



**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

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="2015"/>		155202.29
(b) Cash on Hand at Beginning of Reporting Period.....	86935.40	
(c) Total Receipts (from Line 19) .....	21338.50	65917.32
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	108273.90	221119.61
7. Total Disbursements (from Line 31).....	11487.86	124333.57
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	96786.04	96786.04
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	588000.00	
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

FEC Form 3X (Rev. 06/2004)

Page 3

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).....	10815.00	21358.00
(ii) Unitemized .....	10523.50	44559.32
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	21338.50	65917.32
(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) .....	21338.50	65917.32
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))..... ▶	21338.50	65917.32
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	21338.50	65917.32

**DETAILED SUMMARY PAGE**

of Disbursements

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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 .....	1893.95	22739.66
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	1893.95	22739.66
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	9343.91	9343.91
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
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	80000.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	12000.00
(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)).....	0.00	12000.00
29. Other Disbursements .....	250.00	250.00
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)) ..	11487.86	124333.57
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	11487.86	124333.57

**DETAILED SUMMARY PAGE**  
of Disbursements

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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) .....	21338.50	65917.32
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	12000.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	21338.50	53917.32
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	1893.95	22739.66
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	1893.95	22739.66

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

Form/Schedule: F3XN  
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 50
	<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. 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 ▼ 280.00

Date of Receipt  
07 / 06 / 2015  
**Transaction ID : A4F6CA8791A8F4BCDAE7**

Amount of Each Receipt this Period  
40.00

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

Mailing Address 10019 Granger Rd

City Cleveland 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 ▼ 750.00

Date of Receipt  
07 / 13 / 2015  
**Transaction ID : A3E0E642763964CA9AB1**

Amount of Each Receipt this Period  
100.00

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

Mailing Address 1330 8th St SW

City Minot State ND Zip Code 58701-5715

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

Name of Employer Nurse Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
08 / 06 / 2015  
**Transaction ID : A4C04AF7ACF15495D8FE**

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 390.00

**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 8 OF 50
	(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. Jerry Carroll**

Mailing Address **PO Box 2**

City **Cedar Crest** State **NM** Zip Code **87008-0002**

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

Name of Employer **American Airlines** Occupation **Pilot**

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  
**08 / 06 / 2015**

**Transaction ID : AAEBE98A9AB414DDC864**

Amount of Each Receipt this Period  
**100.00**

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

Mailing Address **3422 Flint Hill PI**

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 ▼ **320.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**08 / 06 / 2015**

**Transaction ID : A6D3B74EB73DA402CA56**

Amount of Each Receipt this Period  
**40.00**

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

Mailing Address **PO Box 645**

City **Challis** State **ID** Zip Code **83226-0645**

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 ▼ **5000.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**08 / 06 / 2015**

**Transaction ID : A617CA2CA86FC42758AB**

Amount of Each Receipt this Period  
**5000.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>5140.00</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 50
	<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. Jeffrey Koloze**  
Full Name (Last, First, Middle Initial)

Mailing Address 10019 Granger Rd

City Cleveland 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 ▼ **850.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**08 / 12 / 2015**

**Transaction ID : AD4A9037397034F3097F**

Amount of Each Receipt this Period  
**100.00**

**B. Marjorie Higgins**  
Full Name (Last, First, Middle Initial)

Mailing Address 1847 Wexford Way

City Fleming Island State FL Zip Code 32003-7753

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 ▼ **459.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**08 / 28 / 2015**

**Transaction ID : A7E06DD4721214815A14**

Amount of Each Receipt this Period  
**73.00**

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

Mailing Address 10639 Silverbrook Dr

City Cincinnati State OH Zip Code 45240-3523

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

Name of Employer Tac Engineering, Inc. Occupation Engineer

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  
**08 / 28 / 2015**

**Transaction ID : AE599061B38BD4017B6E**

Amount of Each Receipt this Period  
**500.00**

**SUBTOTAL** of Receipts This Page (optional)..... **673.00**

**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 50
<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. Manfred Rudy**

Mailing Address 649 Reeves St Unit 5009

City Woodstock State GA Zip Code 30188-1876

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  
 08 / 28 / 2015  
**Transaction ID : A9C9542798C41457DA5E**

Amount of Each Receipt this Period  
1000.00

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

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 Information Requested Occupation Information Requested  
FAA Meteorologist

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
360.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 08 / 2015  
**Transaction ID : A9244050044F6415BB92**

Amount of Each Receipt this Period  
40.00

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

Mailing Address 4 Renehan Dr

City Ansonia State CT Zip Code 06401-2720

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

Name of Employer Information Requested Occupation Information Requested  
Self Employed Home Improvement

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
225.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 14 / 2015  
**Transaction ID : A1F96366E7765450B80E**

Amount of Each Receipt this Period  
25.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1065.00
<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 11 OF 50
	<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. Jeffrey Koloze**  
Full Name (Last, First, Middle Initial)

Mailing Address 10019 Granger Rd

City Cleveland 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 ▼ **950.00**

Date of Receipt **09 / 14 / 2015**

**Transaction ID : A7E81DBE697384EC381C**

Amount of Each Receipt this Period **100.00**

**B. Edwin Botero**  
Full Name (Last, First, Middle Initial)

Mailing Address 2701 Stockbury Dr

City Fort Collins State CO Zip Code 80525-9697

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

Name of Employer JBS Swift Occupation Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **225.00**

Date of Receipt **09 / 21 / 2015**

**Transaction ID : A68D93BDAEF6F44A0805**

Amount of Each Receipt this Period **25.00**

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

Mailing Address 780 W 15th St

City San Pedro State CA Zip Code 90731-4608

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

Name of Employer Pacific Maritime Assn Occupation Longshoreman

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **1000.00**

Date of Receipt **09 / 29 / 2015**

**Transaction ID : A692C64AFA1E64CA6891**

Amount of Each Receipt this Period **1000.00**

**SUBTOTAL** of Receipts This Page (optional)..... **1125.00**

**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 50
	<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"/>	<input type="checkbox"/> 17

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

**A. Daniel Dollison**  
Full Name (Last, First, Middle Initial)

Mailing Address 3409 Ashley Lane

City Springfield State IL Zip Code 62711-8259

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 ▼  
210.00

Date of Receipt  
09 / 29 / 2015  
Transaction ID : **AE11916C553A94EB7B9B**

Amount of Each Receipt this Period  
300.00

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

Mailing Address 312 Hamptonridge Rd

City Edmond State OK Zip Code 73034-6638

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 ▼  
300.00

Date of Receipt  
09 / 29 / 2015  
Transaction ID : **A03CCDB8F9E64F68BAB**

Amount of Each Receipt this Period  
300.00

**C. 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 Information Requested Occupation Meteorologist

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  
10 / 06 / 2015  
Transaction ID : **A0D9A127A85574FB889D**

Amount of Each Receipt this Period  
40.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 370.00

**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 50
	<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)  
**A. Jeffrey Koloze**

Mailing Address 10019 Granger Rd

City Cleveland	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 ▼  
1050.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 13 / 2015

**Transaction ID : A31DE16913FC2405CB9C**

Amount of Each Receipt this Period  
100.00

Full Name (Last, First, Middle Initial)  
**B. Larry Boemmels**

Mailing Address 4 Renehan Dr

City Ansonia	State CT	Zip Code 06401-2720
-----------------	-------------	------------------------

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

Name of Employer Self Employed	Occupation Home Improvement
-----------------------------------	--------------------------------

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  
 10 / 13 / 2015

**Transaction ID : A82C05D74919F4AB7917**

Amount of Each Receipt this Period  
25.00

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

Mailing Address 2701 Stockbury Dr

City Fort Collins	State CO	Zip Code 80525-9697
----------------------	-------------	------------------------

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

Name of Employer JBS Swift	Occupation Manager
-------------------------------	-----------------------

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  
 10 / 19 / 2015

**Transaction ID : ABD231E4EA55D455CB1D**

Amount of Each Receipt this Period  
25.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	150.00
<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 14 OF 50
	<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. 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 ▼ 440.00

Date of Receipt  
11 / 06 / 2015  
**Transaction ID : AC1DA665A49B34544A18**

Amount of Each Receipt this Period  
40.00

**B. Paul McNickle**  
Full Name (Last, First, Middle Initial)

Mailing Address 18 W 13th St

City Frederick State MD Zip Code 21701-4410

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 ▼ 220.00

Date of Receipt  
11 / 12 / 2015  
**Transaction ID : A49A763BB7072440CA1E**

Amount of Each Receipt this Period  
20.00

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

Mailing Address 4 Renehan Dr

City Ansonia State CT Zip Code 06401-2720

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

Name of Employer Self Employed Occupation Home Improvement

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt  
11 / 12 / 2015  
**Transaction ID : A0CD883B7427041F3B55**

Amount of Each Receipt this Period  
25.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 85.00

**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 50
	<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. Jeffrey Koloze**  
Full Name (Last, First, Middle Initial)

Mailing Address 10019 Granger Rd

City Cleveland 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 ▼ **1150.00**

Date of Receipt  
**11 / 12 / 2015**

**Transaction ID : AA9AE52F9FF23498DB4C**

Amount of Each Receipt this Period  
**100.00**

**B. Marjorie Higgins**  
Full Name (Last, First, Middle Initial)

Mailing Address 1847 Wexford Way

City Fleming Island State FL Zip Code 32003-7753

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 ▼ **501.00**

Date of Receipt  
**11 / 18 / 2015**

**Transaction ID : AEB1455F3610F482C895**

Amount of Each Receipt this Period  
**42.00**

**C. Diana O'Brien**  
Full Name (Last, First, Middle Initial)

Mailing Address 1305 S Prospect Ave

City Park Ridge State IL Zip Code 60068-5344

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 ▼ **225.00**

Date of Receipt  
**11 / 18 / 2015**

**Transaction ID : AEFDF7FDADC0F4AA8969**

Amount of Each Receipt this Period  
**25.00**

**SUBTOTAL** of Receipts This Page (optional)..... **167.00**

**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 50
	<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. Diana O'Brien**

Mailing Address 1305 S Prospect Ave

City Park Ridge State IL Zip Code 60068-5344

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 ▼  
225.00

Date of Receipt  
11 / 18 / 2015  
**Transaction ID : A27A9E49CDFAB4F2F9D1**

Amount of Each Receipt this Period  
25.00

Full Name (Last, First, Middle Initial)  
**B. Edwin Botero**

Mailing Address 2701 Stockbury Dr

City Fort Collins State CO Zip Code 80525-9697

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

Name of Employer Occupation  
JBS Swift Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
275.00

Date of Receipt  
11 / 19 / 2015  
**Transaction ID : AD22B6371920C41909A3**

Amount of Each Receipt this Period  
25.00

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

Mailing Address 217 Spring Street

City Chilton State WI Zip Code 53014-1256

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

Name of Employer Occupation  
WI State Correctional System Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
220.00

Date of Receipt  
11 / 19 / 2015  
**Transaction ID : A36739ADE40A645D2B30**

Amount of Each Receipt this Period  
20.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 70.00

**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 50
	<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 Glinski**  
Full Name (Last, First, Middle Initial)

Mailing Address 7525 E Hampstead Ct

City Middleton	State WI	Zip Code 53562-3609
-------------------	-------------	------------------------

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

Name of Employer Wisconsin Dept. Of Justice	Occupation Attorney
--	------------------------

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
11	/	30	/	2015

**Transaction ID : A5768F61581E7420AA21**

Amount of Each Receipt this Period  
300.00

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

Mailing Address PO Box 2

City Cedar Crest	State NM	Zip Code 87008-0002
---------------------	-------------	------------------------

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

Name of Employer American Airlines	Occupation Pilot
---------------------------------------	---------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	30	/	2015

**Transaction ID : A0EF731B19AE44465964**

Amount of Each Receipt this Period  
100.00

**C. 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 ▼  
480.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	07	/	2015

**Transaction ID : A5B017F332A1C4F0DAEE**

Amount of Each Receipt this Period  
40.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	440.00
<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:	PAGE 18 OF 50
	(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. Mark Donohue**

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 Tampa Bay Friendsfor Life Occupation Broker

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  
**12 / 11 / 2015**

**Transaction ID : A56DC82B5C4E34079979**

Amount of Each Receipt this Period  
**100.00**

Full Name (Last, First, Middle Initial)  
**B. Larry Boemmels**

Mailing Address 4 Renehan Dr

City Ansonia State CT Zip Code 06401-2720

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

Name of Employer Self Employed Occupation Home Improvement

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  
**12 / 14 / 2015**

**Transaction ID : A5F0F2975F5DA4B0DBB6**

Amount of Each Receipt this Period  
**25.00**

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

Mailing Address 10019 Granger Rd

City Cleveland 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 ▼ **1250.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**12 / 14 / 2015**

**Transaction ID : A13547282B5984877981**

Amount of Each Receipt this Period  
**100.00**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **225.00**

**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 19 OF 50
	(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**

**A. Paul McNickle**  
Full Name (Last, First, Middle Initial)

Mailing Address 18 W 13th St

City Frederick State MD Zip Code 21701-4410

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 ▼  
240.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 14 / 2015

**Transaction ID : ADBE9D82745BE4AF8949**

Amount of Each Receipt this Period  
20.00

**B. Charles Yeagle**  
Full Name (Last, First, Middle Initial)

Mailing Address 1813 Tiki St

City Findlay State OH Zip Code 45840-1756

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 M / D D D / Y Y Y Y Y Y  
 12 / 17 / 2015

**Transaction ID : A0B9134FEDA7444EAA6**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 217 Spring Street

City Chilton State WI Zip Code 53014-1256

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

Name of Employer Occupation Information Requested  
 WI State Correctional System Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
240.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 21 / 2015

**Transaction ID : A50C3CB6771994593A81**

Amount of Each Receipt this Period  
20.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	540.00
<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 20 OF 50
	<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"/>	<input type="checkbox"/> 17

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

**A. Edwin Botero**  
Full Name (Last, First, Middle Initial)

Mailing Address 2701 Stockbury Dr

City Fort Collins State CO Zip Code 80525-9697

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

Name of Employer JBS Swift Occupation Manager

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  
 12 / 21 / 2015

**Transaction ID : A2CEA65E415964C9B8E3**

Amount of Each Receipt this Period  
 25.00

**B. Melanie Boerman**  
Full Name (Last, First, Middle Initial)

Mailing Address 1195 Norwood Rd

City Charlevoix State MI Zip Code 49720-9765

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 M / D D D / Y Y Y Y Y Y  
 12 / 30 / 2015

**Transaction ID : A2583CB7DC23240E5981**

Amount of Each Receipt this Period  
 300.00

**C. 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 Tampa Bay Friendsfor Life Occupation Broker

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  
 12 / 30 / 2015

**Transaction ID : A90F50F27807F4FCC826**

Amount of Each Receipt this Period  
 50.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	375.00
<b>TOTAL</b> This Period (last page this line number only).....▶	10815.00

**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 Fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
07 / 01 / 2015

**Transaction ID : BA4504E960CD54FBA9AC**

Amount of Each Disbursement this Period

69.94

**B. Global Pay**

Mailing Address 10705 Red Run Blvd

City Owings Mills State MD Zip Code 21117-5134

Purpose of Disbursement  
Merchant Fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
07 / 02 / 2015

**Transaction ID : BC2DA2A87803B4A97B4F**

Amount of Each Disbursement this Period

98.23

**C. National Right to Life Conventions**

Mailing Address 419 7th Street, NW  
Suite 500

City Washington State DC Zip Code 20004

Purpose of Disbursement  
Advertising

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
07 / 02 / 2015

**Transaction ID : B9FA6D69291054191B53**

Amount of Each Disbursement this Period

400.00

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

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

568.17

**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) ▼

Date of Disbursement

MM / DD / YYYY  
07 / 13 / 2015

Transaction ID : BEE76245440004225AD6

Amount of Each Disbursement this Period

67.33

Category/  
Type

Full Name (Last, First, Middle Initial)

**B. 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

MM / DD / YYYY  
08 / 01 / 2015

Transaction ID : BBF97803D8B654D9E8ED

Amount of Each Disbursement this Period

69.94

Category/  
Type

Full Name (Last, First, Middle Initial)

**C. Global Pay**

Mailing Address 10705 Red Run Blvd

City Owings Mills State MD Zip Code 21117-5134

Purpose of Disbursement  
Merchant Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
08 / 04 / 2015

Transaction ID : BA9E17B5330DE48708F3

Amount of Each Disbursement this Period

113.54

Category/  
Type

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

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

250.81

**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  
08 / 11 / 2015

Transaction ID : BE530AFE8F9A7474F822

Amount of Each Disbursement this Period

68.99

Full Name (Last, First, Middle Initial)

**B. 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  
09 / 01 / 2015

Transaction ID : B85C1AC23425F40B5AF9

Amount of Each Disbursement this Period

69.94

Full Name (Last, First, Middle Initial)

**C. Global Pay**

Mailing Address 10705 Red Run Blvd

City Owings Mills State MD Zip Code 21117-5134

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  
09 / 02 / 2015

Transaction ID : B638FFDFED9AA4F62B29

Amount of Each Disbursement this Period

115.02

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

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

253.95

**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  
09 / 11 / 2015

Transaction ID : B993FB2776B01429D98B

Amount of Each Disbursement this Period

69.15

Full Name (Last, First, Middle Initial)

**B. Elavon Merchant Services**

Mailing Address Two Concourse Parkway, Suite 800

City Atlanta State GA Zip Code 30328-5588

Purpose of Disbursement  
Merchant Fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 01 / 2015

Transaction ID : BE538E96D06254DD787C

Amount of Each Disbursement this Period

69.94

Full Name (Last, First, Middle Initial)

**C. Global Pay**

Mailing Address 10705 Red Run Blvd

City Owings Mills State MD Zip Code 21117-5134

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  
10 / 02 / 2015

Transaction ID : B41E5547819C24308BAE

Amount of Each Disbursement this Period

107.68

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

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

246.77

**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  
10 / 13 / 2015

Transaction ID : B8D02B4AC189D4D629BF

Amount of Each Disbursement this Period

68.08

Full Name (Last, First, Middle Initial)

**B. Elavon Merchant Services**

Mailing Address Two Concourse Parkway, Suite 800

City Atlanta State GA Zip Code 30328-5588

Purpose of Disbursement  
Merchant Fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
11 / 02 / 2015

Transaction ID : B521DEEFE9BA3465E8B0

Amount of Each Disbursement this Period

79.99

Full Name (Last, First, Middle Initial)

**C. Global Pay**

Mailing Address 10705 Red Run Blvd

City Owings Mills State MD Zip Code 21117-5134

Purpose of Disbursement  
Merchant Fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
11 / 03 / 2015

Transaction ID : BE045744A633C4ECAB5D

Amount of Each Disbursement this Period

106.65

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

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

254.72

# 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**

**A. Wells Fargo**

Full Name (Last, First, Middle Initial)

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

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 11 / 12 / 2015

Transaction ID : B7BD0A4453C35460CB3E

Amount of Each Disbursement this Period: 67.33

Category/Type

**B. Elavon Merchant Services**

Full Name (Last, First, Middle Initial)

Mailing Address Two Concourse Parkway, Suite 800

City Atlanta State GA Zip Code 30328-5588

Purpose of Disbursement Merchant Fee

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 12 / 01 / 2015

Transaction ID : B45BF781D25624A74A5E

Amount of Each Disbursement this Period: 79.99

Category/Type

**C. Global Pay**

Full Name (Last, First, Middle Initial)

Mailing Address 10705 Red Run Blvd

City Owings Mills State MD Zip Code 21117-5134

Purpose of Disbursement Merchant Fee

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 12 / 02 / 2015

Transaction ID : B065705ABC3DB4BF1B88

Amount of Each Disbursement this Period: 104.88

Category/Type

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 252.20

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

**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

M M / D D / Y Y Y Y Y Y  
12 / 11 / 2015

**Transaction ID : B550ABB97D06E410EB63**

Amount of Each Disbursement this Period

67.33

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)..... ▶

67.33

1893.95

**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. Luis Zaffirini**

Mailing Address 512 10th St 512 10th St NW

City Washington State DC Zip Code 20004-0000

Purpose of Disbursement  
In-Kind-Livestreaming Service-See Memos

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For: 2015  
 Primary  General  
 Other (specify) Other2015

Date of Disbursement

MM / DD / YYYY  
07 / 15 / 2015

Transaction ID : B8F234E49B6584B64AB9

Amount of Each Disbursement this Period

99.00

Full Name (Last, First, Middle Initial)

**B. LA RTL Federation**

Mailing Address P.O. Box 24106

City New Orleans State LA Zip Code 70184-4106

Purpose of Disbursement  
In-Kind-Helium-See Memos

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For: 2015  
 Primary  General  
 Other (specify) Other2015

Date of Disbursement

MM / DD / YYYY  
07 / 27 / 2015

Transaction ID : B94372275B2F0468893A

Amount of Each Disbursement this Period

49.99

Full Name (Last, First, Middle Initial)

**C. New Orleans Marriott**

Mailing Address 555 Canal St

City New Orleans State LA Zip Code 70130-2349

Purpose of Disbursement  
In-Kind-Event Space/Catering/Equipment Rental-See Memos

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For: 2015  
 Primary  General  
 Other (specify) Other2015

Date of Disbursement

MM / DD / YYYY  
07 / 27 / 2015

Transaction ID : B6F52B56022B348C1A95

Amount of Each Disbursement this Period

9138.15

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

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

9287.14

**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. CRUZ FOR PRESIDENT**

Mailing Address PO BOX 25376

City HOUSTON State TX Zip Code 77265

Purpose of Disbursement  
In-Kind-Marriott-Event Space/Equipment Rental

Candidate Name  
**Rafael Edward Cruz**

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For: 2015  
 Primary  General  
 Other (specify) Other2015

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07	/	10	/	2015

Transaction ID : B6C8899F470C1453C804

Amount of Each Disbursement this Period

987.66
--------

**[MEMO ITEM]**  
In-Kind-Marriott-Event Space/Equipment Rental

Full Name (Last, First, Middle Initial)

**B. CRUZ FOR PRESIDENT**

Mailing Address PO BOX 25376

City HOUSTON State TX Zip Code 77265

Purpose of Disbursement  
InKind-LA Federation-Helium

Candidate Name  
**Rafael Edward Cruz**

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07	/	10	/	2015

Transaction ID : BB0EDFD9D8F1A4D0A92A

Amount of Each Disbursement this Period

7.14
------

**[MEMO ITEM]**  
InKind-LA Federation-Helium

Full Name (Last, First, Middle Initial)

**C. PERRY FOR PRESIDENT INC**

Mailing Address PO BOX 162406

City AUSTIN State TX Zip Code 78716

Purpose of Disbursement  
In-Kind-Marriott-Event Space/Catering/Equipment Rental

Candidate Name  
**James R Perry**

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07	/	10	/	2015

Transaction ID : BD820E12AF2A1442BA61

Amount of Each Disbursement this Period

1010.79
---------

**[MEMO ITEM]**  
In-Kind-Marriott-Event Space/Catering/Equipment Rental

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

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

0.00
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**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. CRUZ FOR PRESIDENT**

Mailing Address PO BOX 25376

City HOUSTON State TX Zip Code 77265

Purpose of Disbursement  
In-Kind-Zaffirini-Livestreaming Service

Candidate Name

**Rafael Edward Cruz**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
07 / 10 / 2015

**Transaction ID : B1B5CF9F2AEEA4E5089D**

Amount of Each Disbursement this Period

14.14

**[MEMO ITEM]**

In-Kind-Zaffirini-Livestreaming Service

Full Name (Last, First, Middle Initial)

**B. PERRY FOR PRESIDENT INC**

Mailing Address PO BOX 162406

City AUSTIN State TX Zip Code 78716

Purpose of Disbursement  
In-Kind-Zaffirini-Livestreaming Service

Candidate Name

**James R Perry**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
07 / 10 / 2015

**Transaction ID : B6163AC713372481FB86**

Amount of Each Disbursement this Period

14.14

**[MEMO ITEM]**

In-Kind-Zaffirini-Livestreaming Service

Full Name (Last, First, Middle Initial)

**C. CARSON AMERICA**

Mailing Address 1800 DIAGONAL ROAD  
STE 140

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement  
In-Kind-NRTL Convention-Balloons

Candidate Name

**Benjamin S Carson MD**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
07 / 10 / 2015

**Transaction ID : BC21A76E186D54F93A58**

Amount of Each Disbursement this Period

8.11

**[MEMO ITEM]**

In-Kind-NRTL Convention-Balloons

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

0.00

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

**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. RICK SANTORUM FOR PRESIDENT, INC. (2012)**

Mailing Address PO BOX 238

City VERONA State PA Zip Code 15147

Purpose of Disbursement  
In-Kind-NRTL Convention-Balloons

Candidate Name  
**Richard J Santorum**

Office Sought:  House  Senate  President  
State: District: Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	0		2	0	1	5

Transaction ID : **BB5F82E6F81DA4674920**

Amount of Each Disbursement this Period

8	.	1	1
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**[MEMO ITEM]**  
In-Kind-NRTL Convention-Balloons

Full Name (Last, First, Middle Initial)

**B. MARCO RUBIO FOR PRESIDENT**

Mailing Address PO BOX 558701

City MIAMI State FL Zip Code 33255

Purpose of Disbursement  
In-Kind-Zaffirini-Livestreaming Service

Candidate Name  
**Marco Rubio**

Office Sought:  House  Senate  President  
State: District: Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	0		2	0	1	5

Transaction ID : **B851AF3D2B41D47AFBDF**

Amount of Each Disbursement this Period

1	4	.	1	5
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**[MEMO ITEM]**  
In-Kind-Zaffirini-Livestreaming Service

Full Name (Last, First, Middle Initial)

**C. CRUZ FOR PRESIDENT**

Mailing Address PO BOX 25376

City HOUSTON State TX Zip Code 77265

Purpose of Disbursement  
In-Kind-NRTL Convention-Balloons

Candidate Name  
**Rafael Edward Cruz**

Office Sought:  House  Senate  President  
State: District: Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	0		2	0	1	5

Transaction ID : **B4670BF58F8CF4722A7D**

Amount of Each Disbursement this Period

8	.	1	1
---	---	---	---

**[MEMO ITEM]**  
In-Kind-NRTL Convention-Balloons

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

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

0	.	0	0
---	---	---	---

0	.	0	0
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**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. JEB 2016, INC.**

Mailing Address PO BOX 440669

City MIAMI State FL Zip Code 33144

Purpose of Disbursement  
In-Kind-Zaffirini-Livestreaming Service

Candidate Name

**Jeb Bush**

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			1	0			2	0	1	5		

Transaction ID : **BF1EF0EDA95C941B69F6**

Amount of Each Disbursement this Period

1	4	.	1	4
---	---	---	---	---

**[MEMO ITEM]**

In-Kind-Zaffirini-Livestreaming Service

Full Name (Last, First, Middle Initial)

**B. CARSON AMERICA**

Mailing Address 1800 DIAGONAL ROAD  
STE 140

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement  
In-Kind-Marriott-Event Space/Equipment Rental

Candidate Name

**Benjamin S Carson MD**

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			1	0			2	0	1	5		

Transaction ID : **BFC73070B10C1449AB9B**

Amount of Each Disbursement this Period

1	0	1	0	.	7	9
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**[MEMO ITEM]**

In-Kind-Marriott-Event Space/Equipment Rental

Full Name (Last, First, Middle Initial)

**C. MARCO RUBIO FOR PRESIDENT**

Mailing Address PO BOX 558701

City MIAMI State FL Zip Code 33255

Purpose of Disbursement  
In-Kind-NRTL Convention-Balloons

Candidate Name

**Marco Rubio**

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			1	0			2	0	1	5		

Transaction ID : **B4C548BDD46764AA3B52**

Amount of Each Disbursement this Period

8	.	1
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**[MEMO ITEM]**

In-Kind-NRTL Convention-Balloons

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

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

0	.	0	0
---	---	---	---

0	.	0	0
---	---	---	---

**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. PERRY FOR PRESIDENT INC**

Mailing Address PO BOX 162406

City AUSTIN State TX Zip Code 78716

Purpose of Disbursement  
IE-LA Federation-Helium

Candidate Name

**James R Perry**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7				1	0		2	0	1	5		

**Transaction ID : BFC8EE5516632487FA7A**

Amount of Each Disbursement this Period

7	.	1	4
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**[MEMO ITEM]**  
IE-LA Federation-Helium

Full Name (Last, First, Middle Initial)

**B. JEB 2016, INC.**

Mailing Address PO BOX 440669

City MIAMI State FL Zip Code 33144

Purpose of Disbursement  
In-Kind-NRTL Convention-Balloons

Candidate Name

**Jeb Bush**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7				1	0		2	0	1	5		

**Transaction ID : BA2AEBFC91FDD4BD0877**

Amount of Each Disbursement this Period

8	.	1	1
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**[MEMO ITEM]**  
In-Kind-NRTL Convention-Balloons

Full Name (Last, First, Middle Initial)

**C. RICK SANTORUM FOR PRESIDENT, INC. (2012)**

Mailing Address PO BOX 238

City VERONA State PA Zip Code 15147

Purpose of Disbursement  
In-Kind-Zaffirini-Livestreaming Service

Candidate Name

**Richard J Santorum**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7				1	0		2	0	1	5		

**Transaction ID : BB92EC4A3EFE04761B07**

Amount of Each Disbursement this Period

1	4	.	1	4
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**[MEMO ITEM]**  
In-Kind-Zaffirini-Livestreaming Service

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

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

0	.	0	0
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0	.	0	0
---	---	---	---

**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. CARSON AMERICA**

Mailing Address 1800 DIAGONAL ROAD  
STE 140

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement  
InKind-LA Federation-Helium

Candidate Name  
**Benjamin S Carson MD**

Office Sought:  House  Senate  President  
State: District: Disbursement For: 2016  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
07 / 10 / 2015

Transaction ID : **BB810BBAC40574D2AB1F**

Amount of Each Disbursement this Period

7.14

**[MEMO ITEM]**  
InKind-LA Federation-Helium

Full Name (Last, First, Middle Initial)

**B. RICK SANTORUM FOR PRESIDENT, INC. (2012)**

Mailing Address PO BOX 238

City VERONA State PA Zip Code 15147

Purpose of Disbursement  
In-Kind-Marriott-Event Space/Catering/Equipment Rental

Candidate Name  
**Richard J Santorum**

Office Sought:  House  Senate  President  
State: District: Disbursement For: 2016  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
07 / 10 / 2015

Transaction ID : **B71B333C0411D4C3EB71**

Amount of Each Disbursement this Period

1010.80

**[MEMO ITEM]**  
In-Kind-Marriott-Event Space/Catering/Equipment Rental

Full Name (Last, First, Middle Initial)

**C. MARCO RUBIO FOR PRESIDENT**

Mailing Address PO BOX 558701

City MIAMI State FL Zip Code 33255

Purpose of Disbursement  
In-Kind-Marriott-Event Space/Catering/Equipment Rental

Candidate Name  
**Marco Rubio**

Office Sought:  House  Senate  President  
State: District: Disbursement For: 2016  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
07 / 10 / 2015

Transaction ID : **B5C58A58C704A4D96A41**

Amount of Each Disbursement this Period

3142.80

**[MEMO ITEM]**  
In-Kind-Marriott-Event Space/Catering/Equipment Rental

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

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

0.00

**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 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. RICK SANTORUM FOR PRESIDENT, INC. (2012)**

Mailing Address PO BOX 238

City VERONA State PA Zip Code 15147

Purpose of Disbursement  
In-Kind-LA RTL-Helium

Candidate Name

**Richard J Santorum**

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y  
07 / 10 / 2015

Transaction ID : **BD9BB5B32A22844F895A**

Amount of Each Disbursement this Period

7.14

**[MEMO ITEM]**

In-Kind-LA RTL-Helium

Full Name (Last, First, Middle Initial)

**B. CARSON AMERICA**

Mailing Address 1800 DIAGONAL ROAD  
STE 140

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement  
In-Kind-Zaffirini-Livestreaming Service

Candidate Name

**Benjamin S Carson MD**

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y  
07 / 10 / 2015

Transaction ID : **B354E2676A7E14D35837**

Amount of Each Disbursement this Period

14.14

**[MEMO ITEM]**

In-Kind-Zaffirini-Livestreaming Service

Full Name (Last, First, Middle Initial)

**C. JEB 2016, INC.**

Mailing Address PO BOX 440669

City MIAMI State FL Zip Code 33144

Purpose of Disbursement  
In-Kind-Marriott-Event Space/Equipment Rental

Candidate Name

**Jeb Bush**

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y  
07 / 10 / 2015

Transaction ID : **B87AED48885B946559F8**

Amount of Each Disbursement this Period

987.66

**[MEMO ITEM]**

In-Kind-Marriott-Event Space/Equipment Rental

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

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

0.00

**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 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. National Right to Life Conventions**

Mailing Address 419 7th Street, NW  
Suite 500

City Washington State DC Zip Code 20004

Purpose of Disbursement  
In-Kind-Baloons-See Memos

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼  
Other2015

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	7		2	7		2	0	1	5		

Transaction ID : BBDD695788E0E401CB16

Amount of Each Disbursement this Period

5	6	.	7	7
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Category/  
Type

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

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

Amount of Each Disbursement this Period

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Category/  
Type

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

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

Amount of Each Disbursement this Period

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Category/  
Type

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

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

5	6	.	7	7
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9	3	4	3	.	9	1
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SCHEDULE C (FEC Form 3X)

LOANS

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

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) National Right To Life Committee	Election: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other2014
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
--------------------------------------	------------------------------------	--

**TERMS**

Date Incurred: 11 / 10 / 2014 Date Due: 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: [ ]

<b>SUBTOTALS</b> This Period This Page (optional)..... ▶	100000.00
<b>TOTALS</b> 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**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) National Right To Life Committee	Election: 2013 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other2013
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
-------------------------------------	------------------------------------	---

**TERMS**

Date Incurred: 09 / 16 / 2013 Date Due: 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: [ ]

<b>SUBTOTALS</b> This Period This Page (optional)..... ▶	[ ] 75000.00
<b>TOTALS</b> 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 : CA03341AAF00541EDAAF

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) National Right To Life Committee	Election: 2015 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other2015
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: [ ]

<b>SUBTOTALS</b> This Period This Page (optional)..... ▶	[ ] 30000.00
<b>TOTALS</b> 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

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) National Right To Life Committee	Election: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other2014
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
--------------------------------------	------------------------------------	--

**TERMS**

Date Incurred: 11 / 10 / 2014 Date Due: 11 / 10 / 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: [ ]

<b>SUBTOTALS</b> This Period This Page (optional)..... ▶	100000.00
<b>TOTALS</b> 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

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) National Right To Life Committee	Election: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other2014
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
-------------------------------------	------------------------------------	---

**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: [ ]

<b>SUBTOTALS</b> This Period This Page (optional)..... ▶	80000.00
<b>TOTALS</b> 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**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) National Right To Life Committee	Election: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other2014
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
-------------------------------------	------------------------------------	---

**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
---	--	-------------------------------	---

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: [ ]

<b>SUBTOTALS</b> This Period This Page (optional)..... ▶	[ ] 15000.00
<b>TOTALS</b> 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

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) National Right To Life Committee	Election: 2015 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other2015
Mailing Address 512 10th St NW	
City Washington State DC ZIP Code 20004-1401	

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

<b>SUBTOTALS</b> This Period This Page (optional)..... ▶	50000.00
<b>TOTALS</b> 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**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) National Right To Life Committee	Election: 2013 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other2013
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
--------------------------------------	--	--

**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="138000.00"/>
<b>TOTALS</b> 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 : C41135A1EFE2C4668B8E

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) National Right To Life Committee	Election: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other2009
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: 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="0.00"/>
<b>TOTALS</b> This Period (last page in this line only)..... ▶	<input type="text" value="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 48 OF 50
	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 Rd	
City State Zip Code North Chesterfield VA 23236-3046	

Outstanding Balance Beginning This Period <input type="text" value="306.04"/>	<b>Transaction ID : DF860C97FDA534A0A921</b>	
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) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	<input type="text" value="306.04"/>
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) National Right to Life Political Action Committee
FEC IDENTIFICATION NUMBER C C0011278
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee HILLARY FOR AMERICA [MEMO ITEM]
Mailing Address P.O. BOX 5256
City NEW YORK State NY Zip Code 10185
Purpose of Expenditure IE-Zaffirini-Livestreaming Service
Name of Federal Candidate Hillary Rodham Clinton
Calendar Year-To-Date Per Election for Office Sought 0.00

Date of Public Distribution/Dissemination 07 / 10 / 2015
Amount 14.15
Transaction ID : ED01BC87552A4414AB6A
Date of Disbursement or Obligation
Office Sought: House District: 00
Disbursement For: Primary General 2016

Full Name of Payee HILLARY FOR AMERICA [MEMO ITEM]
Mailing Address P.O. BOX 5256
City NEW YORK State NY Zip Code 10185
Purpose of Expenditure IE-Mariott-Event Space/Equipment Rental
Name of Federal Candidate Hillary Rodham Clinton
Calendar Year-To-Date Per Election for Office Sought 0.00

Date of Public Distribution/Dissemination 07 / 10 / 2015
Amount 987.65
Transaction ID : EAE4B60CB83044D64A36
Date of Disbursement or Obligation
Office Sought: House District: 00
Disbursement For: Primary General 2016

(a) SUBTOTAL of Itemized Independent Expenditures 0.00
(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.

Wayne Cockfield [Electronically Filed] Date 01 / 31 / 2016
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Right to Life Political Action Committee
FEC IDENTIFICATION NUMBER C C0011278
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee HILLARY FOR AMERICA [MEMO ITEM]
Mailing Address P.O. BOX 5256
City NEW YORK State NY Zip Code 10185
Purpose of Expenditure IE-LA Federation-Helium
Name of Federal Candidate Hillary Rodham Clinton
Calendar Year-To-Date Per Election for Office Sought 0.00

Date of Public Distribution/Dissemination 07 / 10 / 2015
Amount 7.14
Transaction ID : EA8C0BD81E5CB4396AA1
Date of Disbursement or Obligation
Office Sought: House District: 00
President Senate State:
Disbursement For: Primary General 2016 Other (specify)

Full Name of Payee HILLARY FOR AMERICA [MEMO ITEM]
Mailing Address P.O. BOX 5256
City NEW YORK State NY Zip Code 10185
Purpose of Expenditure IE-NRTL Convention-Balloons
Name of Federal Candidate Hillary Rodham Clinton
Calendar Year-To-Date Per Election for Office Sought 0.00

Date of Public Distribution/Dissemination 07 / 10 / 2015
Amount 8.11
Transaction ID : ECA5A9B8D0504408E955
Date of Disbursement or Obligation
Office Sought: House District: 00
President Senate State:
Disbursement For: Primary General 2016 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 0.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures 0.00

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 01 / 31 / 2016
Signature