SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

FOR LINE 24 OF FORM 3X

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

FEC IDENTIFICATION NUMBER
C00111278

Full Name (Last, First, Middle, Initial) of Payee
EU Services

Mailing Address
P.O. Box 75241

City: Baltimore | State: MD | Zip Code: 21275-

Date: 10 15 2002 | Amount: 1475.33

Transaction ID: 1023200259E8470

Purpose of Expenditure

Category/ Type

Name of Federal Candidate supported or opposed by expenditure:
MICHAUD, MICHAEL H

Office Sought: X House / Senate / Presidential

State: ME District: 02

Check One: X Support / Oppose

Full Name (Last, First, Middle, Initial) of Payee
EU Services

Mailing Address
P.O. Box 75241

City: Baltimore | State: MD | Zip Code: 21275-

Date: 10 15 2002 | Amount: 37118.14

Transaction ID: 1023200259E8472

Purpose of Expenditure

Category/ Type

Name of Federal Candidate supported or opposed by expenditure:
TALENT, JAMES MATTHES

Office Sought: House / X Senate / Presidential

State: MO District: 00

Check One: X Support / Oppose

Full Name (Last, First, Middle, Initial) of Payee
EU Services

Mailing Address
P.O. Box 75241

City: Baltimore | State: MD | Zip Code: 21275-

Date: 10 15 2002 | Amount: 2310.53

Transaction ID: 1023200259E8479

Purpose of Expenditure

Category/ Type

Name of Federal Candidate supported or opposed by expenditure:
PEARCE, STEVE

Office Sought: X House / Senate / Presidential

State: NM District: 02

Check One: X Support / Oppose

(a) **SUBTOTAL** of Itemized Independent Expenditures ..... ▶ **40904.00**

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

(c) **TOTAL** Independent Expenditures ..... ▶

Under penalty of perjury, I certify that no coordinated expenditures contained herein were made in cooperation, consultation, concert with, or at the request or suggestion of any candidate, any authorized committee or agent of such candidate or authorized committee.

Date M M D D Y Y Y Y

Signature