

**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="2016"/>		96788.71
(b) Cash on Hand at Beginning of Reporting Period.....	159716.15	
(c) Total Receipts (from Line 19)	158605.15	225583.15
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	318321.30	322371.86
7. Total Disbursements (from Line 31).....	9831.49	13882.05
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	308489.81	308489.81
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	588000.00	
10. Debts and Obligations Owed BY 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

FEC Form 3X (Rev. 06/2004)

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).....	13824.00	21059.00
(ii) Unitemized	142781.15	202524.15
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	156605.15	223583.15
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	2000.00	2000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	158605.15	225583.15
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	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
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))..... ▶	158605.15	225583.15
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	158605.15	225583.15

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

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	1078.66	5129.22
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	1078.66	5129.22
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	6000.00	6000.00
24. Independent Expenditures (use Schedule E)	2652.83	2652.83
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	100.00	100.00
(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)).....	100.00	100.00
29. Other Disbursements	0.00	0.00
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)) ..	9831.49	13882.05
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	9831.49	13882.05

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)	158605.15	225583.15
34. Total Contribution Refunds (from Line 28(d))	100.00	100.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	158505.15	225483.15
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	1078.66	5129.22
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	1078.66	5129.22

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`-H9A-N5H-CB

Form/Schedule: F3XA
Transaction ID :

Memo #1 The Committee is aware of the regulations regarding the disclosure of the name, address, employer and occupation of every contributor who contributes more than \$200 aggregate in a calendar year. The Committee fully discloses all contributor names and other information as they are indicated by the contributor. Every solicitation includes a clear and conspicuous request for the contributor information and informs the contributor of the requirements of federal law to report this information. If the information is not received with the contribution, the contributor is contacted per FEC guidelines by mail, by telephone or by email to obtain the missing information. All requests clearly ask for the missing information without soliciting further contributions, inform the contributor of the requirements of federal law for reporting this information, and, if the request is by mail, include a pre-addressed return envelope. Memo #2 Please note the committee made loans to a connected organization. These loans will be repaid with permissible funds, from contributions from individuals of \$5,000 or less

Form/Schedule:
Transaction ID:

**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 40
	<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	

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. Joseph Parriott
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 277

City Moundsville State WV Zip Code 26041-0277

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 ▼ 1000.00

Date of Receipt 04 / 02 / 2016
Transaction ID : **A48C5FB08DC004D949F2**

Amount of Each Receipt this Period 500.00

Memo Item

B. Joseph Parriott
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 277

City Moundsville State WV Zip Code 26041-0277

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 ▼ 1000.00

Date of Receipt 04 / 02 / 2016
Transaction ID : **A57C300EC47E048A79B9**

Amount of Each Receipt this Period 500.00

Memo Item

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

Mailing Address 31520 NE 15th St

City Washougal State WA Zip Code 98671-9213

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 ▼ 300.00

Date of Receipt 04 / 02 / 2016
Transaction ID : **AF105069263DF49F6B01**

Amount of Each Receipt this Period 300.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	1300.00
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 40
	<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. Margaret Docherty
Full Name (Last, First, Middle Initial)

Mailing Address 1830 W 4th St

City	State	Zip Code
Brooklyn	NY	11223-2727

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

Name of Employer	Occupation
Information Requested	Unknown

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
 04 / 02 / 2016

Transaction ID : ADB6D73286DB54BE3B7C

Amount of Each Receipt this Period
 300.00

Memo Item

B. Daniel Ridinger
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 601

City	State	Zip Code
Rogersville	AL	35652-0601

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

Name of Employer	Occupation
Coxey Church of Christ - Athens, AL	Preacher

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
 04 / 02 / 2016

Transaction ID : A79AFE56B28664534A6D

Amount of Each Receipt this Period
 300.00

Memo Item

C. Rosemary Briggs
Full Name (Last, First, Middle Initial)

Mailing Address 9707 Old Georgetown Rd Apt 1325

City	State	Zip Code
Bethesda	MD	20814

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 ▼
300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 02 / 2016

Transaction ID : AAEE9B098213B4E2CB7A

Amount of Each Receipt this Period
 300.00

Memo Item

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 9 OF 40
	<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. James Sheedy
Full Name (Last, First, Middle Initial)

Mailing Address 6955 Lake Harrison Cir

City Chanhassen State MN Zip Code 55317

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

Name of Employer 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
 04 / 02 / 2016
Transaction ID : A84C9C917F99940E0800

Amount of Each Receipt this Period
 250.00

Memo Item

B. Michael Puccetti
Full Name (Last, First, Middle Initial)

Mailing Address 2100 Paseo Del Prado NW

City Albuquerque State NM Zip Code 87104

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

Name of Employer Occupation Information Requested

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
 04 / 02 / 2016
Transaction ID : AE81F7C07E66F4C6691D

Amount of Each Receipt this Period
 300.00

Memo Item

c. Nina Rodgers
Full Name (Last, First, Middle Initial)

Mailing Address 17842 Blazing Star Drive

City Strongsville State OH Zip Code 44136

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

Name of Employer Occupation Information Requested

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
 04 / 02 / 2016
Transaction ID : AAB4616CD510341919D8

Amount of Each Receipt this Period
 300.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	850.00
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 40
	<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. Lynn Dugan

Mailing Address 461 Stagecoach Run

City Glen Ellyn	State IL	Zip Code 60137-3740
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FEC ID number of contributing federal political committee. **C**

Name of Employer Information Requested	Occupation Information Requested
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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
 04 / 02 / 2016
Transaction ID : A2E853E31A4DD4417B2C

Amount of Each Receipt this Period
 300.00

Memo Item

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

Mailing Address 530 Goose Ln

City Coventry	State CT	Zip Code 06238-1218
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FEC ID number of contributing federal political committee. **C**

Name of Employer State of Connecticut	Occupation Court Reporter
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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
 04 / 04 / 2016
Transaction ID : A1A0336944FB6499EA64

Amount of Each Receipt this Period
 250.00

Memo Item

Full Name (Last, First, Middle Initial)
C. Margaret Harvey

Mailing Address 89 Crestwood St

City Andrews	State SC	Zip Code 29510
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FEC ID number of contributing federal political committee. **C**

Name of Employer Information Requested	Occupation Information Requested
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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
 04 / 06 / 2016
Transaction ID : A072F863499634632BE0

Amount of Each Receipt this Period
 250.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	800.00
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 11 OF 40
	<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. Marci Hackel
Full Name (Last, First, Middle Initial)

Mailing Address 535 Sioux Lane

City Broken Bow State NE Zip Code 68822-1461

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 ▼ **784.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
04 / 08 / 2016

Transaction ID : A5DCC376BB0404204BB0

Amount of Each Receipt this Period
784.00

Memo Item

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

Mailing Address 1875 Jefferson Rd

City Sumter State SC Zip Code 29153-1925

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

Name of Employer Information Requested Occupation Unknown

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
04 / 08 / 2016

Transaction ID : A28D972AE74AF483AA6A

Amount of Each Receipt this Period
250.00

Memo Item

C. Mark Koslicki
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 4704

City Houston State TX Zip Code 77210

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
04 / 12 / 2016

Transaction ID : AC60DE701D368453FB39

Amount of Each Receipt this Period
500.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	1534.00
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 12 OF 40
	<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. Jeffrey Koloze
Full Name (Last, First, Middle Initial)

Mailing Address 10019 Granger Rd

City Garfield Heights State OH Zip Code 44125-3101

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

Name of Employer University Of Phoenix Occupation Professor, Campus College Chair

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt 04 / 12 / 2016
Transaction ID : A3245E783724146D7873

Amount of Each Receipt this Period 100.00

Memo Item

B. Kenneth Troester
Full Name (Last, First, Middle Initial)

Mailing Address 7200 Cedar Creek Cir

City Lincoln State NE Zip Code 68516-3055

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

Name of Employer Information Requested Occupation Unknown

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 04 / 13 / 2016
Transaction ID : A8ADD277298F44A02AB5

Amount of Each Receipt this Period 250.00

Memo Item

C. Janet Matteson
Full Name (Last, First, Middle Initial)

Mailing Address 15524 Queen Elizabeth Ct

City Montgomery State TX Zip Code 77316

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 ▼ 2000.00

Date of Receipt 04 / 15 / 2016
Transaction ID : AEF80399597B84D78B60

Amount of Each Receipt this Period 2000.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 2350.00

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 40
	<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. Phillip Matous

Mailing Address 1139 Harvard Rd

City Grosse Pointe	State MI	Zip Code 48230
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FEC ID number of contributing federal political committee. **C**

Name of Employer Information Requested	Occupation Information Requested
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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
 04 / 27 / 2016
Transaction ID : A278C108BDD5F4551B75

Amount of Each Receipt this Period
500.00

Memo Item

Full Name (Last, First, Middle Initial)
B. Clark Walters

Mailing Address 1124 W Copper St

City Butte	State MT	Zip Code 59701-8910
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FEC ID number of contributing federal political committee. **C**

Name of Employer Northwestern Energy Information Requested	Occupation Engineer Information Requested
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 27 / 2016
Transaction ID : A46112E323D824090894

Amount of Each Receipt this Period
350.00

Memo Item

Full Name (Last, First, Middle Initial)
C. Owen Cooney

Mailing Address 14500 SE 60th St

City Bellevue	State WA	Zip Code 98006-4325
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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 ▼
300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 30 / 2016
Transaction ID : A75EC6D45D3E94EB58D2

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	950.00
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 40
	<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. William Collins
Full Name (Last, First, Middle Initial)
Mailing Address 2 Spyglass Dr
City Aiken State SC Zip Code 29803
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 04 / 30 / 2016
Transaction ID : A0F2E4E27087840EE970
Amount of Each Receipt this Period 300.00
 Memo Item

B. Jeffrey Koloze
Full Name (Last, First, Middle Initial)
Mailing Address 10019 Granger Rd
City Garfield Heights State OH Zip Code 44125-3101
FEC ID number of contributing federal political committee. **C**
Name of Employer University Of Phoenix Occupation Professor, Campus College Chair
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 12 / 2016
Transaction ID : A1D4D69443B274989B7B
Amount of Each Receipt this Period 100.00
 Memo Item

C. Raymond Mullen
Full Name (Last, First, Middle Initial)
Mailing Address 27011 Condado Ln
City Mission Viejo State CA Zip Code 92691-5006
FEC ID number of contributing federal political committee. **C**
Name of Employer Jf Shea Co., Inc. Occupation Information Requested
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 12 / 2016
Transaction ID : A1171EA40527E4D38805
Amount of Each Receipt this Period 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	650.00
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 40
	<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	

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. Patricia Davies
Full Name (Last, First, Middle Initial)
Mailing Address 3627 Township Rd 178
City State Zip Code
Fredericktown OH 43019-9743
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
05 / 13 / 2016
Transaction ID : AA1F7ED1410864069B8B
Amount of Each Receipt this Period
250.00
 Memo Item

B. John Beecken
Full Name (Last, First, Middle Initial)
Mailing Address 234 N Hale Ave
City State Zip Code
Bartlett IL 60103-4135
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
M M M / D D D / Y Y Y Y Y Y
05 / 13 / 2016
Transaction ID : A7BA91C1E2C8D4F0993C
Amount of Each Receipt this Period
300.00
 Memo Item

C. Dick Dykstra
Full Name (Last, First, Middle Initial)
Mailing Address 1028 N El Cajon St
City State Zip Code
Visalia CA 93291-8617
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Information Requested Unknown
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 / 13 / 2016
Transaction ID : A60DC7FAD88034460804
Amount of Each Receipt this Period
250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	800.00
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 16 OF 40
	<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. Victor Dandrea
Full Name (Last, First, Middle Initial)

Mailing Address 2845 Landon Dr

City Stow State OH Zip Code 44224-3713

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 / 17 / 2016
Transaction ID : **AE5C5ED9D619E4F1688D**

Amount of Each Receipt this Period
300.00

Memo Item

B. Mark Donohue
Full Name (Last, First, Middle Initial)

Mailing Address 2819 W Terrace Dr

City Tampa State FL Zip Code 33609-4027

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

Name of Employer Occupation
Tampa Bay Friendsfor Life Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
05 / 17 / 2016
Transaction ID : **A6058B84F5FF44FC1B1F**

Amount of Each Receipt this Period
200.00

Memo Item

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

Mailing Address 4024 Carters Creek

City Franklin State TN Zip Code 37064-9553

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
05 / 17 / 2016
Transaction ID : **AD5472C87454E4838BE1**

Amount of Each Receipt this Period
250.00

Memo Item

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 17 OF 40
	<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. Terri Hartzell
Full Name (Last, First, Middle Initial)

Mailing Address 11212 148th Ave SE

City Renton State WA Zip Code 98059-4308

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

Name of Employer Occupation Information Requested

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
 05 / 23 / 2016
Transaction ID : A38234080CA5F4786AE2

Amount of Each Receipt this Period
 100.00

Memo Item

B. Joseph Vitale
Full Name (Last, First, Middle Initial)

Mailing Address 4 Ramble Wood Dr

City Skaneateles State NY Zip Code 13152-1300

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

Name of Employer Occupation Information Requested

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 / 23 / 2016
Transaction ID : A1363C3E61864456C899

Amount of Each Receipt this Period
 300.00

Memo Item

C. Terri Hartzell
Full Name (Last, First, Middle Initial)

Mailing Address 11212 148th Ave SE

City Renton State WA Zip Code 98059-4308

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

Name of Employer Occupation Information Requested

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
 05 / 23 / 2016
Transaction ID : A9D40BD9E79DE44A391D

Amount of Each Receipt this Period
 400.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	800.00
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 40
	<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. Wendy Brott
Full Name (Last, First, Middle Initial)

Mailing Address 1850 Raber Rd

City Uniontown State OH Zip Code 44685-8841

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

Name of Employer Lake Center Christian School Occupation Teacher

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt 05 / 23 / 2016
Transaction ID : AA603FE0C6D3C4D6F82A

Amount of Each Receipt this Period 400.00

Memo Item

B. Tracy La Breche
Full Name (Last, First, Middle Initial)

Mailing Address 321 Lake Providence

City Leeds State AL Zip Code 35094-8814

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

Name of Employer Information Requested Occupation Unknown

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 23 / 2016
Transaction ID : AA1ECB69B2C8D4215B5C

Amount of Each Receipt this Period 250.00

Memo Item

C. Keith Broussard
Full Name (Last, First, Middle Initial)

Mailing Address 264 Cedar Lane

City Many State LA Zip Code 71449

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 05 / 31 / 2016
Transaction ID : AAB37206C42E0406CAAF

Amount of Each Receipt this Period 500.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 1150.00

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 19 OF 40
	<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

A. David Pace
Full Name (Last, First, Middle Initial)

Mailing Address 3422 Flint Hill Pl

City Woodbridge State VA Zip Code 22192-1011

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

Name of Employer FAA Occupation Meteorologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt 06 / 06 / 2016
Transaction ID : A09DA9F3DE6574BAD90C

Amount of Each Receipt this Period 40.00

Memo Item

B. Jeffrey Plier
Full Name (Last, First, Middle Initial)

Mailing Address 14 N Hill Rd

City Wausau State WI Zip Code 54403-3671

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

Name of Employer Information Requested Occupation Unknown

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt 06 / 08 / 2016
Transaction ID : A153AE8F26BC540D2B15

Amount of Each Receipt this Period 100.00

Memo Item

C. Jeffrey Koloze
Full Name (Last, First, Middle Initial)

Mailing Address 10019 Granger Rd

City Garfield Heights State OH Zip Code 44125-3101

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

Name of Employer University Of Phoenix Occupation Professor, Campus College Chair

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt 06 / 13 / 2016
Transaction ID : A2DAD173A0BA14759AE4

Amount of Each Receipt this Period 100.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 240.00

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 40
	<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. Patricia Dorsey
 Full Name (Last, First, Middle Initial)
 Mailing Address 994 Albany Tpke Rd
 City Old Chatham State NY Zip Code 12136-2109
 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 ▼
 400.00

Date of Receipt
 06 / 14 / 2016
Transaction ID : AD138FFC87F994E89991
 Amount of Each Receipt this Period
 200.00
 Memo Item

B. John Powers
 Full Name (Last, First, Middle Initial)
 Mailing Address 8180 Wooster Pike #B
 City Cincinnati State OH Zip Code 45227
 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 ▼
 300.00

Date of Receipt
 06 / 16 / 2016
Transaction ID : AA5686B393F5C43ABA3B
 Amount of Each Receipt this Period
 150.00
 Memo Item

C. Joseph Milani
 Full Name (Last, First, Middle Initial)
 Mailing Address 1315 Robynwood Ln
 City West Chester State PA Zip Code 19380-5748
 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 ▼
 250.00

Date of Receipt
 06 / 23 / 2016
Transaction ID : A0D4F2525273E4860B1E
 Amount of Each Receipt this Period
 250.00
 Memo Item

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 21 OF 40
<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

A. Full Name (Last, First, Middle Initial)
Patricia Abraham

Mailing Address 7699 Rice Road

City Amherst	State OH	Zip Code 44001-0000
-----------------	-------------	------------------------

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 ▼
300.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		27		2016

Transaction ID : AF80882B671E148849A1

Amount of Each Receipt this Period
150.00

Memo Item

B. Full Name (Last, First, Middle Initial)

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

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

Amount of Each Receipt this Period

Memo Item

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

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

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

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	13824.00

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

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

FOR LINE NUMBER: PAGE 22 OF 40
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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

A. Full Name (Last, First, Middle Initial)
North Carolina Right to Life PAC

Mailing Address 914-AN Elm Street

City Greensboro State NC Zip Code 27401

FEC ID number of contributing federal political committee. **C** C00117200

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 01 / 2016

Transaction ID : A41E13A4823D242D296C

Amount of Each Receipt this Period
 2000.00

Memo Item

B. Full Name (Last, First, Middle Initial)

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

Amount of Each Receipt this Period

Memo Item

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

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

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	2000.00
TOTAL This Period (last page this line number only).....▶	2000.00

**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 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. Elavon Merchant Services

Mailing Address Two Concourse Parkway, Suite 800

City Atlanta State GA Zip Code 30328-5588

Purpose of Disbursement
Merchant Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y
04 / 01 / 2016

Transaction ID : B1E84AA4F971E404D977

Amount of Each Disbursement this Period

79.99

Memo Item

Full Name (Last, First, Middle Initial)

B. Wells Fargo

Mailing Address PO Box 63020

City San Francisco State CA Zip Code 94163-0001

Purpose of Disbursement
Bank Fee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y
04 / 01 / 2016

Transaction ID : B4C99631627EF4A87B52

Amount of Each Disbursement this Period

74.90

Memo Item

Full Name (Last, First, Middle Initial)

C. Huckaby Davis Lisker

Mailing Address 228 S Washington Street Ste 115

City Alexandria State VA Zip Code 22314-5404

Purpose of Disbursement
Compliance Consulting

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y
04 / 05 / 2016

Transaction ID : B847EBDB6B4494F00A17

Amount of Each Disbursement this Period

612.50

Memo Item

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

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

767.39

**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. Elavon Merchant Services

Mailing Address Two Concourse Parkway, Suite 800

City Atlanta State GA Zip Code 30328-5588

Purpose of Disbursement
Merchant Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
05 / 01 / 2016

Transaction ID : **BB84753019A26404D858**

Amount of Each Disbursement this Period

79.99

Memo Item

Full Name (Last, First, Middle Initial)

B. Wells Fargo

Mailing Address PO Box 63020

City San Francisco State CA Zip Code 94163-0001

Purpose of Disbursement
Bank Fee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
05 / 02 / 2016

Transaction ID : **B97B1BDBAFF264EAD93E**

Amount of Each Disbursement this Period

74.69

Memo Item

Full Name (Last, First, Middle Initial)

C. Elavon Merchant Services

Mailing Address Two Concourse Parkway, Suite 800

City Atlanta State GA Zip Code 30328-5588

Purpose of Disbursement
Merchant 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 / 01 / 2016

Transaction ID : **B8DD8978698BB42DF953**

Amount of Each Disbursement this Period

79.99

Memo Item

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

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

234.67

**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. Wells Fargo

Mailing Address PO Box 63020

City San Francisco State CA Zip Code 94163-0001

Purpose of Disbursement
Bank Fee

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 / 2016

Transaction ID : BE70CC89B00774E6FA8B

Amount of Each Disbursement this Period

72.73

Memo Item

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

Memo Item

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

Memo Item

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

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

72.73

1074.79

**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

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. Rhode Island Right to Life PAC

Mailing Address 27 Marcy Street

City Cranston State RI Zip Code 02905

Purpose of Disbursement
Political Contribution

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) Other

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 21 / 2016

Transaction ID : B182AF293D37E40CD958

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE

Mailing Address 25 CANYON ROAD

City MORGANTOWN State WV Zip Code 26508

Purpose of Disbursement
Political Contribution

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) Other

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 28 / 2016

Transaction ID : B5C59646995E240E894E

Amount of Each Disbursement this Period

5000.00

Memo Item

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) Other

State: District:

Date of Disbursement

MM / DD / YYYY

Amount of Each Disbursement this Period

Memo Item

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

6000.00

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

6000.00

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

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. Jennie Pyle

Mailing Address 14856 N 200 E

City North Manchester State IN Zip Code 46962

Purpose of Disbursement
Contribution Refund

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	12	/	2016

Transaction ID : BD9F01BD362074FC1BF6

Amount of Each Disbursement this Period

100.00

Memo Item

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 M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Disbursement this Period

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Memo Item

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 M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Disbursement this Period

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Memo Item

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

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

100.00

100.00

SCHEDULE C (FEC Form 3X)

LOANS

NAME OF COMMITTEE (In Full) **National Right to Life Political Action Committee** Transaction ID : **CE9CD40BB0148498E991**

LOAN SOURCE Full Name (Last, First, Middle Initial) National Right To Life Committee	<input type="checkbox"/> Memo Item	Election: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other
Mailing Address 512 10th St NW		
City Washington	State DC	ZIP Code 20004-1401

Original Amount of Loan 100000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 100000.00
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TERMS

Date Incurred: MM / DD / YYYY (11 / 10 / 2014)
Date Due: MM / DD / YYYY (11 / 13 / 2015)
Interest Rate: None % (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: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional)..... ▶	100000.00
TOTALS This Period (last page in this line only)..... ▶	[]

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

SCHEDULE C (FEC Form 3X)

LOANS

NAME OF COMMITTEE (In Full) **National Right to Life Political Action Committee** Transaction ID : **CC8AD08A1DF874372863**

LOAN SOURCE Full Name (Last, First, Middle Initial) National Right To Life Committee	<input type="checkbox"/> Memo Item	Election: 2013 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other
Mailing Address 512 10th St NW		
City Washington State DC ZIP Code 20004-1401		

Original Amount of Loan 75000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 75000.00
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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"/>

SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="75000.00"/>
TOTALS This Period (last page in this line only)..... ▶	<input type="text"/>
Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.	

SCHEDULE C (FEC Form 3X)

LOANS

NAME OF COMMITTEE (In Full) **National Right to Life Political Action Committee** Transaction ID : CA03341AAF00541EDAAF

LOAN SOURCE Full Name (Last, First, Middle Initial) National Right To Life Committee	<input type="checkbox"/> Memo Item	Election: 2015 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other
Mailing Address 512 10th St NW		
City Washington State DC ZIP Code 20004-1401		

Original Amount of Loan 30000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 30000.00
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TERMS

Date Incurred MM / DD / YYYY 06 / 12 / 2015	Date Due MM / DD / YYYY 11 / 13 / 2015	Interest Rate None % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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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: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional)..... ▶	[] 30000.00
TOTALS This Period (last page in this line only)..... ▶	[]

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

SCHEDULE C (FEC Form 3X)

LOANS

NAME OF COMMITTEE (In Full) **National Right to Life Political Action Committee** Transaction ID : C548AE932EBA04A4F937

LOAN SOURCE Full Name (Last, First, Middle Initial) National Right To Life Committee	<input type="checkbox"/> Memo Item	Election: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other
Mailing Address 512 10th St NW		
City Washington	State DC	ZIP Code 20004-1401

Original Amount of Loan 100000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 100000.00
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TERMS

Date Incurred MM / DD / YYYY 11 / 10 / 2014	Date Due MM / DD / YYYY 11 / 10 / 2015	Interest Rate None % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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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: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional)..... ▶	100000.00
TOTALS This Period (last page in this line only)..... ▶	[]

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

SCHEDULE C (FEC Form 3X)

LOANS

NAME OF COMMITTEE (In Full) **National Right to Life Political Action Committee** Transaction ID : C18B232C1F7994FFFB40

LOAN SOURCE Full Name (Last, First, Middle Initial) National Right To Life Committee	<input type="checkbox"/> Memo Item	Election: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other
Mailing Address 512 10th St NW		
City Washington	State DC	ZIP Code 20004-1401

Original Amount of Loan 80000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 80000.00
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TERMS

Date Incurred: M M / D D / Y Y Y Y Y Y 10 / 22 / 2014
Date Due: M M / D D / Y Y Y Y Y Y 08 / 14 / 2015
Interest Rate: None % (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: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional)..... ▶	80000.00
TOTALS This Period (last page in this line only)..... ▶	[]
Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.	

SCHEDULE C (FEC Form 3X)

LOANS

NAME OF COMMITTEE (In Full) **National Right to Life Political Action Committee** Transaction ID : **C7C8D103611044D68A59**

LOAN SOURCE Full Name (Last, First, Middle Initial) National Right To Life Committee	<input type="checkbox"/> Memo Item	Election: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other
Mailing Address 512 10th St NW		
City Washington	State DC	ZIP Code 20004-1401

Original Amount of Loan 15000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 15000.00
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TERMS

Date Incurred MM / DD / YYYY 08 / 14 / 2014	Date Due MM / DD / YYYY 08 / 14 / 2015	Interest Rate None % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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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: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional)..... ▶	[] 15000.00
TOTALS This Period (last page in this line only)..... ▶	[]

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

SCHEDULE C (FEC Form 3X)

LOANS

NAME OF COMMITTEE (In Full) **National Right to Life Political Action Committee** Transaction ID : C83759D09F245495F9AA

LOAN SOURCE Full Name (Last, First, Middle Initial) National Right To Life Committee	<input type="checkbox"/> Memo Item	Election: 2015 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other
Mailing Address 512 10th St NW		
City Washington State DC ZIP Code 20004-1401		

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
50000.00	0.00	50000.00

TERMS

Date Incurred: MM / DD / YYYY (04 / 14 / 2015) Date Due: MM / DD / YYYY (11 / 13 / 2015) Interest Rate: None % (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:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional)..... ▶	50000.00
TOTALS This Period (last page in this line only)..... ▶	
Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.	

SCHEDULE C (FEC Form 3X)

LOANS

NAME OF COMMITTEE (In Full) **National Right to Life Political Action Committee** Transaction ID : **CC549F6F644F34A82905**

LOAN SOURCE Full Name (Last, First, Middle Initial) National Right To Life Committee	<input type="checkbox"/> Memo Item	Election: 2013 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other
Mailing Address 512 10th St NW		
City Washington State DC ZIP Code 20004-1401		

Original Amount of Loan 150000.00	Cumulative Payment To Date 12000.00	Balance Outstanding at Close of This Period 138000.00
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TERMS

Date Incurred: MM / DD / YYYY (11 / 17 / 2011) Date Due: MM / DD / YYYY (01 / 31 / 2014) Interest Rate: None % (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: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional)..... ▶	138000.00
TOTALS This Period (last page in this line only)..... ▶	[]

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

SCHEDULE C (FEC Form 3X)

LOANS

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

LOAN SOURCE Full Name (Last, First, Middle Initial) National Right To Life Committee	<input type="checkbox"/> Memo Item	Election: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other
Mailing Address 512 10th St NW		
City Washington State DC ZIP Code 20004-1401		

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

Date Incurred 10 / 28 / 2009	Date Due 12 / 31 / 2011	Interest Rate None % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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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: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional)..... ▶	0.00
TOTALS This Period (last page in this line only)..... ▶	588000.00

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 37 OF 40
	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 Printing	Nature of Debt (Purpose): Advertisement
Mailing Address 521 Research Rd	
City State Zip Code North Chesterfield VA 23236-3046	

Outstanding Balance Beginning This Period <input type="text" value="306.04"/>	Transaction ID : DF860C97FDA534A0A921	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="306.04"/>

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

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

1) SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="306.04"/>
2) TOTALS This Period (last page this line number only)..... ▶	<input type="text" value="306.04"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	<input type="text" value="0.00"/>
4) ADD 2) and 3) 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) National Right to Life Political Action Committee	FEC IDENTIFICATION NUMBER ▼ C C00111278
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 M M M / D D D / Y Y Y Y Y Y	

Full Name of Payee Tigre-Strategics, Inc <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 04 / 28 / 2016
Mailing Address 3817 W Dale Ave Apt 1	Amount 451.04
City State Zip Code Tampa FL 33609-4436	
Purpose of Expenditure IE-Cruz-RI-Phone Calls	Transaction ID : E68C9DFC2FC714074972 Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y
Name of Federal Candidate Rafael Edward Cruz	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: 00 State: _____
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____ 451.04

Full Name of Payee Tigre-Strategics, Inc <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 06 / 01 / 2016
Mailing Address 3817 W Dale Ave Apt 1	Amount 470.68
City State Zip Code Tampa FL 33609-4436	
Purpose of Expenditure IE-Holding-Phone Calls	Transaction ID : E22F5DEFAE660485A855 Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y
Name of Federal Candidate George E Holding	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 13 State: NC
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____ 474.55

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	921.72
(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.

Wayne Cockfield [Electronically Filed]

Signature _____ Date M M M / D D D / Y Y Y Y Y Y
08 / 01 / 2016

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 report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name of Payee Tigre-Strategics, Inc <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination 06 / 01 / 2016
Mailing Address 3817 W Dale Ave Apt 1	Amount 719.72
City State Zip Code Tampa FL 33609-4436	
Purpose of Expenditure IE-Foxx-Phone Calls	Transaction ID : EBA571B085F5C45FB8B1 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y
Name of Federal Candidate Rep. Virginia Foxx	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: <u>05</u> <input type="checkbox"/> President <input type="checkbox"/> State: <u>NC</u>
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

719.72

Full Name of Payee Tigre-Strategics, Inc <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination 06 / 06 / 2016
Mailing Address 3817 W Dale Ave Apt 1	Amount 589.66
City State Zip Code Tampa FL 33609-4436	
Purpose of Expenditure IE-Foxx-Phone Calls	Transaction ID : E1875500D9FDE4528808 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y
Name of Federal Candidate Rep. Virginia Foxx	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: <u>05</u> <input type="checkbox"/> President <input type="checkbox"/> State: <u>NC</u>
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

1309.38

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	1309.38
(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.

Wayne Cockfield

Signature _____ [Electronically Filed] Date 08 / 01 / 2016

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Right to Life Political Action Committee		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C0011278 </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 of Payee Tigre-Strategics, Inc <input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination MM / DD / YYYY 06 / 06 / 2016	
Mailing Address 3817 W Dale Ave Apt 1		Amount 421.73	
City Tampa	State FL	Zip Code 33609-4436	Transaction ID : EE8EBD1E8817F4D7CAC5
Purpose of Expenditure IE-Holding-Phone Calls	Category/Type		Date of Disbursement or Obligation MM / DD / YYYY
Name of Federal Candidate George E Holding		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <u>13</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>NC</u>
Calendar Year-To-Date Per Election for Office Sought		896.28	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination MM / DD / YYYY	
Mailing Address		Amount	
City	State	Zip Code	Date of Disbursement or Obligation MM / DD / YYYY
Purpose of Expenditure	Category/Type		MM / DD / YYYY
Name of Federal Candidate		<input type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	421.73
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	2652.83

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.

Wayne Cockfield
[Electronically Filed]
Date MM / DD / YYYY **08 / 01 / 2016**

Signature