

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

NAME OF COMMITTEE (In Full) National Right to Life Political Action Committee	FEC IDENTIFICATION NUMBER C00111278
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Full Name (Last, First, Middle, Initial) of Payee In Touch Systems Mailing Address 5149 Cotton Rd. City State Zip Code Roswell NM 88201- Date Amount 11 18 2002 1193.75 Transaction ID: 1122200241E8738	Purpose of Expenditure Name of Federal Candidate supported or opposed by expenditure: Office Sought: House Senate Presidential State: _____ District: _____ Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
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Full Name (Last, First, Middle, Initial) of Payee In Touch Systems Mailing Address 5149 Cotton Rd. City State Zip Code Roswell NM 88201- Date Amount 11 18 2002 902.11 Transaction ID: 1122200241E8740	Purpose of Expenditure Name of Federal Candidate supported or opposed by expenditure: TURNER, MICHAEL R Office Sought: <input checked="" type="checkbox"/> House Senate Presidential State: OH District: 03 Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
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Full Name (Last, First, Middle, Initial) of Payee In Touch Systems Mailing Address 5149 Cotton Rd. City State Zip Code Roswell NM 88201- Date Amount 10 29 2002 -7157.03 Transaction ID: 0119200337E9521	Purpose of Expenditure Name of Federal Candidate supported or opposed by expenditure: CORNYN, JOHN Office Sought: House <input checked="" type="checkbox"/> Senate Presidential State: TX District: 00 Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
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(a) SUBTOTAL of Itemized Independent Expenditures	-5061.17
(b) SUBTOTAL of Unitemized Independent Expenditures	0.00
(c) TOTAL Independent Expenditures	

Under penalty of perjury, I declare that the independent expenditures reported hereon were made in connection with a nomination, confirmation, election, or appointment of any candidate, party, ballot committee or each of such candidates or authorized committees.

Date 11 18 2002

Signature _____