

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
Wkdc-fm

Mailing Address
4051 Jimmie Pkwy

| | | |
|-----------------|-------------|-------------------|
| City Augusta | State GA | Zip Code 30909 |
|-----------------|-------------|-------------------|

| | |
|--|-------------------|
| Purpose of Expenditure H2GA12097 Ad | Category/ Type |
|--|-------------------|

Name of Federal Candidate supported or Opposed by expenditure:
O MAXIE BURNS

| | |
|---|----------|
| Calendar Year-To-Date Per Election for Office Sought | 11124.07 |
|---|----------|

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

Amount
2430.00

Transaction ID: E0C71551A35BE4459A4C

Office Sought: House State: GA
 Senate District: 12
 Presidential

Check One: Support Oppose

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

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

Mailing Address
1472 10th Street

| | | |
|-----------------|-------------|-------------------|
| City Buffalo | State MN | Zip Code 55313 |
|-----------------|-------------|-------------------|

| | |
|--|-------------------|
| Purpose of Expenditure H6MN06074 Ad | Category/ Type |
|--|-------------------|

Name of Federal Candidate supported or Opposed by expenditure:
Rep. Michele Bachmann

| | |
|---|---------|
| Calendar Year-To-Date Per Election for Office Sought | 1483.41 |
|---|---------|

Date
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 0 6

Amount
135.00

Transaction ID: E81BBB1BB00DA44D8857

Office Sought: House State: MN
 Senate District: 06
 Presidential

Check One: Support Oppose

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

| | |
|--|---------|
| (a) SUBTOTAL of Itemized Independent Expenditures | 2565.00 |
| (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 4 / 2 0 0 9