



Debbie Wamsley <wamsley.debbie@yahoo.com> on 08/10/2010 01:05:34 PM

To: 2022190174@fec.gov
cc:

Subject: FEC Form 9 Filing

Please see the attached
filing.



FEC Form 9 8-9-10.pdf

10030404060

**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

New Leadership In Colorado

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

11260 W 60th Avenue

(c) City, State and ZIP Code

Arvada

CO

80004

(d) Name of Employer or Principal Place of Business

(e) Occupation

2. FEC Identification Number

C

3. Is This Statement

New

or

Amended

4. Covering Period

MM / DD / YYYY
08 / 09 / 2010

through

MM / DD / YYYY
08 / 09 / 2010

5. (a) Date of Public Distribution(s) MM / DD / YYYY
08 / 09 / 2010

(b) Communication Title Special Interests/Reaction

6. The filer is a(n): (a) Individual (b) Unincorporated Organization (c) Qualified Nonprofit Corporation (11 CFR 114.10)

(d) Corporation, Labor Organization or Qualified Nonprofit Corporation making communications under 11 CFR 114.15

(e) Other, specify:

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

Debbie Wamsley

(b) Address (number and street)

11260 W. 60th Avenue

(c) City, State and ZIP Code

Arvada

CO

80004

(d) Name of Employer or Principal Place of Business

None

(e) Occupation

None

9. Total Donations This Statement

0.00

10. Total Disbursements/Obligations This Statement

13842.00

Under penalty of perjury, I certify that this statement is true, correct and complete.

TYPE OR PRINT NAME OF PERSON COMPLETING FORM

Debbie Wamsley

SIGNATURE

Debbie Wamsley

DATE

8/10/10

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

10030404061

List of Person(s) Sharing/Exercising Control

(use additional pages as necessary)

11. Person(s) Sharing/Exercising Control

A. (a) Name Debbie Wamsley	Transaction ID : F91.4098
(b) Address (number and street) 11260 W. 60th Avenue	
(c) City, State and Zip Code Arvada CO 80004	
(d) Name of Employer or Principal Place of Business None	(e) Occupation None

10030404062

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

A. Full Name (Last, First, Middle Initial) of Payee Fortune Media, Inc. <hr/> Mailing Address of Payee 527 Avenue B <hr/> <table style="width:100%; border: none;"> <tr> <td style="width:33%; border: none;">City</td> <td style="width:33%; border: none;">State</td> <td style="width:33%; border: none;">Zip Code</td> </tr> <tr> <td style="border: none;">Redondo Beach</td> <td style="border: none;">CA</td> <td style="border: none;">90277</td> </tr> </table> <hr/> <table style="width:100%; border: none;"> <tr> <td style="width:60%; border: none;">Name of Employer</td> <td style="width:40%; border: none;">Occupation</td> </tr> <tr> <td style="border: none;"></td> <td style="border: none;"></td> </tr> </table>			City	State	Zip Code	Redondo Beach	CA	90277	Name of Employer	Occupation			Date of Disbursement or Obligation <table style="width:100%; border: none;"> <tr> <td style="width:33%; border: 1px solid black; text-align: center;">M 08</td> <td style="width:33%; border: 1px solid black; text-align: center;">D 09</td> <td style="width:33%; border: 1px solid black; text-align: center;">Y 2010</td> </tr> </table> <hr/> Amount <div style="border: 1px solid black; padding: 2px; text-align: center;">13842.00</div> <hr/> Communication Date <table style="width:100%; border: none;"> <tr> <td style="width:33%; border: 1px solid black; text-align: center;">M 08</td> <td style="width:33%; border: 1px solid black; text-align: center;">D 09</td> <td style="width:33%; border: 1px solid black; text-align: center;">Y 2010</td> </tr> </table> <hr/> Transaction ID : F93.4123	M 08	D 09	Y 2010	M 08	D 09	Y 2010
City	State	Zip Code																	
Redondo Beach	CA	90277																	
Name of Employer	Occupation																		
M 08	D 09	Y 2010																	
M 08	D 09	Y 2010																	
Purpose of Disbursement (including title(s) of communication(s)) Radio Production/Advertising																			
Name of Federal Candidate MICHAEL F BENNET <hr/> F94.4102	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: CO District: 00 <hr/> Disbursement/Obligation For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____																	
Name of Federal Candidate _____	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: _____ District: _____ <hr/> Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____																	
Name of Federal Candidate _____	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: _____ District: _____ <hr/> Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____																	

10030404063

SUBTOTAL of Disbursement/Obligation This Page (optional)	<div style="border: 1px solid black; padding: 2px;">13842.00</div>
TOTAL This Period (last page this line number only) (carry total from last page to line 10)	<div style="border: 1px solid black; padding: 2px;">13842.00</div>

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.

10030404064

<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>E-MAIL</i>	Date of Receipt or Postmarked <i>8/10/10</i>
<i>Jul 10</i> PREPARER	<i>8/10/10</i> DATE PREPARED