

ITEMIZED INDEPENDENT EXPENDITURES

(See Reverse Side for Instructions)

Name of Committee (In Full)				
Right to Life of Michigan Political Action Committee				
Full Name, Mailing Address & ZIP Code of Each Payee	Purpose of Expenditure	Date (month, day, year)	Amount	Name of Federal Candidate supported or opposed by the expenditure & office sought
Western American Mailers		8-4-00	55.78 MEMO	James Barcia 5th Congressional district <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		8-4-00	151.37 MEMO	Mike Rogers 8th Congressional district <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		8-4-00	25.26 MEMO	Dale Kildee 9th Congressional district <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		8-4-00	13.59 MEMO	Joe Knollenberg 11th Congressional district <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Central Michigan Paper P.O. Box 2649 Grand Rapids, MI 49501	Paper for friend to friend cards	9-14-00	412.30	See allocation below <input type="checkbox"/> Support <input type="checkbox"/> Oppose
		9-14-00	123.69 MEMO	George Bush President <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
(a) SUBTOTAL of Itemized Independent Expenditures .....			\$ <u>412.30</u>	
(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, concert with, or at the request or suggestion of any candidate or any authorized committee or agent of such candidate or authorized committee. Furthermore, these expenditures did not involve the financing of dissemination, distribution, or republication in whole or in part of any campaign materials prepared by the candidate, his campaign committee, or their agent.

Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, 19\_\_\_\_

My Commission expires: \_\_\_\_\_

NOTARY PUBLIC

Signature \_\_\_\_\_

Date \_\_\_\_\_