

(See Reverse Side for Instructions)

NAME OF COMMITTEE (In Full) National Right to Life Political Action				
A. Full Name, Mailing Address and Zip Code of Each Entry	Purpose of Expenditure	Date (month, day, year)	Amount	Name of Federal Candidate supported or opposed by the Expenditure & office sought
WGOG 2058 Westminster Highway Walhalla, SC 29691-	radio ads	02/07/2000	335.00	George W. Bush, President <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
WGRI 6171 S. Center Rd. Grand Blanc, MI 48439-	radio ads	02/16/2000	252.00	George W. Bush, President <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
WGSN 429 Pine Ave North Myrtle Beach, SC	radio ads	02/08/2000	500.00	George W. Bush, President <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
WGSN 429 Pine Ave North Myrtle Beach, SC	radio ads	01/21/2000	250.00	John McCain <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
WGTV 1416 High Market Georgetown, SC 29440-	radio ads	02/16/2000	175.00	George W. Bush, President <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
WHPB 601 S. Main St. Belton, SC 29627	radio ads	01/21/2000	370.00	John McCain, President <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose

(a) SUBTOTAL of Itemized Independent Expenditures	_____
(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 reproduction 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