



**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

**National Right to Life Political Action Committee**

Report Covering the Period: From:  /  /  To:  /  /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2010"/>		503509.40
(b) Cash on Hand at Beginning of Reporting Period.....	613514.63	
(c) Total Receipts (from Line 19) .....	201594.34	347769.09
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	815108.97	851278.49
7. Total Disbursements (from Line 31).....	44934.07	81103.59
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	770174.90	770174.90
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	150000.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	306.04	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

**For further information contact:**

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

**DETAILED SUMMARY PAGE**  
of Receipts

Write or Type Committee Name

**National Right to Life Political Action Committee**

Report Covering the Period: From:  /  /  To:  /  /

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	18735.00	29767.06
(ii) Unitemized .....	182449.29	315513.40
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	201184.29	345280.46
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	201184.29	345280.46
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	1462.50
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	410.05	1026.13
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	201594.34	347769.09
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	201594.34	347769.09

**DETAILED SUMMARY PAGE**

of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	14634.07	33710.64
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	14634.07	33710.64
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	5000.00	6000.00
24. Independent Expenditures (use Schedule E) .....	0.00	14192.95
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	300.00	600.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	300.00	600.00
29. Other Disbursements .....	25000.00	26600.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	44934.07	81103.59
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	44934.07	81103.59

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	201184.29	345280.46
34. Total Contribution Refunds (from Line 28(d)) .....	300.00	600.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	200884.29	344680.46
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	14634.07	33710.64
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	1462.50
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	14634.07	32248.14

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 6 OF 35
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

**A. Jonathan Adcock**  
Full Name (Last, First, Middle Initial)

Mailing Address 103 Branch Ct

City Stephens City State VA Zip Code 22655

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
FDA/DOT Air Traffic Control Specialist

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
06 / 09 / 2010

**Transaction ID : A1F51502C1D37409A8DD**

Amount of Each Receipt this Period  
300.00

**B. Brent Amato**  
Full Name (Last, First, Middle Initial)

Mailing Address 336 Ridgewood Dr

City Bloomington State IL Zip Code 61791-0001

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Heritage-Crystal Clean General Counsel

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
05 / 20 / 2010

**Transaction ID : AF3E490EA6B8548CB953**

Amount of Each Receipt this Period  
500.00

**C. David Armin**  
Full Name (Last, First, Middle Initial)

Mailing Address 35127 Highway Ww

City Marceline State MO Zip Code 64658-1897

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
University Of Missouri Physician

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
06 / 28 / 2010

**Transaction ID : AD84CDF5516304F2BA4B**

Amount of Each Receipt this Period  
500.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....	▶	1300.00
<b>TOTAL</b> This Period (last page this line number only).....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 35
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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

**A. John Beecken**  
Full Name (Last, First, Middle Initial)

Mailing Address 234 N Hale Ave

City Bartlett State IL Zip Code 60103

FEC ID number of contributing federal political committee. **C**

Name of Employer None Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
06 / 18 / 2010  
**Transaction ID : A42455EA333A54AAEA79**

Amount of Each Receipt this Period  
300.00

**B. Diane Bishop**  
Full Name (Last, First, Middle Initial)

Mailing Address 8304 Buckeye Dr

City Henrico State VA Zip Code 23228-3256

FEC ID number of contributing federal political committee. **C**

Name of Employer Information Requested Occupation Information Requested

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
06 / 15 / 2010  
**Transaction ID : A3B782E6FCC83462F8FB**

Amount of Each Receipt this Period  
500.00

**C. Stephen Brandt**  
Full Name (Last, First, Middle Initial)

Mailing Address 218 Chandler Ln

City Alabaster State AL Zip Code 35007-3123

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Military Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
06 / 10 / 2010  
**Transaction ID : AA679F3BC2F6840AAAFE**

Amount of Each Receipt this Period  
300.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1100.00

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 8 OF 35
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial)  
**A. Thomas Burdick**

Mailing Address **Blessed Theresa of Calcutta**

City <b>Winchester</b>	State <b>CA</b>	Zip Code <b>92596</b>
---------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer <b>Diocese of San Bernardino</b>	Occupation <b>Catholic Priest</b>
--	--------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt  

M M / D D / Y Y Y Y Y Y
06 / 09 / 2010

**Transaction ID : ACEC11E1C3CDA413986F**

Amount of Each Receipt this Period  

500.00
--------

Full Name (Last, First, Middle Initial)  
**B. Francis Burleigh**

Mailing Address **PO Box 10**

City <b>Church Point</b>	State <b>LA</b>	Zip Code <b>70525-0010</b>
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FEC ID number of contributing federal political committee. **C**

Name of Employer <b>None</b>	Occupation <b>Retired</b>
---------------------------------	------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt  

M M / D D / Y Y Y Y Y Y
06 / 11 / 2010

**Transaction ID : A964CC2929AA640558DD**

Amount of Each Receipt this Period  

100.00
--------

Full Name (Last, First, Middle Initial)  
**C. Jerry Carroll**

Mailing Address **PO Box 2**

City <b>Cedar Crest</b>	State <b>NM</b>	Zip Code <b>87008-0002</b>
----------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer <b>American Airlines</b>	Occupation <b>Pilot</b>
--	----------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt  

M M / D D / Y Y Y Y Y Y
05 / 28 / 2010

**Transaction ID : AFF0152E7CE074D7E809**

Amount of Each Receipt this Period  

75.00
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<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>675.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	



**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 35
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A. Barbara Cleveland**  
Full Name (Last, First, Middle Initial)

Mailing Address 10402 Forest Glen Place

City Powell State OH Zip Code 43065

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A Occupation Homemaker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
06 / 10 / 2010  
**Transaction ID : A44E3370941D549AB926**

Amount of Each Receipt this Period  
250.00

**B. John Davis**  
Full Name (Last, First, Middle Initial)

Mailing Address 4506 Ivy Dale Rd SE

City Decatur State AL Zip Code 35603-5321

FEC ID number of contributing federal political committee. **C**

Name of Employer SAIC Occupation Engineer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
06 / 28 / 2010  
**Transaction ID : ABD999038EB3941F4988**

Amount of Each Receipt this Period  
250.00

**C. Matthew Davis**  
Full Name (Last, First, Middle Initial)

Mailing Address 11320 Rainbow Falls Ln

City Fishers State IN Zip Code 46037

FEC ID number of contributing federal political committee. **C**

Name of Employer MetLife Home Loans Occupation Loan Consultant

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
06 / 24 / 2010  
**Transaction ID : A9327C4B4EA3046EFAB9**

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 750.00

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 35
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

Full Name (Last, First, Middle Initial) <b>A. Dennis Day</b>		Date of Receipt										
Mailing Address PO Box 279		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>06</td> <td></td> <td>09</td> <td></td> <td>2010</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	06		09		2010
M M	/	D D	/	Y Y Y Y								
06		09		2010								
City	State	Zip Code										
Sandpoint	ID	83864										
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>											
Name of Employer	Occupation											
RC Diocese of Boise	Clergyman											
Receipt For:	Aggregate Year-to-Date ▼											
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="500.00"/>											
		Amount of Each Receipt this Period										
		<input type="text" value="500.00"/>										
<b>Transaction ID : A0C94857B395F4AE5917</b>												

Full Name (Last, First, Middle Initial) <b>B. Donna Doney</b>		Date of Receipt										
Mailing Address 419 Motor Drome Rd		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>06</td> <td></td> <td>18</td> <td></td> <td>2010</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	06		18		2010
M M	/	D D	/	Y Y Y Y								
06		18		2010								
City	State	Zip Code										
Smithton	PA	15479-8727										
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>											
Name of Employer	Occupation											
None	Retired Teacher											
Receipt For:	Aggregate Year-to-Date ▼											
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="250.00"/>											
		Amount of Each Receipt this Period										
		<input type="text" value="250.00"/>										
<b>Transaction ID : A875755451E3048B290D</b>												

Full Name (Last, First, Middle Initial) <b>C. Nancy Farrington</b>		Date of Receipt										
Mailing Address 6013 Cannon Hill Rd		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>06</td> <td></td> <td>14</td> <td></td> <td>2010</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	06		14		2010
M M	/	D D	/	Y Y Y Y								
06		14		2010								
City	State	Zip Code										
Fort Washington	PA	19034-1801										
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>											
Name of Employer	Occupation											
N/a	Homemaker											
Receipt For:	Aggregate Year-to-Date ▼											
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="250.00"/>											
		Amount of Each Receipt this Period										
		<input type="text" value="250.00"/>										
<b>Transaction ID : A11DC19D92310430D976</b>												

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="1000.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 35
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial)  
**A. Mary Fleming**

Mailing Address 111 Holly Dr

City Spartanburg State SC Zip Code 29301-2859

FEC ID number of contributing federal political committee. **C**

Name of Employer Bell South Telephone Co. Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 09 / 2010

**Transaction ID : A0391440235A2497D8DC**

Amount of Each Receipt this Period  
250.00

Full Name (Last, First, Middle Initial)  
**B. Robert Gates**

Mailing Address 1643 Cooper Creek Lane

City Franklin State TN Zip Code 37064-9336

FEC ID number of contributing federal political committee. **C**

Name of Employer Unison Marketing Group, Inc. Occupation President/owner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 21 / 2010

**Transaction ID : A79E4AA9AC4E941A3B56**

Amount of Each Receipt this Period  
250.00

Full Name (Last, First, Middle Initial)  
**c. William Goebelbecker**

Mailing Address 9 Rutledge Rd

City Valhalla State NY Zip Code 10595-1258

FEC ID number of contributing federal political committee. **C**

Name of Employer Information Requested Occupation Information Requested

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 24 / 2010

**Transaction ID : AD65AE5B16335403DB10**

Amount of Each Receipt this Period  
500.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1000.00

**TOTAL** This Period (last page this line number only)..... ▶

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 12 OF 35
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial)  
**A. John Grace**

Mailing Address 4205 S Darlington Pl

City State Zip Code  
Tulsa OK 74135-6326

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Stanfield & O'Dell C.p.a.

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
06 / 18 / 2010  
**Transaction ID : ABFA796E065D34604911**

Amount of Each Receipt this Period  
250.00

Full Name (Last, First, Middle Initial)  
**B. Phyllis Grosskurth**

Mailing Address 634 Saginaw Ave

City State Zip Code  
Calumet City IL 60409-3918

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Information Requested Information Requested

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
06 / 24 / 2010  
**Transaction ID : AF95D23AFA5F743E59AA**

Amount of Each Receipt this Period  
250.00

Full Name (Last, First, Middle Initial)  
**C. Judith Hauff**

Mailing Address 1227 Pine St

City State Zip Code  
Glenview IL 60025-2951

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
None Homemaker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
365.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
06 / 21 / 2010  
**Transaction ID : AAC19264E2A934A5C9CA**

Amount of Each Receipt this Period  
365.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 865.00

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 13 OF 35
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

Full Name (Last, First, Middle Initial)  
**A. Armand J. Hawes**

Mailing Address 24 Holloway Ln

City State Zip Code  
Averill Park NY 12018-9675

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Albany International Corp. Technical Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
05 / 21 / 2010  
**Transaction ID : A954DBCBC5BFA4A06AF;**

Amount of Each Receipt this Period  
250.00

Full Name (Last, First, Middle Initial)  
**B. Jane Hext**

Mailing Address 8209 Santa Fe Dr

City State Zip Code  
Odessa TX 79765-8541

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
None None

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
05 / 21 / 2010  
**Transaction ID : AB447D8EFDAEE49FDA5F**

Amount of Each Receipt this Period  
300.00

Full Name (Last, First, Middle Initial)  
**C. Michael Hogsed**

Mailing Address 219 Castle Pine Dr

City State Zip Code  
Papillion NE 68133

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
United States Air Force Air Force Officer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
06 / 09 / 2010  
**Transaction ID : AA7FFFC040E764E97B90**

Amount of Each Receipt this Period  
500.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1050.00

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 35
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A. Jere Irwin**  
Full Name (Last, First, Middle Initial)

Mailing Address 4509 Scenic Dr

City Yakima State WA Zip Code 98908-2218

FEC ID number of contributing federal political committee. **C**

Name of Employer Information Requested Occupation Information Requested

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
06 / 01 / 2010  
**Transaction ID : A40035A8362164B7CAA9**

Amount of Each Receipt this Period  
250.00

**B. Betty Jacobsen**  
Full Name (Last, First, Middle Initial)

Mailing Address 5107 N Major Ave

City Chicago State IL Zip Code 60630-4662

FEC ID number of contributing federal political committee. **C**

Name of Employer Information Requested Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  
06 / 24 / 2010  
**Transaction ID : ADC089CFAB6CF4815ACC**

Amount of Each Receipt this Period  
200.00

**C. Michael Kelly**  
Full Name (Last, First, Middle Initial)

Mailing Address 26409 73rd Ave

City Glen Oaks State NY Zip Code 11004-1031

FEC ID number of contributing federal political committee. **C**

Name of Employer Information Requested Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
06 / 09 / 2010  
**Transaction ID : ACF5979D0C9EC40E39BF**

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 700.00

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 35
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

Full Name (Last, First, Middle Initial)  
**A. Donna Kohn**

Mailing Address **6846 NC Hwy 105 S**

City <b>Boone</b>	State <b>NC</b>	Zip Code <b>28607</b>
----------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer <b>Self</b>	Occupation <b>Doll maker- Artist</b>
---------------------------------	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**06 / 09 / 2010**

**Transaction ID : AD5DFF512A5CD40FD96B**

Amount of Each Receipt this Period  
**250.00**

Full Name (Last, First, Middle Initial)  
**B. Alice Leiden**

Mailing Address **347 Leiden Ln**

City <b>Patton</b>	State <b>PA</b>	Zip Code <b>16668-8810</b>
-----------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer <b>Self</b>	Occupation <b>Retired</b>
---------------------------------	------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**05 / 21 / 2010**

**Transaction ID : A7031BA8ADE45407FB10**

Amount of Each Receipt this Period  
**500.00**

Full Name (Last, First, Middle Initial)  
**C. Frank Liberto**

Mailing Address **680 E Basse Rd Apt 316**

City <b>San Antonio</b>	State <b>TX</b>	Zip Code <b>78209-8332</b>
----------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer <b>Information Requested</b>	Occupation <b>Information Requested</b>
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**05 / 28 / 2010**

**Transaction ID : A3E0872B5875E4AA28E2**

Amount of Each Receipt this Period  
**250.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>1000.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 35
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial)  
**A. Gregory Lukas**

Mailing Address 13684 S Thorn Creek Dr #19C

City	State	Zip Code
Traverse City	MI	49684-5491

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
Tyco Electronics	Engineer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
350.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	26	/	2010

**Transaction ID : A9B9FE95CEB5E4153B8D**

Amount of Each Receipt this Period  
350.00

Full Name (Last, First, Middle Initial)  
**B. Loraine Mabry**

Mailing Address 5936 Dunmore Dr

City	State	Zip Code
West Bloomfield	MI	48322

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
None	Homemaker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	02	/	2010

**Transaction ID : AC4F9929227274FAABC5**

Amount of Each Receipt this Period  
250.00

Full Name (Last, First, Middle Initial)  
**C. Ron McBroom**

Mailing Address 711 1st St SE

City	State	Zip Code
New Prague	MN	56071

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
Self (Ron McBroom Agency)	Teacher

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	11	/	2010

**Transaction ID : ABF78D675D67B4686A63**

Amount of Each Receipt this Period  
500.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1100.00
<b>TOTAL</b> This Period (last page this line number only).....▶	



**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 35
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A. John Mertes**  
Full Name (Last, First, Middle Initial)

Mailing Address 135 N Armour St

City State Zip Code  
Wichita KS 67206-2001

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
None - Retired Banking

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
06 / 14 / 2010  
**Transaction ID : ADE26AA28837E40D3BFB**

Amount of Each Receipt this Period  
100.00

**B. Luciya Miner**  
Full Name (Last, First, Middle Initial)

Mailing Address 4393 Sunshine Lake Rd

City State Zip Code  
Duluth MN 55803-8308

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Miner's Inc. Grocer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
06 / 15 / 2010  
**Transaction ID : A84037D24603C454C9A4**

Amount of Each Receipt this Period  
500.00

**C. Anne Morgan**  
Full Name (Last, First, Middle Initial)

Mailing Address 28 Meadow Dr

City State Zip Code  
Troy NY 12180-7708

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
None Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
06 / 17 / 2010  
**Transaction ID : AA4AB30DEBE0E4FAFB70**

Amount of Each Receipt this Period  
300.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 900.00

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 35
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A. Marty Murawski**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3829 Cynthia Dr  
 City Pittsburgh State PA Zip Code 15227-4507  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Bishop McDowell Regional School Occupation Teacher  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **350.00**

Date of Receipt **06 / 11 / 2010**  
**Transaction ID : A50C7BE7223CE4BA8B06**  
 Amount of Each Receipt this Period **200.00**

**B. Nancy Murphy**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1345 Copping Way  
 City Folsom State CA Zip Code 95630-8447  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer UCDCMC Occupation Registered Nurse  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **300.00**

Date of Receipt **05 / 25 / 2010**  
**Transaction ID : A98F493C542074F909A5**  
 Amount of Each Receipt this Period **300.00**

**C. David Nelson**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5933 Sam Snead Trl  
 City Billings State MT Zip Code 59106  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer US Bureau of Reclamation Occupation Engineer  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **395.00**

Date of Receipt **06 / 14 / 2010**  
**Transaction ID : A9756EE89AA6F436B87B**  
 Amount of Each Receipt this Period **395.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>895.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 35
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A. Linda Olson**  
Full Name (Last, First, Middle Initial)

Mailing Address 28071 Haria

City Mission Viejo State CA Zip Code 92692-1428

FEC ID number of contributing federal political committee. **C**

Name of Employer None Occupation Homemaker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 10 / 2010

**Transaction ID : ACAEEE6E248314C6092A**

Amount of Each Receipt this Period  
 100.00

**B. Thomas Quinn**  
Full Name (Last, First, Middle Initial)

Mailing Address 957 Forest Ave

City Zanesville State OH Zip Code 43701-2822

FEC ID number of contributing federal political committee. **C**

Name of Employer Information Requested Occupation Information Requested

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 14 / 2010

**Transaction ID : A8C3029E4E9B6407A9D7**

Amount of Each Receipt this Period  
 250.00

**C. Larry Rastrelli**  
Full Name (Last, First, Middle Initial)

Mailing Address 13807 Crown Blf

City San Antonio State TX Zip Code 78216-1929

FEC ID number of contributing federal political committee. **C**

Name of Employer Tejas Anesthesia Occupation Physician

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 27 / 2010

**Transaction ID : A86D42434F3104EDCBF4**

Amount of Each Receipt this Period  
 250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 600.00

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 35
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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

**A. Mary Ringe**  
Full Name (Last, First, Middle Initial)

Mailing Address 628 Portland Dr

City Lexington State KY Zip Code 40503

FEC ID number of contributing federal political committee. **C**

Name of Employer Homemaker Occupation Homemaker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 11 / 2010

**Transaction ID : A78173E884E9D4FD89BB**

Amount of Each Receipt this Period  
 250.00

**B. Ronald Roggenbuck**  
Full Name (Last, First, Middle Initial)

Mailing Address 2563 Buhl Rd Rt 3

City Harbor Beach State MI Zip Code 48441-9803

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested-2nd Occupation Information Requested

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 10 / 2010

**Transaction ID : A23988CBAC1634DEDB8A**

Amount of Each Receipt this Period  
 250.00

**C. Robert Rucinski**  
Full Name (Last, First, Middle Initial)

Mailing Address CMR 442 Box 703

City Apo State AE Zip Code 09042-0008

FEC ID number of contributing federal political committee. **C**

Name of Employer Us Army Occupation Psychiatrist

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 17 / 2010

**Transaction ID : A46696D5636244408A27**

Amount of Each Receipt this Period  
 1000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 21 OF 35
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) <b>A. Virginia Scheel</b>		Date of Receipt
Mailing Address 1200 Harwood Dr S Apt 264		<input type="text" value="06"/> / <input type="text" value="10"/> / <input type="text" value="2010"/>
City	State	<b>Transaction ID : AAEC13253BCBF467A99F</b>
Fargo	ND	
Zip Code		Amount of Each Receipt this Period
58104		<input type="text" value="250.00"/>
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
None	Retired	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="250.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Lyle Sensenbrenner</b>		Date of Receipt
Mailing Address 121 Dalkeith Gln		<input type="text" value="06"/> / <input type="text" value="18"/> / <input type="text" value="2010"/>
City	State	<b>Transaction ID : AE3A91B2D4A234181809</b>
Arnold	MD	
Zip Code		Amount of Each Receipt this Period
21012-2103		<input type="text" value="250.00"/>
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
None	Retired	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="250.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Sandra Snyder</b>		Date of Receipt
Mailing Address 202 S Gladstone Ave		<input type="text" value="06"/> / <input type="text" value="17"/> / <input type="text" value="2010"/>
City	State	<b>Transaction ID : A8F5AEBD6F3964A06806</b>
Aurora	IL	
Zip Code		Amount of Each Receipt this Period
60506		<input type="text" value="250.00"/>
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
Information Requested	Information Requested	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="300.00"/>	
<input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="750.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text" value=""/>

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 35
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial)  
**A. Ruben Solis**

Mailing Address 11221 N Ware Rd

City McAllen	State TX	Zip Code 78504-9584
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Information Requested	Occupation Information Requested
---	-------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	14	/	2010

**Transaction ID : AC9C1C72C4495E4F42A47**

Amount of Each Receipt this Period  
250.00

Full Name (Last, First, Middle Initial)  
**B. Carol Specht**

Mailing Address 4430 S Oak St

City Casper	State WY	Zip Code 82601
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FEC ID number of contributing federal political committee. **C**

Name of Employer None	Occupation Homemaker
--------------------------	-------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	16	/	2010

**Transaction ID : AC3B80B9736794D08A57**

Amount of Each Receipt this Period  
250.00

Full Name (Last, First, Middle Initial)  
**C. Rosalie Stafford**

Mailing Address 110 Ridley Ln

City Decatur	State GA	Zip Code 30030-2909
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired	Occupation Retired
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	27	/	2010

**Transaction ID : A1CC46DED53BC49E1A70**

Amount of Each Receipt this Period  
300.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	800.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 35
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**National Right to Life Political Action Committee**

Full Name (Last, First, Middle Initial) <b>A. Audrey Valhuerdi</b>		Date of Receipt										
Mailing Address 6050 NW 179th Ter		<table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>06</td> <td></td> <td>09</td> <td></td> <td>2010</td> </tr> </table>	M M M	/	D D D	/	Y Y Y Y Y Y	06		09		2010
M M M	/	D D D	/	Y Y Y Y Y Y								
06		09		2010								
City Hialeah	State FL	Zip Code 33015-5618										
FEC ID number of contributing federal political committee. C		<b>Transaction ID : A6A113F5BF0634CD9AC6</b>										
Name of Employer Palmetto General Hospital		Occupation Registered Nurse										
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Amount of Each Receipt this Period 500.00										
Aggregate Year-to-Date ▼ 500.00												

Full Name (Last, First, Middle Initial) <b>B. Audrey Valhuerdi</b>		Date of Receipt										
Mailing Address 6050 NW 179th Ter		<table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>06</td> <td></td> <td>25</td> <td></td> <td>2010</td> </tr> </table>	M M M	/	D D D	/	Y Y Y Y Y Y	06		25		2010
M M M	/	D D D	/	Y Y Y Y Y Y								
06		25		2010								
City Hialeah	State FL	Zip Code 33015-5618										
FEC ID number of contributing federal political committee. C		<b>Transaction ID : A9A9B1047B1564AC182A</b>										
Name of Employer Palmetto General Hospital		Occupation Registered Nurse										
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Amount of Each Receipt this Period 50.00										
Aggregate Year-to-Date ▼ 550.00												

Full Name (Last, First, Middle Initial) <b>C. Randall Vance</b>		Date of Receipt										
Mailing Address 3120 Bunker Hill Rd		<table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>06</td> <td></td> <td>28</td> <td></td> <td>2010</td> </tr> </table>	M M M	/	D D D	/	Y Y Y Y Y Y	06		28		2010
M M M	/	D D D	/	Y Y Y Y Y Y								
06		28		2010								
City Mount Sterling	State KY	Zip Code 40353-9363										
FEC ID number of contributing federal political committee. C		<b>Transaction ID : A4B66D5C6D995460EBCF</b>										
Name of Employer University of KY Medical Center		Occupation Registered Nurse										
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Amount of Each Receipt this Period 400.00										
Aggregate Year-to-Date ▼ 400.00												

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	950.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 35
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A. Mary Lou Watson**  
Full Name (Last, First, Middle Initial)

Mailing Address 8855 Sheridan Rd

City Melbourne	State FL	Zip Code 32904
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Information Requested	Occupation Information Requested
---	-------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	21	/	2010

**Transaction ID : A089E7AFAB6974C5882A**

Amount of Each Receipt this Period  
1000.00

**B. Christine Williams**  
Full Name (Last, First, Middle Initial)

Mailing Address 2705 Dalkeith Dr

City Henrico	State VA	Zip Code 23233-1632
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer None	Occupation Homemaker
--------------------------	-------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	14	/	2010

**Transaction ID : A22899A92BB45489DB90**

Amount of Each Receipt this Period  
500.00

**C. John Zurell**  
Full Name (Last, First, Middle Initial)

Mailing Address 37 Aldred Ave

City Rockville Centre	State NY	Zip Code 11570-6019
--------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Banker/cpa	Occupation Retired
--	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	20	/	2010

**Transaction ID : A3C8D07DBB5FB42D8B22**

Amount of Each Receipt this Period  
300.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1800.00
<b>TOTAL</b> This Period (last page this line number only).....	18735.00



**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 25 OF 35  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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

Full Name (Last, First, Middle Initial)  
**A. Wachovia Bank**

Mailing Address Box 71045  
1525 West WT Harris Blvd.,

City Charlotte State NC Zip Code 28262

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
806.45

Date of Receipt  
MM / DD / YYYY  
05 / 30 / 2010  
**Transaction ID : A1A289155120A40E8848**

Amount of Each Receipt this Period  
190.37

Interest

Full Name (Last, First, Middle Initial)  
**B. Wachovia Bank**

Mailing Address Box 71045  
1525 West WT Harris Blvd.,

City Charlotte State NC Zip Code 28262

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1026.13

Date of Receipt  
MM / DD / YYYY  
06 / 30 / 2010  
**Transaction ID : A7DE0E23B77344628AAD**

Amount of Each Receipt this Period  
219.68

Interest

Full Name (Last, First, Middle Initial)  
**C.**

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
MM / DD / YYYY

Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	410.05
<b>TOTAL</b> This Period (last page this line number only).....▶	410.05

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

Full Name (Last, First, Middle Initial)

**A. Calibre Cpa Group**

Mailing Address 1850 K Street NW

City Washington State DC Zip Code 20006

Purpose of Disbursement  
Compliance Consulting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
06 / 30 / 2010

Transaction ID : B065F42A8856C441A820

Amount of Each Disbursement this Period

6200.00

Full Name (Last, First, Middle Initial)

**B. Dialing Services, Llc**

Mailing Address 5149 Cotton Rd.

City Roswell State NM Zip Code 88201-9714

Purpose of Disbursement  
Telemarketing Expense

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
06 / 03 / 2010

Transaction ID : B361B68FE63A5449AA80

Amount of Each Disbursement this Period

5217.85

Full Name (Last, First, Middle Initial)

**C. Wachovia Bank**

Mailing Address 947 Croyden Dr

City Dayton State OH Zip Code 45420-1769

Purpose of Disbursement  
Deposited In Error

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
06 / 01 / 2010

Transaction ID : B14A3085C904B40A6822

Amount of Each Disbursement this Period

100.00

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

11517.85

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**National Right to Life Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Wachovia Bank**

Mailing Address 947 Croyden Dr

City Dayton State OH Zip Code 45420-1769

Purpose of Disbursement  
Bank Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
06 / 02 / 2010

Transaction ID : B7A7091DA39D84B68A37

Amount of Each Disbursement this Period

6.29

Full Name (Last, First, Middle Initial)

**B. Wachovia Bank**

Mailing Address 947 Croyden Dr

City Dayton State OH Zip Code 45420-1769

Purpose of Disbursement  
Deposited In Error

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
06 / 08 / 2010

Transaction ID : BA03537C8B83049D5B8B

Amount of Each Disbursement this Period

50.00

Full Name (Last, First, Middle Initial)

**C. Wachovia Bank**

Mailing Address 947 Croyden Dr

City Dayton State OH Zip Code 45420-1769

Purpose of Disbursement  
Bank Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
06 / 09 / 2010

Transaction ID : B888A00276BF646A7B4C

Amount of Each Disbursement this Period

2999.93

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

3056.22

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**National Right to Life Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Wachovia Bank**

Mailing Address 947 Croyden Dr

City Dayton State OH Zip Code 45420-1769

Purpose of Disbursement  
Bank Fees

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
06 / 09 / 2010

**Transaction ID : BBFA35138EBBE4C479B7**

Amount of Each Disbursement this Period

60.00

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY

Amount of Each Disbursement this Period

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

60.00

14634.07

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**National Right to Life Political Action Committee**

Full Name (Last, First, Middle Initial)

### A. Nevada Right to Life PAC

Mailing Address 7900 Rusty Rd.

City Reno State NV Zip Code 89511-1083

Purpose of Disbursement  
Contribution to PAC

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	04	/	2010

Transaction ID : B72433639182E41BDA35

Amount of Each Disbursement this Period

5000.00
---------

### B.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
-------	---	-------	---	-------------

Amount of Each Disbursement this Period

--

### C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
-------	---	-------	---	-------------

Amount of Each Disbursement this Period

--

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

5000.00
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5000.00
---------

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**National Right to Life Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Nrl Trust Fund**

Mailing Address 947 Croyden Dr

City Dayton State OH Zip Code 45420

Purpose of Disbursement  
Reimbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
06 / 17 / 2010

**Transaction ID : BF14A3F7EF90F4379B5E**

Amount of Each Disbursement this Period

300.00

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

300.00

300.00



**SCHEDULE C (FEC Form 3X)**

**LOANS**

NAME OF COMMITTEE (In Full) **National Right to Life Political Action Committee** Transaction ID : C41135A1EFE2C4668B8E

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) National Right To Life Committee	Election: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 512 10th Street, N.W.	
City Washington State DC ZIP Code 20004	

Original Amount of Loan 150000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 150000.00
--------------------------------------	------------------------------------	--

**TERMS**

Date Incurred: M M / D D / Y Y Y Y Y Y  /  /

Date Due: M M / D D / Y Y Y Y Y Y  /  /

Interest Rate:  % (apr)

Secured:  Yes  No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>

<b>SUBTOTALS</b> This Period This Page (optional)..... ▶	<input type="text" value="150000.00"/>
<b>TOTALS</b> This Period (last page in this line only)..... ▶	<input type="text" value="150000.00"/>

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.



**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 33 OF 35
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

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

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>B &amp; B Printing</b>	Nature of Debt (Purpose): Advertisement
Mailing Address 521 Research Road	
City State Zip Code Richmond VA 23236	

Outstanding Balance Beginning This Period 306.04	Transaction ID : DF860C97FDA534A0A921	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 306.04

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>EC Consulting</b>	Nature of Debt (Purpose): GOTV Calls
Mailing Address 1308 Sartori Avenue Suite 203	
City State Zip Code Torrance CA 90501	

Outstanding Balance Beginning This Period 4400.00	Transaction ID : DBAB16008DE1A49ECBB6	
Amount Incurred This Period -4400.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>EU Services</b>	Nature of Debt (Purpose): Shipping
Mailing Address PO Box 17164	
City State Zip Code Baltimore MD 21297-1164	

Outstanding Balance Beginning This Period 86.74	Transaction ID : DE90258DC490A46A3ACF	
Amount Incurred This Period -86.74	Payment This Period 0.00	Outstanding Balance at Close of This Period 0.00

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	306.04
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	0.00
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	0.00

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 34 OF 35
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

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

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>EU Services</b>	Nature of Debt (Purpose): Mail Cost
Mailing Address PO Box 17164	
City State Zip Code Baltimore MD 21297-1164	

Outstanding Balance Beginning This Period <input type="text" value="365.69"/>	<b>Transaction ID : D8143587F3B794A3F958</b>	
Amount Incurred This Period <input type="text" value="-365.69"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Federal Express</b>	Nature of Debt (Purpose): Shipping
Mailing Address P.O. Box 371461	
City State Zip Code Pittsburgh PA 15250-7461	

Outstanding Balance Beginning This Period <input type="text" value="597.09"/>	<b>Transaction ID : D3C4E409065254640947</b>	
Amount Incurred This Period <input type="text" value="-597.09"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Mailing Address	
City State Zip Code	

Outstanding Balance Beginning This Period <input type="text"/>	Payment This Period <input type="text"/>	Outstanding Balance at Close of This Period <input type="text"/>
Amount Incurred This Period <input type="text"/>		

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	<input type="text" value="0.00"/>
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	<input type="text" value="306.04"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	<input type="text" value="0.00"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text" value="306.04"/>

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

NAME OF COMMITTEE (In Full) <b>National Right to Life Political Action Committee</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 1.2em; font-weight: bold; border: 1px solid black; display: inline-block; width: 20px; height: 20px; vertical-align: middle;">C</span> <span style="margin-left: 5px;">C0011278</span> </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee <b>Dialing Services, Llc</b> <b>[MEMO ITEM]</b>	Date <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 0.8em;">M M M / D D D / Y Y Y Y Y Y</span>  <span style="font-size: 1.2em; font-weight: bold;">05 / 21 / 2010</span> </div>						
Mailing Address 5149 Cotton Rd.	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> <span style="font-size: 1.2em; font-weight: bold;">155.24</span> </div>						
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:45%;">City</td> <td style="width:20%;">State</td> <td style="width:35%;">Zip Code</td> </tr> <tr> <td>Roswell</td> <td>NM</td> <td>88201-9714</td> </tr> </table>	City	State	Zip Code	Roswell	NM	88201-9714	<b>Transaction ID : E7A39BC6F704A4A94B43</b>
City	State	Zip Code					
Roswell	NM	88201-9714					
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:45%;">Purpose of Expenditure GOTV Calls</td> <td style="width:15%;">Category/ Type</td> <td style="width:40%;">Office Sought:</td> </tr> <tr> <td></td> <td></td> <td> <input checked="" type="checkbox"/> House    State: HI  <input type="checkbox"/> Senate    District: 01  <input type="checkbox"/> President         </td> </tr> </table>	Purpose of Expenditure GOTV Calls	Category/ Type	Office Sought:			<input checked="" type="checkbox"/> House    State: HI <input type="checkbox"/> Senate    District: 01 <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Purpose of Expenditure GOTV Calls	Category/ Type	Office Sought:					
		<input checked="" type="checkbox"/> House    State: HI <input type="checkbox"/> Senate    District: 01 <input type="checkbox"/> President					
Name of Federal Candidate Supported or Opposed by Expenditure: Charles Djou	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <b>Special General2010</b>						
Calendar Year-To-Date Per Election for Office Sought	<div style="border: 1px solid black; padding: 2px; text-align: right;"> <span style="font-size: 1.2em; font-weight: bold;">155.24</span> </div>						

Full Name (Last, First, Middle Initial) of Payee	Date <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 0.8em;">M M M / D D D / Y Y Y Y Y Y</span> </div>						
Mailing Address	Amount <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 0.8em;">M M M / D D D / Y Y Y Y Y Y</span> </div>						
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<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:45%;">Purpose of Expenditure</td> <td style="width:15%;">Category/ Type</td> <td style="width:40%;">Office Sought:</td> </tr> <tr> <td></td> <td></td> <td> <input type="checkbox"/> House    State: _____  <input type="checkbox"/> Senate    District: _____  <input type="checkbox"/> President         </td> </tr> </table>	Purpose of Expenditure	Category/ Type	Office Sought:			<input type="checkbox"/> House    State: _____ <input type="checkbox"/> Senate    District: _____ <input type="checkbox"/> President	Check One: <input type="checkbox"/> Support <input type="checkbox"/> Oppose
Purpose of Expenditure	Category/ Type	Office Sought:					
		<input type="checkbox"/> House    State: _____ <input type="checkbox"/> Senate    District: _____ <input type="checkbox"/> President					
Name of Federal Candidate Supported or Opposed by Expenditure:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)						
Calendar Year-To-Date Per Election for Office Sought	<div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 0.8em;">M M M / D D D / Y Y Y Y Y Y</span> </div>						

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; text-align: right;"> <span style="font-size: 1.2em; font-weight: bold;">0.00</span> </div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 0.8em;">M M M / D D D / Y Y Y Y Y Y</span> </div>
<b>(c) TOTAL</b> Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; text-align: right;"> <span style="font-size: 1.2em; font-weight: bold;">0.00</span> </div>

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.

*Joseph Landrum*  
 Signature \_\_\_\_\_ [Electronically Filed] Date

M M M / D D D / Y Y Y Y Y Y  
01 / 12 / 2012