 55426-4503
Purpose of Expenditure IE-McConnell-Postage Category/Type

Date of Public Distribution/Dissemination 09 / 03 / 2014
Amount 117.46
Transaction ID : E874AF7F7A0844F8582E
Date of Disbursement or Obligation

Name of Federal Candidate Mitch McConnell
Support [X] Oppose [ ]
Office Sought: House [ ] President [ ] Senate [X] State: KY
Calendar Year-To-Date Per Election for Office Sought 257.33

Disbursement For: Primary [ ] General [X] Other (specify)
2014

Full Name of Payee Japs-Olson Company
Mailing Address 7500 Excelsior Blvd
City Minneapolis State MN Zip Code 55426-4503
Purpose of Expenditure IE-Gillespie-Printing Category/Type

Date of Public Distribution/Dissemination 09 / 03 / 2014
Amount 209.47
Transaction ID : EA2B71A469F1648E3B3A
Date of Disbursement or Obligation

Name of Federal Candidate Edward W Gillespie
Support [X] Oppose [ ]
Office Sought: House [ ] President [ ] Senate [X] State: VA
Calendar Year-To-Date Per Election for Office Sought 385.38

Disbursement For: Primary [ ] General [X] Other (specify)
2014

Table with 2 columns: Description and Amount. Row (a) SUBTOTAL of Itemized Independent Expenditures 326.93. Row (b) SUBTOTAL of Unitemized Independent Expenditures. Row (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.

Signature Wayne Cockfield [Electronically Filed] Date 10 / 15 / 2014

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

NAME OF COMMITTEE (In Full) <b>National Right to Life Victory Fund</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <b>C</b> C00509893
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="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name of Payee <b>Japs-Olson Company</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> 09 / 03 / 2014
Mailing Address 7500 Excelsior Blvd	Amount <span style="border: 1px solid black; padding: 2px;">M M M M . M M</span> 154.96
City Minneapolis State MN Zip Code 55426-4503	<b>Transaction ID : EAAD56A4B6C2C48E9BDI</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>
Purpose of Expenditure IE-Perdue-Printing	Category/Type <span style="border: 1px solid black; padding: 2px;">M M M M</span>
Name of Federal Candidate David Perdue	<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: GA
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">M M M M . M M</span> 285.10	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee <b>Japs-Olson Company</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> 09 / 03 / 2014
Mailing Address 7500 Excelsior Blvd	Amount <span style="border: 1px solid black; padding: 2px;">M M M M . M M</span> 206.54
City Minneapolis State MN Zip Code 55426-4503	<b>Transaction ID : E5DACC216B1C2424B93E</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>
Purpose of Expenditure IE-Tillis-Printing	Category/Type <span style="border: 1px solid black; padding: 2px;">M M M M</span>
Name of Federal Candidate Thom R Tillis	<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: NC
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">M M M M . M M</span> 379.99	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;">M M M M . M M</span> 361.50
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures.....▶	<span style="border: 1px solid black; padding: 2px;">M M M M . M M</span>
(c) <b>TOTAL</b> Independent Expenditures.....▶	<span style="border: 1px solid black; padding: 2px;">M M M M . M M</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.

Wayne Cockfield

[Electronically Filed]

Signature \_\_\_\_\_ Date M M / D D / Y Y Y Y Y Y  
10 / 15 / 2014

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Right to Life Victory Fund
FEC IDENTIFICATION NUMBER C C00509893
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Japs-Olson Company
Mailing Address 7500 Excelsior Blvd
City Minneapolis State MN Zip Code 55426-4503
Purpose of Expenditure IE-Ernst-Printing
Name of Federal Candidate Joni K Ernst
Calendar Year-To-Date Per Election for Office Sought 284.69

Date of Public Distribution/Dissemination 09 / 03 / 2014
Amount 154.74
Transaction ID : E93DE929A99DA4DF992E
Date of Disbursement or Obligation
Office Sought: House District:
President Senate State: IA
Disbursement For: Primary General 2014 Other (specify)

Full Name of Payee Japs-Olson Company
Mailing Address 7500 Excelsior Blvd
City Minneapolis State MN Zip Code 55426-4503
Purpose of Expenditure IE-Tillis-Postage
Name of Federal Candidate Thom R Tillis
Calendar Year-To-Date Per Election for Office Sought 379.99

Date of Public Distribution/Dissemination 09 / 03 / 2014
Amount 173.45
Transaction ID : EF50558B86C5D4D8BA59
Date of Disbursement or Obligation
Office Sought: House District:
President Senate State: NC
Disbursement For: Primary General 2014 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 328.19
(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.
Wayne Cockfield [Electronically Filed] Date 10 / 15 / 2014
Signature



SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Right to Life Victory Fund
FEC IDENTIFICATION NUMBER C C00509893
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Japs-Olson Company
Mailing Address 7500 Excelsior Blvd
City Minneapolis State MN Zip Code 55426-4503
Purpose of Expenditure IE-Perdue-Postage
Name of Federal Candidate David Perdue Support
Office Sought: Senate State: GA
Calendar Year-To-Date Per Election for Office Sought 285.10
Disbursement For: General 2014

Full Name of Payee Japs-Olson Company
Mailing Address 7500 Excelsior Blvd
City Minneapolis State MN Zip Code 55426-4503
Purpose of Expenditure IE-Daines-Postage
Name of Federal Candidate Steven Daines Support
Office Sought: House District: 01 State: MT
Calendar Year-To-Date Per Election for Office Sought 93.24
Disbursement For: General 2014

(a) SUBTOTAL of Itemized Independent Expenditures 172.70
(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.
Wayne Cockfield [Electronically Filed] Date 10/15/2014

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Right to Life Victory Fund
FEC IDENTIFICATION NUMBER C C00509893
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Japs-Olson Company
Mailing Address 7500 Excelsior Blvd
City Minneapolis State MN Zip Code 55426-4503
Purpose of Expenditure IE-Gardner-Printing
Name of Federal Candidate Cory Gardner
Calendar Year-To-Date Per Election for Office Sought 267.69

Date of Public Distribution/Dissemination 09 / 03 / 2014
Amount 145.50
Transaction ID : ECFDA7A5AB72C4C17882
Date of Disbursement or Obligation
Office Sought: House District:
President Senate State: CO
Disbursement For: Primary General 2014 Other (specify)

Full Name of Payee Japs-Olson Company
Mailing Address 7500 Excelsior Blvd
City Minneapolis State MN Zip Code 55426-4503
Purpose of Expenditure IE-Shaheen-Postage
Name of Federal Candidate Jeanne Shaheen
Calendar Year-To-Date Per Election for Office Sought 63.40

Date of Public Distribution/Dissemination 09 / 03 / 2014
Amount 28.94
Transaction ID : E180E3A8832D84AC884B
Date of Disbursement or Obligation
Office Sought: House District:
President Senate State: NH
Disbursement For: Primary General 2014 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 174.44
(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.
Wayne Cockfield [Electronically Filed] Date 10 / 15 / 2014
Signature

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

NAME OF COMMITTEE (In Full) <b>National Right to Life Victory Fund</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <b>C</b> C00509893
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>Japs-Olson Company</b>	Date of Public Distribution/Dissemination <span style="float:right">M M M / D D D / Y Y Y Y Y Y</span> 09 / 03 / 2014
Mailing Address 7500 Excelsior Blvd	Amount <span style="float:right">129.95</span>
City Minneapolis State MN Zip Code 55426-4503	<b>Transaction ID : E3311EA93279F41E09B2</b> Date of Disbursement or Obligation <span style="float:right">M M M / D D D / Y Y Y Y Y Y</span>
Purpose of Expenditure IE-Ernst-Postage Category/Type	Name of Federal Candidate Joni K Ernst <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: State: IA
Calendar Year-To-Date Per Election for Office Sought <span style="float:right">284.69</span>	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <b>Japs-Olson Company</b>	Date of Public Distribution/Dissemination <span style="float:right">M M M / D D D / Y Y Y Y Y Y</span> 09 / 03 / 2014
Mailing Address 7500 Excelsior Blvd	Amount <span style="float:right">56.37</span>
City Minneapolis State MN Zip Code 55426-4503	<b>Transaction ID : EC15A392B100A4CA388B</b> Date of Disbursement or Obligation <span style="float:right">M M M / D D D / Y Y Y Y Y Y</span>
Purpose of Expenditure IE-Capito-Postage Category/Type	Name of Federal Candidate Shelley Moore Capito <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: State: WV
Calendar Year-To-Date Per Election for Office Sought <span style="float:right">123.49</span>	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<span style="float:right">186.32</span>
(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.

*Wayne Cockfield*

Signature \_\_\_\_\_ [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y  
10 / 15 / 2014

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Right to Life Victory Fund
FEC IDENTIFICATION NUMBER C C00509893
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Japs-Olson Company
Mailing Address 7500 Excelsior Blvd
City Minneapolis State MN Zip Code 55426-4503
Purpose of Expenditure IE-Daines-Postage
Name of Federal Candidate Steven Daines
Calendar Year-To-Date Per Election for Office Sought 93.24

Date of Public Distribution/Dissemination 09 / 03 / 2014
Amount 50.68
Transaction ID : E426A4A8D13BF4597A53
Date of Disbursement or Obligation
Office Sought: House District: 01 State: MT
Disbursement For: General 2014

Full Name of Payee Japs-Olson Company
Mailing Address 7500 Excelsior Blvd
City Minneapolis State MN Zip Code 55426-4503
Purpose of Expenditure IE-McConnell-Printing
Name of Federal Candidate Mitch McConnell
Calendar Year-To-Date Per Election for Office Sought 257.33

Date of Public Distribution/Dissemination 09 / 03 / 2014
Amount 139.87
Transaction ID : E9DC1D5D42AFB4D67B1
Date of Disbursement or Obligation
Office Sought: Senate District: State: KY
Disbursement For: General 2014

(a) SUBTOTAL of Itemized Independent Expenditures 190.55
(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.
Wayne Cockfield [Electronically Filed] Date 10 / 15 / 2014
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Right to Life Victory Fund
FEC IDENTIFICATION NUMBER C C00509893
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Japs-Olson Company
Mailing Address 7500 Excelsior Blvd
City Minneapolis State MN Zip Code 55426-4503
Purpose of Expenditure IE-Rounds-Printing
Name of Federal Candidate Marion Michael Rounds
Calendar Year-To-Date Per Election for Office Sought 120.58

Date of Public Distribution/Dissemination 09 / 03 / 2014
Amount 65.54
Transaction ID : E7ED5FC99CF2B44ACB71
Date of Disbursement or Obligation
Office Sought: House District:
President Senate State: SD
Disbursement For: Primary General 2014 Other (specify)

Full Name of Payee Japs-Olson Company
Mailing Address 7500 Excelsior Blvd
City Minneapolis State MN Zip Code 55426-4503
Purpose of Expenditure IE-Sullivan-Printing
Name of Federal Candidate Dan Sullivan
Calendar Year-To-Date Per Election for Office Sought 20.72

Date of Public Distribution/Dissemination 09 / 03 / 2014
Amount 11.26
Transaction ID : EF44A151488DB47E4863
Date of Disbursement or Obligation
Office Sought: House District:
President Senate State: AK
Disbursement For: Primary General 2014 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 76.80
(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.
Wayne Cockfield [Electronically Filed] Date 10 / 15 / 2014
Signature

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

NAME OF COMMITTEE (In Full) <b>National Right to Life Victory Fund</b>	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> C00509893
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>Japs-Olson Company</b>		Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>	
Mailing Address 7500 Excelsior Blvd		<input type="text"/> / <input type="text"/> / <input type="text"/>	
City Minneapolis	State MN	Zip Code 55426-4503	Amount <input type="text"/> 50.13
Purpose of Expenditure IE-Landrieu-Postage		Category/Type <input type="text"/>	
Name of Federal Candidate Mary L Landrieu		Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>LA</u>	
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"/> 885.35		<input type="text"/>	

**Transaction ID : E9BDE316ADADA4172A21**

Full Name of Payee <b>Japs-Olson Company</b>		Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>	
Mailing Address 7500 Excelsior Blvd		<input type="text"/> / <input type="text"/> / <input type="text"/>	
City Minneapolis	State MN	Zip Code 55426-4503	Amount <input type="text"/> 122.19
Purpose of Expenditure IE-Gardner-Postage		Category/Type <input type="text"/>	
Name of Federal Candidate Cory Gardner		Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>CO</u>	
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"/> 267.69		<input type="text"/>	

**Transaction ID : EE08C55DD4FBD44FB9C1**

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<input type="text"/> 172.32
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<input type="text"/>
(c) <b>TOTAL</b> Independent Expenditures..... ▶	<input type="text"/>

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.

*Wayne Cockfield*  
Signature \_\_\_\_\_ [Electronically Filed] Date  /  /

10 /  15 /  2014

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

NAME OF COMMITTEE (In Full) <b>National Right to Life Victory Fund</b>		<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> C00509893
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>Japs-Olson Company</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <b>09 / 03 / 2014</b>	
Mailing Address 7500 Excelsior Blvd		Amount <b>59.69</b>	
City Minneapolis	State MN	Zip Code 55426-4503	<b>Transaction ID : E178344F8BE084CD0B98</b>
Purpose of Expenditure IE-Landrieu-Printing	Category/Type	Date of Disbursement or Obligation MM / DD / YYYY	
Name of Federal Candidate Mary L Landrieu		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>LA</u>
Calendar Year-To-Date Per Election for Office Sought		<b>885.35</b>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee <b>Japs-Olson Company</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <b>09 / 03 / 2014</b>	
Mailing Address 7500 Excelsior Blvd		Amount <b>40.48</b>	
City Minneapolis	State MN	Zip Code 55426-4503	<b>Transaction ID : E24616703E9FC4F31B5C</b>
Purpose of Expenditure IE-Cotton-Postage	Category/Type	Date of Disbursement or Obligation MM / DD / YYYY	
Name of Federal Candidate Thomas Cotton		<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: <u>AR</u>
Calendar Year-To-Date Per Election for Office Sought		<b>88.68</b>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures.....▶	<b>100.17</b>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures.....▶	
<b>(c) 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.

Wayne Cockfield

[Electronically Filed]

Signature \_\_\_\_\_ Date MM / DD / YYYY **10 / 15 / 2014**

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Right to Life Victory Fund
FEC IDENTIFICATION NUMBER C C00509893
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee The Lamar Companies
Mailing Address PO Box 37067
City Shreveport State LA Zip Code 71133-7067
Purpose of Expenditure IE-Landrieu-Advertising
Name of Federal Candidate Mary L Landrieu
Calendar Year-To-Date Per Election for Office Sought 11785.35

Date of Public Distribution/Dissemination 09/15/2014
Amount 9000.00
Transaction ID : E19BEEB69F1A04649BAA
Date of Disbursement or Obligation
Office Sought: House District:
President Senate State: LA
Disbursement For: Primary General 2014 Other (specify)

Full Name of Payee AdSource
Mailing Address 131 State Street
City Lake Charles State LA Zip Code 70605-5717
Purpose of Expenditure IE-Advertising-Landrieu
Name of Federal Candidate Mary L Landrieu
Calendar Year-To-Date Per Election for Office Sought 11785.35

Date of Public Distribution/Dissemination 09/15/2014
Amount 1900.00
Transaction ID : E8B3FCD8637B3457EB12
Date of Disbursement or Obligation
Office Sought: House District:
President Senate State: LA
Disbursement For: Primary General 2014 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 10900.00
(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.
Wayne Cockfield [Electronically Filed] Date 10/15/2014
Signature



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

NAME OF COMMITTEE (In Full) <b>National Right to Life Victory Fund</b>		<b>FEC IDENTIFICATION NUMBER ▼</b> <b>C</b> C00509893
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>AdSource</b>		Date of Public Distribution/Dissemination <span style="margin-left: 20px;">M M M / D D D / Y Y Y Y Y Y</span> <b>09 / 29 / 2014</b>	
Mailing Address <b>131 State Street</b>		Amount <span style="margin-left: 20px;">850.00</span>	
City <b>Lake Charles</b>	State <b>LA</b>	Zip Code <b>70605-5717</b>	<b>Transaction ID : E4A843D252F7F4A59981</b>
Purpose of Expenditure <b>IE-Advertising-Landrieu</b>	Category/ Type	Date of Disbursement or Obligation <span style="margin-left: 20px;">M M M / D D D / Y Y Y Y Y Y</span>	
Name of Federal Candidate <b>Mary L Landrieu</b>		Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <b>LA</b>	
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) ▶ _____	
<span style="margin-left: 20px;">12635.35</span>			

Full Name of Payee		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		Amount	
City	State	Date of Disbursement or Obligation <span style="margin-left: 20px;">M M M / D D D / Y Y Y Y Y Y</span>	
Purpose of Expenditure	Category/ Type		
Name of Federal Candidate		Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input type="checkbox"/> Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____	

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures.....▶	<b>850.00</b>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures.....▶	
<b>(c) TOTAL</b> Independent Expenditures.....▶	<b>15162.06</b>

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.

*Wayne Cockfield*  
Signature

[Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y  
**10 / 15 / 2014**