26960545141

10/18/2006 20 : 34

# 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
WASHINGTON NARAL STAND UP FOR A PROCHOICE FUTURE

(b) Address (number and street) ☐ check if different than previously reported
611 FIRST AVE SUITE 456

(c) City, State and ZIP Code
SEATTLE WA 98104

(d) Name of Employer or Principal Place of Business

(e) Occupation

**2. FEC Identification Number**
C C00401455

**3. Is This Statement** ☒ **New** or ☐ **Amended**

**4. Covering Period** 10 18 2006 through 10 18 2006

**5. (a) Date of Public Distribution(s)** 10 18 2006 **(b) Communication Title** Election Mailing

**6. Is the Filer a Qualified Nonprofit Corporation under 11 CFR 114.10(c)?** 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
Karen S. Cooper

(b) Address (number and street)
611 1st Ave Suite 456

(c) City, State and ZIP Code
Seattle WA 98104

(d) Name of Employer or Principal Place of Business
NARAL

(e) Occupation
Executive Director

**9. Total Donations This Statement** .00

**10. Total Disbursements/Obligations This Statement** 6928.94

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 Karen S. Cooper

SIGNATURE _____ DATE 10/18/2006

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

FE3AN038

FEC FORM 9 (REV. 01/05)

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



**A.** Full Name (Last, First, Middle Initial) of Payee
PMA

Mailing Address of Payee
2400 W. Commodore Way

City: Seattle | State: WA | Zip Code: 98199

Name of Employer | Occupation

Purpose of Disbursement (including title(s) of communication(s))
Mailing

Date of Disbursement or Obligation: M M 10 D D 18 Y Y Y Y 2006

Amount: 894.70

Communication Date: M M 10 D D 18 Y Y Y Y 2006

Transaction ID : SBF93.000001

Name of Federal Candidate: Maria Cantwell
Office Sought: X House / Senate / President
State: WA
District:
Disbursement/Obligation For: 2006
Primary X General
Other (specify)
F94.000001

Name of Federal Candidate: Darcy Burner
Office Sought: X House / Senate / President
State: WA
District: 8
Disbursement/Obligation For: 2006
Primary X General
Other (specify)
F94.000005

Name of Federal Candidate
Office Sought: House / Senate / President
State:
District:
Disbursement/Obligation For:
Primary General
Other (specify)

**B.** Full Name (Last, First, Middle Initial) of Payee
Susan Picatti Design

Mailing Address of Payee
711 20th Ave E

City: Seattle | State: WA | Zip Code: 98112

Name of Employer | Occupation

Purpose of Disbursement (including title(s) of communication(s))
Design

Date of Disbursement or Obligation: M M 10 D D 18 Y Y Y Y 2006

Amount: 126.67

Communication Date: M M 10 D D 18 Y Y Y Y 2006

Transaction ID : SBF93.000002

Name of Federal Candidate: Maria Cantwell
Office Sought: X House / Senate / President
State: WA
District:
Disbursement/Obligation For: 2006
Primary X General
Other (specify)
F94.000002

Name of Federal Candidate: Darcy Burner
Office Sought: X House / Senate / President
State: WA
District: 8
Disbursement/Obligation For: 2006
Primary X General
Other (specify)
F94.000006

Name of Federal Candidate
Office Sought: House / Senate / President
State:
District:
Disbursement/Obligation For:
Primary General
Other (specify)

**SUBTOTAL** of Disbursement/Obligation This Page (optional) ..... 1021.37

**TOTAL** This Period (last page this line number only) .....
(carry total from last page to line 10)

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



**A.** Full Name (Last, First, Middle Initial) of Payee
Overnight Printing

Mailing Address of Payee
1025 Stewart St.

City: Seattle | State: WA | Zip Code: 98101

Name of Employer | Occupation

Date of Disbursement or Obligation: 10 / 18 / 2006

Amount: 1341.41

Communication Date: 10 / 18 / 2006

Transaction ID : SBF93.000003

Purpose of Disbursement (including title(s) of communication(s))
Printing

Name of Federal Candidate: Maria Cantwell
Office Sought: X House / Senate / President
State: WA
District:
Disbursement/Obligation For: 2006
Primary X General
Other (specify)
F94.000003

Name of Federal Candidate: Darcy Burner
Office Sought: X House / Senate / President
State: WA
District: 8
Disbursement/Obligation For: 2006
Primary X General
Other (specify)
F94.000007

Name of Federal Candidate
Office Sought: House / Senate / President
State:
District:
Disbursement/Obligation For:
Primary General
Other (specify)

**B.** Full Name (Last, First, Middle Initial) of Payee
United States Postal Service

Mailing Address of Payee
BMAU 98134-9405 (134)

City: Seattle | State: WA | Zip Code: 98134

Name of Employer | Occupation

Date of Disbursement or Obligation: 10 / 18 / 2006

Amount: 4568.16

Communication Date: 10 / 18 / 2006

Transaction ID : SBF93.000004

Purpose of Disbursement (including title(s) of communication(s))
Postage

Name of Federal Candidate: Maria Cantwell
Office Sought: X House / Senate / President
State: WA
District:
Disbursement/Obligation For: 2006
Primary X General
Other (specify)
F94.000004

Name of Federal Candidate: Darcy Burner
Office Sought: X House / Senate / President
State: WA
District:
Disbursement/Obligation For: 2006
Primary X General
Other (specify)
F94.000008

Name of Federal Candidate
Office Sought: House / Senate / President
State:
District:
Disbursement/Obligation For:
Primary General
Other (specify)

**SUBTOTAL** of Disbursement/Obligation This Page (optional) ..... 5907.57

**TOTAL** This Period (last page this line number only) ..... 6928.94
(carry total from last page to line 10)