

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

| | |
|--|---|
| NAME OF COMMITTEE (In Full) National Right to Life Political Action Committee | FEC IDENTIFICATION NUMBER C C00111278 |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice | |

Full Name (Last, First, Middle, Initial) of Payee
Wmkt-am

Mailing Address
2095 US 131 S

| | | |
|------------------|-------------|-------------------|
| City Petoskey | State MI | Zip Code 49770 |
|------------------|-------------|-------------------|

| | |
|--|-------------------|
| Purpose of Expenditure S6MI00335 Ad | Category/ Type |
|--|-------------------|

Name of Federal Candidate supported or Opposed by expenditure:
MICHAEL J BOUCHARD

| | |
|---|----------|
| Calendar Year-To-Date Per Election for Office Sought | 76187.55 |
|---|----------|

Date
M M / D D / Y Y Y Y
1 0 / 1 3 / 2 0 0 6

Amount
129.20

Transaction ID: EBB4943EE45884D9EBA0

Office Sought: House State: MI
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2006

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

Mailing Address
P.O. Box 75241

| | | |
|-------------------|-------------|------------------------|
| City Baltimore | State MD | Zip Code 21275-5241 |
|-------------------|-------------|------------------------|

| | |
|---|-------------------|
| Purpose of Expenditure H2CO07055 Bulk mail | Category/ Type |
|---|-------------------|

Name of Federal Candidate supported or Opposed by expenditure:
RICK ODONNELL

| | |
|---|---------|
| Calendar Year-To-Date Per Election for Office Sought | 2610.88 |
|---|---------|

Date
M M / D D / Y Y Y Y
1 0 / 0 6 / 2 0 0 6

Amount
355.91

Transaction ID: E83BF6A962CE8481696B

Office Sought: House State: CO
 Senate District: 07
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2006

| | |
|---|--------|
| (a) SUBTOTAL of Itemized Independent Expenditures | 485.11 |
| (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.

Carol Tobias _____ Date M M / D D / Y Y Y Y
Signature 1 2 / 0 2 / 2 0 0 9