

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

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

Full Name (Last, First, Middle, Initial) of Payee  
Latino Semanal

Mailing Address  
947 Croyden Dr

City State Zip Code  
Dayton OH 45420-

Purpose of Expenditure  
Ad

Category/  
Type

Name of Federal Candidate supported or Opposed by expenditure:  
MEL MARTINEZ

Calendar Year-To-Date Per Election  
for Office Sought

225154.42

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

Amount  
316.80

Transaction ID: E11439

Office Sought:  House State: FL  
 Senate District: 00  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2004

Full Name (Last, First, Middle, Initial) of Payee  
National Right to Life Committee

Mailing Address  
512 10th Street, N.W.

City State Zip Code  
Washington DC 20004-

Purpose of Expenditure  
Stickers

Category/  
Type

Name of Federal Candidate supported or Opposed by expenditure:  
GEORGE W BUSH

Calendar Year-To-Date Per Election  
for Office Sought

2503661.69

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

Amount  
721.63

Transaction ID: E11657

Office Sought:  House State: 00  
 Senate District: 03  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2004

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....	1038.43
<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.

Amarie C. Natividad  
Signature

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