



keating18-fcc@yahoo.com on 10/31/2008 04:41:43 PM

To: 2022190174@fcc.gov  
cc:

Subject: Form 9 electioneering communications filing

See attached.

David

---

David Keating  
Secretary  
Club for Growth.NET  
2001 L St NW, Suite 699



Washington DC 20036 2008-10-31.pdf

28039911048

# FEC FORM 9

## 24 HOUR NOTICE OF DISBURSEMENTS/OBLIGATIONS FOR ELECTIONEERING COMMUNICATIONS

### 1. Individual, Organization or Qualified Nonprofit Corporation Making the Disbursement/Obligations

(a) Name

Club For Growth .NET

(b) Address (number and street)  check if different than previously reported

2001 L Street, NW, Ste 699

(c) City, State and ZIP Code

Washington, DC 20036

(d) Name of Employer or Principal Place of Business

N/A

(e) Occupation

N/A

2. FEC Identification Number

C 30000269

3. Is This Statement



New

or



Amended

4. Covering Period

10 30 2008

through

10 31 2008

5. (a) Date of Public Distribution(s)

10 30 2008

(b) Communication Title "Bad Economy"

6. Is the Filer a Qualified Nonprofit Corporation under 11 CFR 114.10?

Yes

No

7. Were the disbursements for the electioneering communication made exclusively from donations to a segregated bank account?

Yes

No

### 8. Custodian of Records

(a) Name

David Keating, Secretary

(b) Address (number and street)

2001 L Street, NW, Ste 699

(c) City, State and ZIP Code

Washington, DC 20036

(d) Name of Employer or Principal Place of Business

Club for Growth

(e) Occupation

Executive Director

9. Total Donations This Statement

53,000.00

10. Total Disbursements/Obligations This Statement

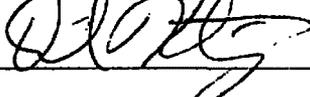
52,712.50

Under penalty of perjury, I certify that this statement is true, correct and complete. In addition, if the electioneering communications reported herein were made by a corporation, I certify that the corporation is a qualified nonprofit corporation under the Commission's regulations.

TYPE OR PRINT NAME OF PERSON COMPLETING FORM

DAVID KEATING

SIGNATURE



DATE

10/31/08

NOTE: Submission of false, erroneous or incomplete information may subject the person signing this statement to the penalties of 2 U.S.C. §437g.

28039911049

**List of Person(s) Sharing/Exercising Control**  
(use additional pages as necessary)

PAGE 2 OF 4

**11. Person(s) Sharing/Exercising Control**

<b>A.</b>	(a) Name Pat Toomey	(e) Occupation President
	(b) Address (number and street) 2001 L Street, NW, Ste 699	
	(c) City, State and ZIP Code Washington, DC 20036	
	(d) Name of Employer or Principal Place of Business Club for Growth	
<b>B.</b>	(a) Name Jackson T. Stephens, Jr.	(e) Occupation Executive
	(b) Address (number and street) 2001 L Street, NW, Ste 699	
	(c) City, State and ZIP Code Washington, DC 20036	
	(d) Name of Employer or Principal Place of Business EOE, Inc.	
<b>C.</b>	(a) Name David Keating	(e) Occupation Executive Director
	(b) Address (number and street) 2001 L Street, NW, Ste 699	
	(c) City, State and ZIP Code Washington, DC 20036	
	(d) Name of Employer or Principal Place of Business Club for Growth	
<b>D.</b>	(a) Name Sue Zimskind	(e) Occupation Homemaker
	(b) Address (number and street) 2001 L Street, NW, Ste 699	
	(c) City, State and ZIP Code Washington, DC 20036	
	(d) Name of Employer or Principal Place of Business n/a	
<b>E.</b>	(a) Name Gary R. Faulkner	(e) Occupation Accounting
	(b) Address (number and street) 2001 L Street, NW, Ste 699	
	(c) City, State and ZIP Code Washington, DC 20036	
	(d) Name of Employer or Principal Place of Business EOE, Inc.	

28039911050

**SCHEDULE 9-A**  
**Donation(s) Received**

<p><b>A.</b> Full Name of Donor  Terry Kohler</p> <hr/> <p>Mailing Address of Donor  PO Box 897</p> <hr/> <p>City State Zip  Sheboygan WI 53082-0897</p>	<p>Date of Receipt  1 0 3 0 2 0 0 8</p> <p>Amount  5 3 0 0 0 . 0 0</p>	
<p><b>B.</b> Full Name of Donor</p> <hr/> <p>Mailing Address of Donor</p> <hr/> <p>City State Zip</p>	<p>Date of Receipt  . . . . .</p> <p>Amount  . . . . .</p>	
<p><b>C.</b> Full Name of Donor</p> <hr/> <p>Mailing Address of Donor</p> <hr/> <p>City State Zip</p>	<p>Date of Receipt  . . . . .</p> <p>Amount  . . . . .</p>	
<p><b>D.</b> Full Name of Donor</p> <hr/> <p>Mailing Address of Donor</p> <hr/> <p>City State Zip</p>	<p>Date of Receipt  . . . . .</p> <p>Amount  . . . . .</p>	
<p><b>E.</b> Full Name of Donor</p> <hr/> <p>Mailing Address of Donor</p> <hr/> <p>City State Zip</p>	<p>Date of Receipt  . . . . .</p> <p>Amount  . . . . .</p>	
<p><b>SUBTOTAL</b> of Donations This Page (optional) ..... ▶</p> <hr/> <p><b>TOTAL</b> This Period (last page this line number only) ..... ▶  (carry total from last page to Line 9)</p>		<p>5 3 0 0 0 . 0 0</p> <hr/> <p>5 3 0 0 0 . 0 0</p>

28039911051

**SCHEDULE 9-B**  
**Disbursement(s) Made or Obligation(s)**

<b>A. Full Name (Last, First, Middle Initial) of Payee</b> Red Sea, LLC				<b>Date of Disbursement or Obligation</b> M M / D D / Y Y Y Y 10 / 30 / 2008	
<b>Mailing Address of Payee</b> 4550 Montgomery Ave. Ste. 906				<b>Amount</b> 52,712.50	
<b>City</b> Bethesda	<b>State</b> MD	<b>Zip Code</b> 20814		<b>Communication Date</b> M M / D D / Y Y Y Y 10 / 30 / 2008	
<b>Name of Employer</b> n/a				<b>Occupation</b> n/a	
<b>Purpose of Disbursement: (Including title(s) of communication(s))</b> Radio ad air buy, production costs, "Bad Economy", 10/30/08 - 11/4/08					
<b>Name of Federal Candidate</b> Bob Lord	<b>Office Sought:</b> <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<b>State:</b> AZ <b>District:</b> 03	<b>Disbursement/Obligation For:</b> <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		
<b>Name of Federal Candidate</b>	<b>Office Sought:</b> <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<b>State:</b> _____ <b>District:</b> _____	<b>Disbursement/Obligation For:</b> <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		
<b>Name of Federal Candidate</b>	<b>Office Sought:</b> <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<b>State:</b> _____ <b>District:</b> _____	<b>Disbursement/Obligation For:</b> <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		
<b>B. Full Name (Last, First, Middle Initial) of Payee</b>				<b>Date of Disbursement or Obligation</b> M M / D D / Y Y Y Y	
<b>Mailing Address of Payee</b>				<b>Amount</b>	
<b>City</b>	<b>State</b>	<b>Zip Code</b>		<b>Communication Date</b> M M / D D / Y Y Y Y	
<b>Name of Employer</b>				<b>Occupation</b>	
<b>Purpose of Disbursement (Including title(s) of communication(s))</b>					
<b>Name of Federal Candidate</b>	<b>Office Sought:</b> <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<b>State:</b> _____ <b>District:</b> _____	<b>Disbursement/Obligation For:</b> <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		
<b>Name of Federal Candidate</b>	<b>Office Sought:</b> <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<b>State:</b> _____ <b>District:</b> _____	<b>Disbursement/Obligation For:</b> <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		
<b>Name of Federal Candidate</b>	<b>Office Sought:</b> <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<b>State:</b> _____ <b>District:</b> _____	<b>Disbursement/Obligation For:</b> <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		
<b>SUBTOTAL of Disbursements/Obligations This Page (optional) .....</b>				52,712.50	
<b>TOTAL This Period (last page this line number only) .....</b> (carry total from last page to Line 10)				52,712.50	

28039911052

Federal Election Commission  
**ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS**  
 The FEC added this page to the end of this filing to indicate how it was received.

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> USPS First Class Mail	Postmarked
<input type="checkbox"/> USPS Registered/Certified	Postmarked (R/C)
<input type="checkbox"/> USPS Priority Mail	Postmarked
Delivery Confirmation™ or Signature Confirmation™ Label <input type="checkbox"/>	
<input type="checkbox"/> USPS Express Mail	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
Next Business Day Delivery <input type="checkbox"/>	
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input checked="" type="checkbox"/> Other (Specify): <i>Σ-Mail</i>	Date of Receipt or Postmarked <i>10/31/08</i>

  
 PREPARER

*11/3/08*  
 DATE PREPARED

28039911053