

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

Defenders of Wildlife Action Fund 527

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

1130 17th St NW

(c) City, State and ZIP Code

Washington

DC

20036

2. FEC Identification Number

C C30001010

(d) Name of Employer or Principal Place of Business

(e) Occupation

3. Is This Statement **New**
or

Amended

4. Covering Period

M M / D D / Y Y Y Y
1 0 / 0 9 / 2 0 0 8

through

M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 0 8

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

M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 0 8

(b) Communication Title Lawsuit

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

William Lutz

(b) Address (number and street)

1130 17th St NW

(c) City, State and ZIP Code

Washington

DC

20036

(d) Name of Employer or Principal Place of Business

Defenders of Wildlife Action F

(e) Occupation

Senior Director

9. Total Donations This Statement

0.00

10. Total Disbursements/Obligations This Statement

98982.88

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

TYPE OR PRINT NAME OF PERSON COMPLETING FORM William Lutz

SIGNATURE Electronically Filed by William Lutz

DATE 10/22/2008

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

SCHEDULE 9-B

Disbursement(s) Made or Obligations

A. Full Name (Last, First, Middle Initial) of Payee Abar Hutton Media <hr/> Mailing Address of Payee 6190 Grovedale Court, Suite 200 <hr/> <table style="width:100%; border: none;"> <tr> <td style="width:33%;">City</td> <td style="width:33%;">State</td> <td style="width:33%;">Zip Code</td> </tr> <tr> <td>Alexandria</td> <td>VA</td> <td>22310</td> </tr> </table> <hr/> <table style="width:100%; border: none;"> <tr> <td style="width:60%;">Name of Employer</td> <td>Occupation</td> </tr> </table>	City	State	Zip Code	Alexandria	VA	22310	Name of Employer	Occupation	Date of Disbursement or Obligation <table style="width:100%; border: none;"> <tr> <td style="text-align: center;">M M / D D / Y Y Y Y</td> </tr> <tr> <td style="text-align: center;">1 0 / 1 7 / 2 0 0 8</td> </tr> </table> Amount <table style="width:100%; border: none;"> <tr> <td style="text-align: right;">85000.00</td> </tr> </table> Communication Date <table style="width:100%; border: none;"> <tr> <td style="text-align: center;">M M / D D / Y Y Y Y</td> </tr> <tr> <td style="text-align: center;">1 0 / 2 1 / 2 0 0 8</td> </tr> </table> Transaction ID : F93.4206	M M / D D / Y Y Y Y	1 0 / 1 7 / 2 0 0 8	85000.00	M M / D D / Y Y Y Y	1 0 / 2 1 / 2 0 0 8
City	State	Zip Code												
Alexandria	VA	22310												
Name of Employer	Occupation													
M M / D D / Y Y Y Y														
1 0 / 1 7 / 2 0 0 8														
85000.00														
M M / D D / Y Y Y Y														
1 0 / 2 1 / 2 0 0 8														

Purpose of Disbursement (including title(s) of communication(s)) TV ad buy			
Name of Federal Candidate JOHN S. MCCAIN	Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: 00 Disbursement/Obligation For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
F94.4208			
Name of Federal Candidate	Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: _____ District: _____ 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: _____ Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

B. Full Name (Last, First, Middle Initial) of Payee Asian Grill and Lounge <hr/> Mailing Address of Payee 3640 S. Mason #12 <hr/> <table style="width:100%; border: none;"> <tr> <td style="width:33%;">City</td> <td style="width:33%;">State</td> <td style="width:33%;">Zip Code</td> </tr> <tr> <td>Fort Collins</td> <td>CO</td> <td>80525</td> </tr> </table> <hr/> <table style="width:100%; border: none;"> <tr> <td style="width:60%;">Name of Employer</td> <td>Occupation</td> </tr> </table>	City	State	Zip Code	Fort Collins	CO	80525	Name of Employer	Occupation	Date of Disbursement or Obligation <table style="width:100%; border: none;"> <tr> <td style="text-align: center;">M M / D D / Y Y Y Y</td> </tr> <tr> <td style="text-align: center;">1 0 / 2 1 / 2 0 0 8</td> </tr> </table> Amount <table style="width:100%; border: none;"> <tr> <td style="text-align: right;">62.00</td> </tr> </table> Communication Date <table style="width:100%; border: none;"> <tr> <td style="text-align: center;">M M / D D / Y Y Y Y</td> </tr> <tr> <td style="text-align: center;">1 0 / 2 1 / 2 0 0 8</td> </tr> </table> Transaction ID : F93.4225	M M / D D / Y Y Y Y	1 0 / 2 1 / 2 0 0 8	62.00	M M / D D / Y Y Y Y	1 0 / 2 1 / 2 0 0 8
City	State	Zip Code												
Fort Collins	CO	80525												
Name of Employer	Occupation													
M M / D D / Y Y Y Y														
1 0 / 2 1 / 2 0 0 8														
62.00														
M M / D D / Y Y Y Y														
1 0 / 2 1 / 2 0 0 8														

Purpose of Disbursement (including title(s) of communication(s)) dinner for canvassers			
Name of Federal Candidate MARILYN MUSGRAVE	Office Sought:	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: CO District: 04 Disbursement/Obligation For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
F94.4101			
Name of Federal Candidate	Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: _____ District: _____ 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: _____ Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

SUBTOTAL of Disbursement/Obligation This Page (optional)	85062.00
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 AT&T <hr/> Mailing Address of Payee PO Box 8100 <hr/> <table style="width:100%; border: none;"> <tr> <td style="width:33%;">City</td> <td style="width:33%;">State</td> <td style="width:33%;">Zip Code</td> </tr> <tr> <td>Aurora</td> <td>IL</td> <td>60507</td> </tr> </table> <hr/> <table style="width:100%; border: none;"> <tr> <td style="width:60%;">Name of Employer</td> <td style="width:40%;">Occupation</td> </tr> </table>	City	State	Zip Code	Aurora	IL	60507	Name of Employer	Occupation	Date of Disbursement or Obligation <table style="width:100%; border: none;"> <tr> <td style="width:33%; text-align: center;">M M / D D / Y Y Y Y</td> </tr> <tr> <td style="text-align: center;">1 0 / 0 9 / 2 0 0 8</td> </tr> </table> Amount <table style="width:100%; border: none;"> <tr> <td style="text-align: right;">100.00</td> </tr> </table> Communication Date <table style="width:100%; border: none;"> <tr> <td style="width:33%; text-align: center;">M M / D D / Y Y Y Y</td> </tr> <tr> <td style="text-align: center;">1 0 / 2 1 / 2 0 0 8</td> </tr> </table> Transaction ID : F93.4177	M M / D D / Y Y Y Y	1 0 / 0 9 / 2 0 0 8	100.00	M M / D D / Y Y Y Y	1 0 / 2 1 / 2 0 0 8
City	State	Zip Code												
Aurora	IL	60507												
Name of Employer	Occupation													
M M / D D / Y Y Y Y														
1 0 / 0 9 / 2 0 0 8														
100.00														
M M / D D / Y Y Y Y														
1 0 / 2 1 / 2 0 0 8														

Purpose of Disbursement (including title(s) of communication(s))
 cell phone bill

Name of Federal Candidate MARILYN MUSGRAVE	Office Sought:	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: CO	District: 04	Disbursement/Obligation For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
F94.4101	Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: _____	District: _____	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: _____	Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

B. Full Name (Last, First, Middle Initial) of Payee Brother Mel's BBQ <hr/> Mailing Address of Payee 111 W. Prospect #C <hr/> <table style="width:100%; border: none;"> <tr> <td style="width:33%;">City</td> <td style="width:33%;">State</td> <td style="width:33%;">Zip Code</td> </tr> <tr> <td>Fort Collins</td> <td>CO</td> <td></td> </tr> </table> <hr/> <table style="width:100%; border: none;"> <tr> <td style="width:60%;">Name of Employer</td> <td style="width:40%;">Occupation</td> </tr> </table>	City	State	Zip Code	Fort Collins	CO		Name of Employer	Occupation	Date of Disbursement or Obligation <table style="width:100%; border: none;"> <tr> <td style="width:33%; text-align: center;">M M / D D / Y Y Y Y</td> </tr> <tr> <td style="text-align: center;">1 0 / 1 5 / 2 0 0 8</td> </tr> </table> Amount <table style="width:100%; border: none;"> <tr> <td style="text-align: right;">30.94</td> </tr> </table> Communication Date <table style="width:100%; border: none;"> <tr> <td style="width:33%; text-align: center;">M M / D D / Y Y Y Y</td> </tr> <tr> <td style="text-align: center;">1 0 / 2 1 / 2 0 0 8</td> </tr> </table> Transaction ID : F93.4196	M M / D D / Y Y Y Y	1 0 / 1 5 / 2 0 0 8	30.94	M M / D D / Y Y Y Y	1 0 / 2 1 / 2 0 0 8
City	State	Zip Code												
Fort Collins	CO													
Name of Employer	Occupation													
M M / D D / Y Y Y Y														
1 0 / 1 5 / 2 0 0 8														
30.94														
M M / D D / Y Y Y Y														
1 0 / 2 1 / 2 0 0 8														

Purpose of Disbursement (including title(s) of communication(s))
 lunch for volunteers

Name of Federal Candidate MARILYN MUSGRAVE	Office Sought:	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: CO	District: 04	Disbursement/Obligation For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
F94.4101	Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: _____	District: _____	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: _____	Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

SUBTOTAL of Disbursement/Obligation This Page (optional)	130.94
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 Country Store <hr/> Mailing Address of Payee 4524 S. College Avenue <hr/> City State Zip Code Fort Collins CO <hr/> Name of Employer Occupation	Date of Disbursement or Obligation <table border="1" style="width:100%; text-align: center;"> <tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td>1</td><td>0</td><td></td><td>2</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td></tr> </table> Amount <table border="1" style="width:100%; text-align: center;"> <tr><td colspan="10">52.72</td></tr> </table> Communication Date <table border="1" style="width:100%; text-align: center;"> <tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td>1</td><td>0</td><td></td><td>2</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td></tr> </table> Transaction ID : F93.4203	M	M	/	D	D	/	Y	Y	Y	Y	1	0		2	0		2	0	0	8	52.72										M	M	/	D	D	/	Y	Y	Y	Y	1	0		2	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y																																										
1	0		2	0		2	0	0	8																																										
52.72																																																			
M	M	/	D	D	/	Y	Y	Y	Y																																										
1	0		2	1		2	0	0	8																																										

Purpose of Disbursement (including title(s) of communication(s)) gas			
Name of Federal Candidate MARILYN MUSGRAVE F94.4101	Office Sought:	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: CO District: 04 Disbursement/Obligation For: 2008 <input type="checkbox"/> Primary <input checked="" 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: _____ 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: _____ Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

B. Full Name (Last, First, Middle Initial) of Payee Liam Flynn <hr/> Mailing Address of Payee 300 East Rich St #914 <hr/> City State Zip Code Columbus OH 43215 <hr/> Name of Employer Occupation Defenders of Wildlife Action F Field staff	Date of Disbursement or Obligation <table border="1" style="width:100%; text-align: center;"> <tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td>1</td><td>0</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td></tr> </table> Amount <table border="1" style="width:100%; text-align: center;"> <tr><td colspan="10">800.00</td></tr> </table> Communication Date <table border="1" style="width:100%; text-align: center;"> <tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td>1</td><td>0</td><td></td><td>2</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td></tr> </table> Transaction ID : F93.4216	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	5		2	0	0	8	800.00										M	M	/	D	D	/	Y	Y	Y	Y	1	0		2	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y																																										
1	0		1	5		2	0	0	8																																										
800.00																																																			
M	M	/	D	D	/	Y	Y	Y	Y																																										
1	0		2	1		2	0	0	8																																										

Purpose of Disbursement (including title(s) of communication(s)) salary			
Name of Federal Candidate MARILYN MUSGRAVE F94.4101	Office Sought:	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: CO District: 04 Disbursement/Obligation For: 2008 <input type="checkbox"/> Primary <input checked="" 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: _____ 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: _____ Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

SUBTOTAL of Disbursement/Obligation This Page (optional)	<table border="1" style="width:100%; text-align: center;"><tr><td>852.72</td></tr></table>	852.72
852.72		
TOTAL This Period (last page this line number only) (carry total from last page to line 10)	<table border="1" style="width:100%; text-align: center;"><tr><td> </td></tr></table>	

SCHEDULE 9-B

Disbursement(s) Made or Obligations

<p>A. Full Name (Last, First, Middle Initial) of Payee Fort Collins Post Office</p> <hr/> <p>Mailing Address of Payee 301 E Boardwalk</p> <hr/> <table style="width:100%; border: none;"> <tr> <td style="width:33%;">City</td> <td style="width:33%;">State</td> <td style="width:33%;">Zip Code</td> </tr> <tr> <td>Fort Collins</td> <td>CO</td> <td>80525</td> </tr> </table> <hr/> <p>Name of Employer _____ Occupation _____</p> <hr/> <p>Purpose of Disbursement (including title(s) of communication(s)) postage</p>	City	State	Zip Code	Fort Collins	CO	80525	<p>Date of Disbursement or Obligation <table style="width:100%; border: none;"> <tr> <td style="text-align:center;">M M / D D / Y Y Y Y</td> </tr> <tr> <td style="text-align:center;">1 0 / 1 8 / 2 0 0 8</td> </tr> </table> </p> <p>Amount <table style="width:100%; border: none;"> <tr> <td style="text-align:right;">1.51</td> </tr> </table> </p> <p>Communication Date <table style="width:100%; border: none;"> <tr> <td style="text-align:center;">M M / D D / Y Y Y Y</td> </tr> <tr> <td style="text-align:center;">1 0 / 2 1 / 2 0 0 8</td> </tr> </table> </p> <p>Transaction ID : F93.4201</p>	M M / D D / Y Y Y Y	1 0 / 1 8 / 2 0 0 8	1.51	M M / D D / Y Y Y Y	1 0 / 2 1 / 2 0 0 8													
City	State	Zip Code																							
Fort Collins	CO	80525																							
M M / D D / Y Y Y Y																									
1 0 / 1 8 / 2 0 0 8																									
1.51																									
M M / D D / Y Y Y Y																									
1 0 / 2 1 / 2 0 0 8																									
<table style="width:100%; border: none;"> <tr> <td style="width:33%;">Name of Federal Candidate MARILYN MUSGRAVE</td> <td style="width:15%;">Office Sought:</td> <td style="width:15%;"><input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</td> <td style="width:10%;">State: <u>CO</u></td> <td style="width:10%;">District: <u>04</u></td> <td style="width:33%;">Disbursement/Obligation For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____</td> </tr> <tr> <td>F94.4101</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Name of Federal Candidate</td> <td>Office Sought:</td> <td><input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</td> <td>State: _____</td> <td>District: _____</td> <td>Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____</td> </tr> <tr> <td>Name of Federal Candidate</td> <td>Office Sought:</td> <td><input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</td> <td>State: _____</td> <td>District: _____</td> <td>Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____</td> </tr> </table>	Name of Federal Candidate MARILYN MUSGRAVE	Office Sought:	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: <u>CO</u>	District: <u>04</u>	Disbursement/Obligation For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	F94.4101						Name of Federal Candidate	Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: _____	District: _____	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: _____	Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
Name of Federal Candidate MARILYN MUSGRAVE	Office Sought:	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: <u>CO</u>	District: <u>04</u>	Disbursement/Obligation For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____																				
F94.4101																									
Name of Federal Candidate	Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: _____	District: _____	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: _____	Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____																				
<p>B. Full Name (Last, First, Middle Initial) of Payee Greg Gordon</p> <hr/> <p>Mailing Address of Payee 3800 East 29th St #5</p> <hr/> <table style="width:100%; border: none;"> <tr> <td style="width:33%;">City</td> <td style="width:33%;">State</td> <td style="width:33%;">Zip Code</td> </tr> <tr> <td>Bryan</td> <td>TX</td> <td>77802</td> </tr> </table> <hr/> <p>Name of Employer _____ Occupation _____ Defenders of Wildlife Action F Field staff</p> <hr/> <p>Purpose of Disbursement (including title(s) of communication(s)) salary</p>	City	State	Zip Code	Bryan	TX	77802	<p>Date of Disbursement or Obligation <table style="width:100%; border: none;"> <tr> <td style="text-align:center;">M M / D D / Y Y Y Y</td> </tr> <tr> <td style="text-align:center;">1 0 / 1 5 / 2 0 0 8</td> </tr> </table> </p> <p>Amount <table style="width:100%; border: none;"> <tr> <td style="text-align:right;">960.00</td> </tr> </table> </p> <p>Communication Date <table style="width:100%; border: none;"> <tr> <td style="text-align:center;">M M / D D / Y Y Y Y</td> </tr> <tr> <td style="text-align:center;">1 0 / 2 1 / 2 0 0 8</td> </tr> </table> </p> <p>Transaction ID : F93.4215</p>	M M / D D / Y Y Y Y	1 0 / 1 5 / 2 0 0 8	960.00	M M / D D / Y Y Y Y	1 0 / 2 1 / 2 0 0 8													
City	State	Zip Code																							
Bryan	TX	77802																							
M M / D D / Y Y Y Y																									
1 0 / 1 5 / 2 0 0 8																									
960.00																									
M M / D D / Y Y Y Y																									
1 0 / 2 1 / 2 0 0 8																									
<table style="width:100%; border: none;"> <tr> <td style="width:33%;">Name of Federal Candidate MARILYN MUSGRAVE</td> <td style="width:15%;">Office Sought:</td> <td style="width:15%;"><input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</td> <td style="width:10%;">State: <u>CO</u></td> <td style="width:10%;">District: <u>04</u></td> <td style="width:33%;">Disbursement/Obligation For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____</td> </tr> <tr> <td>F94.4101</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Name of Federal Candidate</td> <td>Office Sought:</td> <td><input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</td> <td>State: _____</td> <td>District: _____</td> <td>Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____</td> </tr> <tr> <td>Name of Federal Candidate</td> <td>Office Sought:</td> <td><input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</td> <td>State: _____</td> <td>District: _____</td> <td>Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____</td> </tr> </table>	Name of Federal Candidate MARILYN MUSGRAVE	Office Sought:	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: <u>CO</u>	District: <u>04</u>	Disbursement/Obligation For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	F94.4101						Name of Federal Candidate	Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: _____	District: _____	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: _____	Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
Name of Federal Candidate MARILYN MUSGRAVE	Office Sought:	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: <u>CO</u>	District: <u>04</u>	Disbursement/Obligation For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____																				
F94.4101																									
Name of Federal Candidate	Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: _____	District: _____	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: _____	Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____																				
<p>SUBTOTAL of Disbursement/Obligation This Page (optional)</p>					<table style="width:100%; border: none;"> <tr> <td style="text-align:right;">961.51</td> </tr> </table>	961.51																			
961.51																									
<p>TOTAL This Period (last page this line number only) (carry total from last page to line 10)</p>																									

SCHEDULE 9-B

Disbursement(s) Made or Obligations

A. Full Name (Last, First, Middle Initial) of Payee Green Logic			Date of Disbursement or Obligation M M / D D / Y Y Y Y 1 0 / 1 1 / 2 0 0 8		
Mailing Address of Payee 261 Linden St			Amount 8.54		
City Fort Collins	State CO	Zip Code 80524	Communication Date M M / D D / Y Y Y Y 1 0 / 2 1 / 2 0 0 8		
Name of Employer		Occupation			
Transaction ID : F93.4185					

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

Name of Federal Candidate MARILYN MUSGRAVE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: CO District: 04	Disbursement/Obligation For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
F94.4101			
Name of Federal Candidate	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: _____ District: _____	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: _____	Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

B. Full Name (Last, First, Middle Initial) of Payee Johnson's Corner			Date of Disbursement or Obligation M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 8		
Mailing Address of Payee 2842 SE Frontage Rd			Amount 55.15		
City Loveland	State CO	Zip Code 80537	Communication Date M M / D D / Y Y Y Y 1 0 / 2 1 / 2 0 0 8		
Name of Employer		Occupation			
Transaction ID : F93.4192					

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

Name of Federal Candidate MARILYN MUSGRAVE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: CO District: 04	Disbursement/Obligation For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
F94.4101			
Name of Federal Candidate	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: _____ District: _____	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: _____	Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

SUBTOTAL of Disbursement/Obligation This Page (optional)	63.69
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

<p>A. Full Name (Last, First, Middle Initial) of Payee KG Stores</p> <hr/> <p>Mailing Address of Payee 1013 Center Avenue</p> <hr/> <table style="width:100%; border: none;"> <tr> <td style="width:33%;">City</td> <td style="width:33%;">State</td> <td style="width:33%;">Zip Code</td> </tr> <tr> <td>Fort Collins</td> <td>CO</td> <td>80524</td> </tr> </table> <hr/> <p>Name of Employer _____ Occupation _____</p> <hr/> <p>Purpose of Disbursement (including title(s) of communication(s)) gas</p> <hr/> <table style="width:100%; border: none;"> <tr> <td style="width:33%;">Name of Federal Candidate MARILYN MUSGRAVE</td> <td style="width:15%;">Office Sought:</td> <td style="width:15%;"><input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</td> <td style="width:10%;">State: <u>CO</u></td> <td style="width:10%;">District: <u>04</u></td> <td style="width:17%;">Disbursement/Obligation For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____</td> </tr> <tr> <td>F94.4101</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </table> <hr/> <table style="width:100%; border: none;"> <tr> <td style="width:33%;">Name of Federal Candidate</td> <td style="width:15%;">Office Sought:</td> <td style="width:15%;"><input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</td> <td style="width:10%;">State: _____</td> <td style="width:10%;">District: _____</td> <td style="width:17%;">Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____</td> </tr> </table> <hr/> <table style="width:100%; border: none;"> <tr> <td style="width:33%;">Name of Federal Candidate</td> <td style="width:15%;">Office Sought:</td> <td style="width:15%;"><input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</td> <td style="width:10%;">State: _____</td> <td style="width:10%;">District: _____</td> <td style="width:17%;">Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____</td> </tr> </table>	City	State	Zip Code	Fort Collins	CO	80524	Name of Federal Candidate MARILYN MUSGRAVE	Office Sought:	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: <u>CO</u>	District: <u>04</u>	Disbursement/Obligation For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	F94.4101						Name of Federal Candidate	Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: _____	District: _____	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: _____	Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	<p>Date of Disbursement or Obligation <table style="width:100%; border: none;"> <tr> <td style="width:33%; text-align: center;">M M /</td> <td style="width:33%; text-align: center;">D D /</td> <td style="width:33%; text-align: center;">Y Y Y Y</td> </tr> <tr> <td style="text-align: center;">1 0 /</td> <td style="text-align: center;">2 1 /</td> <td style="text-align: center;">2 0 0 8</td> </tr> </table> </p> <p>Amount <table style="width:100%; border: none;"> <tr> <td style="width:80%;"></td> <td style="width:20%; text-align: right;">53.34</td> </tr> </table> </p> <p>Communication Date <table style="width:100%; border: none;"> <tr> <td style="width:33%; text-align: center;">M M /</td> <td style="width:33%; text-align: center;">D D /</td> <td style="width:33%; text-align: center;">Y Y Y Y</td> </tr> <tr> <td style="text-align: center;">1 0 /</td> <td style="text-align: center;">2 1 /</td> <td style="text-align: center;">2 0 0 8</td> </tr> </table> </p> <p>Transaction ID : F93.4223</p>	M M /	D D /	Y Y Y Y	1 0 /	2 1 /	2 0 0 8		53.34	M M /	D D /	Y Y Y Y	1 0 /	2 1 /	2 0 0 8
City	State	Zip Code																																											
Fort Collins	CO	80524																																											
Name of Federal Candidate MARILYN MUSGRAVE	Office Sought:	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: <u>CO</u>	District: <u>04</u>	Disbursement/Obligation For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____																																								
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Name of Federal Candidate	Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: _____	District: _____	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: _____	Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____																																								
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M M /	D D /	Y Y Y Y																																											
1 0 /	2 1 /	2 0 0 8																																											
<p>B. Full Name (Last, First, Middle Initial) of Payee David Kirk</p> <hr/> <p>Mailing Address of Payee 3017 Stevenson Place NW</p> <hr/> <table style="width:100%; border: none;"> <tr> <td style="width:33%;">City</td> <td style="width:33%;">State</td> <td style="width:33%;">Zip Code</td> </tr> <tr> <td>Washington</td> <td>DC</td> <td>20015</td> </tr> </table> <hr/> <p>Name of Employer _____ Occupation _____ Defenders of Willdife Action F _____ Communications _____</p> <hr/> <p>Purpose of Disbursement (including title(s) of communication(s)) salary</p> <hr/> <table style="width:100%; border: none;"> <tr> <td style="width:33%;">Name of Federal Candidate MARILYN MUSGRAVE</td> <td style="width:15%;">Office Sought:</td> <td style="width:15%;"><input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</td> <td style="width:10%;">State: <u>CO</u></td> <td style="width:10%;">District: <u>04</u></td> <td style="width:17%;">Disbursement/Obligation For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____</td> </tr> <tr> <td>F94.4101</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </table> <hr/> <table style="width:100%; border: none;"> <tr> <td style="width:33%;">Name of Federal Candidate</td> <td style="width:15%;">Office Sought:</td> <td style="width:15%;"><input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</td> <td style="width:10%;">State: _____</td> <td style="width:10%;">District: _____</td> <td style="width:17%;">Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____</td> </tr> </table> <hr/> <table style="width:100%; border: none;"> <tr> <td style="width:33%;">Name of Federal Candidate</td> <td style="width:15%;">Office Sought:</td> <td style="width:15%;"><input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</td> <td style="width:10%;">State: _____</td> <td style="width:10%;">District: _____</td> <td style="width:17%;">Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____</td> </tr> </table>	City	State	Zip Code	Washington	DC	20015	Name of Federal Candidate MARILYN MUSGRAVE	Office Sought:	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: <u>CO</u>	District: <u>04</u>	Disbursement/Obligation For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	F94.4101						Name of Federal Candidate	Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: _____	District: _____	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: _____	Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	<p>Date of Disbursement or Obligation <table style="width:100%; border: none;"> <tr> <td style="width:33%; text-align: center;">M M /</td> <td style="width:33%; text-align: center;">D D /</td> <td style="width:33%; text-align: center;">Y Y Y Y</td> </tr> <tr> <td style="text-align: center;">1 0 /</td> <td style="text-align: center;">1 5 /</td> <td style="text-align: center;">2 0 0 8</td> </tr> </table> </p> <p>Amount <table style="width:100%; border: none;"> <tr> <td style="width:80%;"></td> <td style="width:20%; text-align: right;">560.00</td> </tr> </table> </p> <p>Communication Date <table style="width:100%; border: none;"> <tr> <td style="width:33%; text-align: center;">M M /</td> <td style="width:33%; text-align: center;">D D /</td> <td style="width:33%; text-align: center;">Y Y Y Y</td> </tr> <tr> <td style="text-align: center;">1 0 /</td> <td style="text-align: center;">2 1 /</td> <td style="text-align: center;">2 0 0 8</td> </tr> </table> </p> <p>Transaction ID : F93.4213</p>	M M /	D D /	Y Y Y Y	1 0 /	1 5 /	2 0 0 8		560.00	M M /	D D /	Y Y Y Y	1 0 /	2 1 /	2 0 0 8
City	State	Zip Code																																											
Washington	DC	20015																																											
Name of Federal Candidate MARILYN MUSGRAVE	Office Sought:	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: <u>CO</u>	District: <u>04</u>	Disbursement/Obligation For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____																																								
F94.4101																																													
Name of Federal Candidate	Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: _____	District: _____	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: _____	Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____																																								
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1 0 /	2 1 /	2 0 0 8																																											
<p>SUBTOTAL of Disbursement/Obligation This Page (optional)</p> <hr/> <p>TOTAL This Period (last page this line number only) (carry total from last page to line 10)</p>		<table style="width:100%; border: none;"> <tr> <td style="width:80%;"></td> <td style="width:20%; text-align: right;">613.34</td> </tr> <tr> <td style="width:80%;"></td> <td style="width:20%;"></td> </tr> </table>		613.34																																									
	613.34																																												

SCHEDULE 9-B

Disbursement(s) Made or Obligations

A. Full Name (Last, First, Middle Initial) of Payee KMart			Date of Disbursement or Obligation M M / D D / Y Y Y Y 1 0 / 1 1 / 2 0 0 8		
Mailing Address of Payee 2535 S. College			Amount 33.15		
City Fort Collins	State CO	Zip Code 80525	Communication Date M M / D D / Y Y Y Y 1 0 / 2 1 / 2 0 0 8		
Name of Employer		Occupation			
Transaction ID : F93.4183					

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

Name of Federal Candidate MARILYN MUSGRAVE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: CO District: 04	Disbursement/Obligation For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
F94.4101			
Name of Federal Candidate	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: _____ District: _____	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: _____	Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

B. Full Name (Last, First, Middle Initial) of Payee Rhey Lee			Date of Disbursement or Obligation M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 8		
Mailing Address of Payee 2733 Andreo Ave			Amount 1920.00		
City Torrance	State CA	Zip Code 90501	Communication Date M M / D D / Y Y Y Y 1 0 / 2 1 / 2 0 0 8		
Name of Employer Defenders of Wildlife Action F		Occupation Field staff			
Transaction ID : F93.4214					

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

Name of Federal Candidate MARILYN MUSGRAVE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: CO District: 04	Disbursement/Obligation For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
F94.4101			
Name of Federal Candidate	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: _____ District: _____	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: _____	Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

SUBTOTAL of Disbursement/Obligation This Page (optional)	1953.15
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 William Lutz				Date of Disbursement or Obligation <table border="1" style="width:100%; text-align: center;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>				M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	5		2	0	0	8		
M	M	/	D	D	/	Y	Y	Y	Y																				
1	0		1	5		2	0	0	8																				
Mailing Address of Payee 1130 17th St NW				Amount <table border="1" style="width:100%; text-align: center;"> <tr> <td colspan="10">14.30</td> </tr> </table>				14.30																					
14.30																													
City Washington		State DC		Zip Code 20036		Communication Date <table border="1" style="width:100%; text-align: center;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>2</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>				M	M	/	D	D	/	Y	Y	Y	Y	1	0		2	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y																				
1	0		2	1		2	0	0	8																				
Name of Employer Defenders of Wildlife Action F		Occupation Senior Director		Transaction ID : F93.4218																									
Purpose of Disbursement (including title(s) of communication(s)) salary																													
Name of Federal Candidate MARILYN MUSGRAVE F94.4101			Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		State: <u>CO</u> District: <u>04</u>		Disbursement/Obligation For: 2008 <input type="checkbox"/> Primary <input checked="" 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: _____		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: _____		Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____																						
B. Full Name (Last, First, Middle Initial) of Payee Office Depot				Date of Disbursement or Obligation <table border="1" style="width:100%; text-align: center;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>1</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>						M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	6		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y																				
1	0		1	6		2	0	0	8																				
Mailing Address of Payee 3500 S College Ave				Amount <table border="1" style="width:100%; text-align: center;"> <tr> <td colspan="10">115.14</td> </tr> </table>						115.14																			
115.14																													
City Fort Collins		State CO		Zip Code 80525		Communication Date <table border="1" style="width:100%; text-align: center;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>2</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>				M	M	/	D	D	/	Y	Y	Y	Y	1	0		2	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y																				
1	0		2	1		2	0	0	8																				
Name of Employer		Occupation		Transaction ID : F93.4199																									
Purpose of Disbursement (including title(s) of communication(s)) toner																													
Name of Federal Candidate MARILYN MUSGRAVE F94.4101			Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		State: <u>CO</u> District: <u>04</u>		Disbursement/Obligation For: 2008 <input type="checkbox"/> Primary <input checked="" 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: _____		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: _____		Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____																						
SUBTOTAL of Disbursement/Obligation This Page (optional)						<table border="1" style="width:100%; text-align: center;"> <tr> <td colspan="10">129.44</td> </tr> </table>				129.44																			
129.44																													
TOTAL This Period (last page this line number only) (carry total from last page to line 10)						<table border="1" style="width:100%; text-align: center;"> <tr> <td colspan="10"> </td> </tr> </table>																							

SCHEDULE 9-B

Disbursement(s) Made or Obligations

A. Full Name (Last, First, Middle Initial) of Payee Packanmail <hr/> Mailing Address of Payee 2519 S Shields <hr/> <table style="width:100%; border: none;"> <tr> <td style="width:33%;">City</td> <td style="width:33%;">State</td> <td style="width:33%;">Zip Code</td> </tr> <tr> <td>Fort Collins</td> <td>CO</td> <td>80526</td> </tr> </table> <hr/> Name of Employer _____ Occupation _____	City	State	Zip Code	Fort Collins	CO	80526	Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px;"> <table style="width:100%; border: none;"> <tr> <td style="text-align: center;">M M / D D / Y Y Y Y</td> </tr> <tr> <td style="text-align: center;">1 0 / 1 1 / 2 0 0 8</td> </tr> </table> </div> Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">60.94</div> Communication Date <div style="border: 1px solid black; padding: 2px;"> <table style="width:100%; border: none;"> <tr> <td style="text-align: center;">M M / D D / Y Y Y Y</td> </tr> <tr> <td style="text-align: center;">1 0 / 2 1 / 2 0 0 8</td> </tr> </table> </div> Transaction ID : F93.4187	M M / D D / Y Y Y Y	1 0 / 1 1 / 2 0 0 8	M M / D D / Y Y Y Y	1 0 / 2 1 / 2 0 0 8
City	State	Zip Code									
Fort Collins	CO	80526									
M M / D D / Y Y Y Y											
1 0 / 1 1 / 2 0 0 8											
M M / D D / Y Y Y Y											
1 0 / 2 1 / 2 0 0 8											

Purpose of Disbursement (including title(s) of communication(s)) postage			
Name of Federal Candidate MARILYN MUSGRAVE F94.4101	Office Sought:	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: <u>CO</u> District: <u>04</u> Disbursement/Obligation For: 2008 <input type="checkbox"/> Primary <input checked="" 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: _____ 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: _____ Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

B. Full Name (Last, First, Middle Initial) of Payee Pizza Hut <hr/> Mailing Address of Payee 2567 S Shields #B <hr/> <table style="width:100%; border: none;"> <tr> <td style="width:33%;">City</td> <td style="width:33%;">State</td> <td style="width:33%;">Zip Code</td> </tr> <tr> <td>For Collins</td> <td>CO</td> <td>80526</td> </tr> </table> <hr/> Name of Employer _____ Occupation _____	City	State	Zip Code	For Collins	CO	80526	Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px;"> <table style="width:100%; border: none;"> <tr> <td style="text-align: center;">M M / D D / Y Y Y Y</td> </tr> <tr> <td style="text-align: center;">1 0 / 1 7 / 2 0 0 8</td> </tr> </table> </div> Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">28.00</div> Communication Date <div style="border: 1px solid black; padding: 2px;"> <table style="width:100%; border: none;"> <tr> <td style="text-align: center;">M M / D D / Y Y Y Y</td> </tr> <tr> <td style="text-align: center;">1 0 / 2 1 / 2 0 0 8</td> </tr> </table> </div> Transaction ID : F93.4200	M M / D D / Y Y Y Y	1 0 / 1 7 / 2 0 0 8	M M / D D / Y Y Y Y	1 0 / 2 1 / 2 0 0 8
City	State	Zip Code									
For Collins	CO	80526									
M M / D D / Y Y Y Y											
1 0 / 1 7 / 2 0 0 8											
M M / D D / Y Y Y Y											
1 0 / 2 1 / 2 0 0 8											

Purpose of Disbursement (including title(s) of communication(s)) dinner for canvassers			
Name of Federal Candidate MARILYN MUSGRAVE F94.4101	Office Sought:	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: <u>CO</u> District: <u>04</u> Disbursement/Obligation For: 2008 <input type="checkbox"/> Primary <input checked="" 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: _____ 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: _____ Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

SUBTOTAL of Disbursement/Obligation This Page (optional)	88.94
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 Public Highway Authority			Date of Disbursement or Obligation <input type="text" value="10"/> / <input type="text" value="15"/> / <input type="text" value="2008"/>		
Mailing Address of Payee E-470 Public Highway Authority			Amount <input type="text" value="8.00"/>		
City Fort Collins	State CO	Zip Code	Communication Date <input type="text" value="10"/> / <input type="text" value="21"/> / <input type="text" value="2008"/>		
Name of Employer		Occupation			
Transaction ID : F93.4194					

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

Name of Federal Candidate MARILYN MUSGRAVE F94.4101	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: CO District: 04	Disbursement/Obligation For: 2008 <input type="checkbox"/> Primary <input checked="" 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: _____	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: _____	Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

B. Full Name (Last, First, Middle Initial) of Payee QWEST			Date of Disbursement or Obligation <input type="text" value="10"/> / <input type="text" value="14"/> / <input type="text" value="2008"/>		
Mailing Address of Payee PO Box 173638			Amount <input type="text" value="326.83"/>		
City Denver	State CO	Zip Code 80217	Communication Date <input type="text" value="10"/> / <input type="text" value="21"/> / <input type="text" value="2008"/>		
Name of Employer		Occupation			
Transaction ID : F93.4190					

Purpose of Disbursement (including title(s) of communication(s))
phone bill

Name of Federal Candidate MARILYN MUSGRAVE F94.4101	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: CO District: 04	Disbursement/Obligation For: 2008 <input type="checkbox"/> Primary <input checked="" 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: _____	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: _____	Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

SUBTOTAL of Disbursement/Obligation This Page (optional)	<input type="text" value="334.83"/>
TOTAL This Period (last page this line number only) (carry total from last page to line 10)	<input type="text"/>

SCHEDULE 9-B
Disbursement(s) Made or Obligations

<p>A. Full Name (Last, First, Middle Initial) of Payee Silver Mine Subs</p> <hr/> <p>Mailing Address of Payee 1729 S College Ave</p> <hr/> <table style="width:100%; border: none;"> <tr> <td style="width:33%;">City</td> <td style="width:33%;">State</td> <td style="width:33%;">Zip Code</td> </tr> <tr> <td>Fort Collins</td> <td>CO</td> <td>80525</td> </tr> </table> <hr/> <p>Name of Employer _____ Occupation _____</p> <hr/> <p>Purpose of Disbursement (including title(s) of communication(s)) dinner for canvassers</p> <hr/> <table style="width:100%; border: none;"> <tr> <td style="width:33%;">Name of Federal Candidate MARILYN MUSGRAVE</td> <td style="width:15%;">Office Sought:</td> <td style="width:15%;"><input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</td> <td style="width:10%;">State: <u>CO</u></td> <td style="width:10%;">District: <u>04</u></td> <td style="width:33%;">Disbursement/Obligation For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____</td> </tr> <tr> <td>F94.4101</td> <td>Office Sought:</td> <td><input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</td> <td>State: _____</td> <td>District: _____</td> <td>Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____</td> </tr> <tr> <td>Name of Federal Candidate</td> <td>Office Sought:</td> <td><input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</td> <td>State: _____</td> <td>District: _____</td> <td>Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____</td> </tr> </table>	City	State	Zip Code	Fort Collins	CO	80525	Name of Federal Candidate MARILYN MUSGRAVE	Office Sought:	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: <u>CO</u>	District: <u>04</u>	Disbursement/Obligation For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	F94.4101	Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: _____	District: _____	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: _____	Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	<p>Date of Disbursement or Obligation <table style="width:100%; border: none;"> <tr> <td style="width:33%; text-align: center;">M M /</td> <td style="width:33%; text-align: center;">D D /</td> <td style="width:33%; text-align: center;">Y Y Y Y</td> </tr> <tr> <td style="text-align: center;">1 0 /</td> <td style="text-align: center;">1 3 /</td> <td style="text-align: center;">2 0 0 8</td> </tr> </table> </p> <p>Amount <table style="width:100%; border: none;"> <tr> <td style="width:80%; border-bottom: 1px solid black;"></td> <td style="width:20%; text-align: right;">69.00</td> </tr> </table> </p> <p>Communication Date <table style="width:100%; border: none;"> <tr> <td style="width:33%; text-align: center;">M M /</td> <td style="width:33%; text-align: center;">D D /</td> <td style="width:33%; text-align: center;">Y Y Y Y</td> </tr> <tr> <td style="text-align: center;">1 0 /</td> <td style="text-align: center;">2 1 /</td> <td style="text-align: center;">2 0 0 8</td> </tr> </table> </p> <p>Transaction ID : F93.4189</p>	M M /	D D /	Y Y Y Y	1 0 /	1 3 /	2 0 0 8		69.00	M M /	D D /	Y Y Y Y	1 0 /	2 1 /	2 0 0 8
City	State	Zip Code																																					
Fort Collins	CO	80525																																					
Name of Federal Candidate MARILYN MUSGRAVE	Office Sought:	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: <u>CO</u>	District: <u>04</u>	Disbursement/Obligation For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____																																		
F94.4101	Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: _____	District: _____	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: _____	Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____																																		
M M /	D D /	Y Y Y Y																																					
1 0 /	1 3 /	2 0 0 8																																					
	69.00																																						
M M /	D D /	Y Y Y Y																																					
1 0 /	2 1 /	2 0 0 8																																					
<p>B. Full Name (Last, First, Middle Initial) of Payee Silver Mine Subs</p> <hr/> <p>Mailing Address of Payee 1729 S College Ave</p> <hr/> <table style="width:100%; border: none;"> <tr> <td style="width:33%;">City</td> <td style="width:33%;">State</td> <td style="width:33%;">Zip Code</td> </tr> <tr> <td>Fort Collins</td> <td>CO</td> <td>80525</td> </tr> </table> <hr/> <p>Name of Employer _____ Occupation _____</p> <hr/> <p>Purpose of Disbursement (including title(s) of communication(s)) dinner for canvassers</p> <hr/> <table style="width:100%; border: none;"> <tr> <td style="width:33%;">Name of Federal Candidate MARILYN MUSGRAVE</td> <td style="width:15%;">Office Sought:</td> <td style="width:15%;"><input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</td> <td style="width:10%;">State: <u>CO</u></td> <td style="width:10%;">District: <u>04</u></td> <td style="width:33%;">Disbursement/Obligation For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____</td> </tr> <tr> <td>F94.4101</td> <td>Office Sought:</td> <td><input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</td> <td>State: _____</td> <td>District: _____</td> <td>Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____</td> </tr> <tr> <td>Name of Federal Candidate</td> <td>Office Sought:</td> <td><input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</td> <td>State: _____</td> <td>District: _____</td> <td>Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____</td> </tr> </table>	City	State	Zip Code	Fort Collins	CO	80525	Name of Federal Candidate MARILYN MUSGRAVE	Office Sought:	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: <u>CO</u>	District: <u>04</u>	Disbursement/Obligation For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	F94.4101	Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: _____	District: _____	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: _____	Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	<p>Date of Disbursement or Obligation <table style="width:100%; border: none;"> <tr> <td style="width:33%; text-align: center;">M M /</td> <td style="width:33%; text-align: center;">D D /</td> <td style="width:33%; text-align: center;">Y Y Y Y</td> </tr> <tr> <td style="text-align: center;">1 0 /</td> <td style="text-align: center;">1 5 /</td> <td style="text-align: center;">2 0 0 8</td> </tr> </table> </p> <p>Amount <table style="width:100%; border: none;"> <tr> <td style="width:80%; border-bottom: 1px solid black;"></td> <td style="width:20%; text-align: right;">63.00</td> </tr> </table> </p> <p>Communication Date <table style="width:100%; border: none;"> <tr> <td style="width:33%; text-align: center;">M M /</td> <td style="width:33%; text-align: center;">D D /</td> <td style="width:33%; text-align: center;">Y Y Y Y</td> </tr> <tr> <td style="text-align: center;">1 0 /</td> <td style="text-align: center;">2 1 /</td> <td style="text-align: center;">2 0 0 8</td> </tr> </table> </p> <p>Transaction ID : F93.4198</p>	M M /	D D /	Y Y Y Y	1 0 /	1 5 /	2 0 0 8		63.00	M M /	D D /	Y Y Y Y	1 0 /	2 1 /	2 0 0 8
City	State	Zip Code																																					
Fort Collins	CO	80525																																					
Name of Federal Candidate MARILYN MUSGRAVE	Office Sought:	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: <u>CO</u>	District: <u>04</u>	Disbursement/Obligation For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____																																		
F94.4101	Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: _____	District: _____	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: _____	Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____																																		
M M /	D D /	Y Y Y Y																																					
1 0 /	1 5 /	2 0 0 8																																					
	63.00																																						
M M /	D D /	Y Y Y Y																																					
1 0 /	2 1 /	2 0 0 8																																					
<p>SUBTOTAL of Disbursement/Obligation This Page (optional)</p> <hr/> <p>TOTAL This Period (last page this line number only) (carry total from last page to line 10)</p>		<table style="width:100%; border: none;"> <tr> <td style="width:80%; border-bottom: 1px solid black;"></td> <td style="width:20%; text-align: right;">132.00</td> </tr> <tr> <td style="border-bottom: 1px solid black;"></td> <td style="border-bottom: 1px solid black;"></td> </tr> </table>		132.00																																			
	132.00																																						

SCHEDULE 9-B

Disbursement(s) Made or Obligations

<p>A. Full Name (Last, First, Middle Initial) of Payee Silver Mine Subs</p> <hr/> <p>Mailing Address of Payee 1729 S College Ave</p> <hr/> <table style="width:100%; border: none;"> <tr> <td style="width:33%;">City</td> <td style="width:33%;">State</td> <td style="width:33%;">Zip Code</td> </tr> <tr> <td>Fort Collins</td> <td>CO</td> <td>80525</td> </tr> </table> <hr/> <p>Name of Employer _____ Occupation _____</p>	City	State	Zip Code	Fort Collins	CO	80525	<p>Date of Disbursement or Obligation <table style="width:100%; border: none;"> <tr> <td style="border: 1px solid black; padding: 2px;">M M</td> <td style="border: 1px solid black; padding: 2px;">/</td> <td style="border: 1px solid black; padding: 2px;">D D</td> <td style="border: 1px solid black; padding: 2px;">/</td> <td style="border: 1px solid black; padding: 2px;">Y Y Y Y</td> </tr> <tr> <td style="text-align: center;">1 0</td> <td></td> <td style="text-align: center;">2 0</td> <td></td> <td style="text-align: center;">2 0 0 8</td> </tr> </table> </p> <p>Amount <table style="width:100%; border: none;"> <tr> <td style="border: 1px solid black; width: 80%;"></td> <td style="border: 1px solid black; text-align: right;">60.83</td> </tr> </table> </p> <p>Communication Date <table style="width:100%; border: none;"> <tr> <td style="border: 1px solid black; padding: 2px;">M M</td> <td style="border: 1px solid black; padding: 2px;">/</td> <td style="border: 1px solid black; padding: 2px;">D D</td> <td style="border: 1px solid black; padding: 2px;">/</td> <td style="border: 1px solid black; padding: 2px;">Y Y Y Y</td> </tr> <tr> <td style="text-align: center;">1 0</td> <td></td> <td style="text-align: center;">2 1</td> <td></td> <td style="text-align: center;">2 0 0 8</td> </tr> </table> </p> <p>Transaction ID : F93.4205</p>	M M	/	D D	/	Y Y Y Y	1 0		2 0		2 0 0 8		60.83	M M	/	D D	/	Y Y Y Y	1 0		2 1		2 0 0 8
City	State	Zip Code																											
Fort Collins	CO	80525																											
M M	/	D D	/	Y Y Y Y																									
1 0		2 0		2 0 0 8																									
	60.83																												
M M	/	D D	/	Y Y Y Y																									
1 0		2 1		2 0 0 8																									

Purpose of Disbursement (including title(s) of communication(s))
dinner for canvassers

Name of Federal Candidate MARILYN MUSGRAVE	Office Sought:	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: <u>CO</u>	District: <u>04</u>	Disbursement/Obligation For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
F94.4101					
Name of Federal Candidate	Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: _____	District: _____	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: _____	Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

<p>B. Full Name (Last, First, Middle Initial) of Payee Barbara Swietkowski</p> <hr/> <p>Mailing Address of Payee 80 Hughson Rd</p> <hr/> <table style="width:100%; border: none;"> <tr> <td style="width:33%;">City</td> <td style="width:33%;">State</td> <td style="width:33%;">Zip Code</td> </tr> <tr> <td>Carmel</td> <td>NY</td> <td>10512</td> </tr> </table> <hr/> <p>Name of Employer _____ Occupation _____ Defneders of Wildlife Action F Field staff</p>	City	State	Zip Code	Carmel	NY	10512	<p>Date of Disbursement or Obligation <table style="width:100%; border: none;"> <tr> <td style="border: 1px solid black; padding: 2px;">M M</td> <td style="border: 1px solid black; padding: 2px;">/</td> <td style="border: 1px solid black; padding: 2px;">D D</td> <td style="border: 1px solid black; padding: 2px;">/</td> <td style="border: 1px solid black; padding: 2px;">Y Y Y Y</td> </tr> <tr> <td style="text-align: center;">1 0</td> <td></td> <td style="text-align: center;">1 0</td> <td></td> <td style="text-align: center;">2 0 0 8</td> </tr> </table> </p> <p>Amount <table style="width:100%; border: none;"> <tr> <td style="border: 1px solid black; width: 80%;"></td> <td style="border: 1px solid black; text-align: right;">23.00</td> </tr> </table> </p> <p>Communication Date <table style="width:100%; border: none;"> <tr> <td style="border: 1px solid black; padding: 2px;">M M</td> <td style="border: 1px solid black; padding: 2px;">/</td> <td style="border: 1px solid black; padding: 2px;">D D</td> <td style="border: 1px solid black; padding: 2px;">/</td> <td style="border: 1px solid black; padding: 2px;">Y Y Y Y</td> </tr> <tr> <td style="text-align: center;">1 0</td> <td></td> <td style="text-align: center;">2 1</td> <td></td> <td style="text-align: center;">2 0 0 8</td> </tr> </table> </p> <p>Transaction ID : F93.4182</p>	M M	/	D D	/	Y Y Y Y	1 0		1 0		2 0 0 8		23.00	M M	/	D D	/	Y Y Y Y	1 0		2 1		2 0 0 8
City	State	Zip Code																											
Carmel	NY	10512																											
M M	/	D D	/	Y Y Y Y																									
1 0		1 0		2 0 0 8																									
	23.00																												
M M	/	D D	/	Y Y Y Y																									
1 0		2 1		2 0 0 8																									

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

Name of Federal Candidate MARILYN MUSGRAVE	Office Sought:	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: <u>CO</u>	District: <u>04</u>	Disbursement/Obligation For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
F94.4101					
Name of Federal Candidate	Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: _____	District: _____	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: _____	Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

SUBTOTAL of Disbursement/Obligation This Page (optional)	83.83
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 Barbara Swietkowski	Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y 10 / 15 / 2008 </div>						
Mailing Address of Payee 80 Hughson Rd	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">800.00</div>						
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">City</td> <td style="width:33%;">State</td> <td style="width:33%;">Zip Code</td> </tr> <tr> <td>Carmel</td> <td>NY</td> <td>10512</td> </tr> </table>	City	State	Zip Code	Carmel	NY	10512	Communication Date <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y 10 / 21 / 2008 </div>
City	State	Zip Code					
Carmel	NY	10512					
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:60%;">Name of Employer</td> <td style="width:40%;">Occupation</td> </tr> <tr> <td>Defneders of Wildlife Action F</td> <td>Field staff</td> </tr> </table>	Name of Employer	Occupation	Defneders of Wildlife Action F	Field staff	Transaction ID : F93.4217		
Name of Employer	Occupation						
Defneders of Wildlife Action F	Field staff						

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

Name of Federal Candidate MARILYN MUSGRAVE	Office Sought:	<input checked="" type="checkbox"/> House	State:	CO	Disbursement/Obligation For: 2008
		<input type="checkbox"/> Senate		District: 04	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
F94.4101		<input type="checkbox"/> President			<input type="checkbox"/> Other (specify) _____

Name of Federal Candidate	Office Sought:	<input type="checkbox"/> House	State:		Disbursement/Obligation For:
		<input type="checkbox"/> Senate		District:	<input type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> President			<input type="checkbox"/> Other (specify) _____

Name of Federal Candidate	Office Sought:	<input type="checkbox"/> House	State:		Disbursement/Obligation For:
		<input type="checkbox"/> Senate		District:	<input type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> President			<input type="checkbox"/> Other (specify) _____

B. Full Name (Last, First, Middle Initial) of Payee TMobile	Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y 10 / 09 / 2008 </div>						
Mailing Address of Payee PO Box 37380	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">100.00</div>						
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">City</td> <td style="width:33%;">State</td> <td style="width:33%;">Zip Code</td> </tr> <tr> <td>Albuquerque</td> <td>NM</td> <td>87176</td> </tr> </table>	City	State	Zip Code	Albuquerque	NM	87176	Communication Date <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y 10 / 21 / 2008 </div>
City	State	Zip Code					
Albuquerque	NM	87176					
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:60%;">Name of Employer</td> <td style="width:40%;">Occupation</td> </tr> <tr> <td></td> <td></td> </tr> </table>	Name of Employer	Occupation			Transaction ID : F93.4178		
Name of Employer	Occupation						

Purpose of Disbursement (including title(s) of communication(s))
 cell phone bill

Name of Federal Candidate MARILYN MUSGRAVE	Office Sought:	<input checked="" type="checkbox"/> House	State:	CO	Disbursement/Obligation For: 2008
		<input type="checkbox"/> Senate		District: 04	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
F94.4101		<input type="checkbox"/> President			<input type="checkbox"/> Other (specify) _____

Name of Federal Candidate	Office Sought:	<input type="checkbox"/> House	State:		Disbursement/Obligation For:
		<input type="checkbox"/> Senate		District:	<input type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> President			<input type="checkbox"/> Other (specify) _____

Name of Federal Candidate	Office Sought:	<input type="checkbox"/> House	State:		Disbursement/Obligation For:
		<input type="checkbox"/> Senate		District:	<input type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> President			<input type="checkbox"/> Other (specify) _____

SUBTOTAL of Disbursement/Obligation This Page (optional)	<div style="border: 1px solid black; padding: 2px; text-align: right;">900.00</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; text-align: right;"> </div>

SCHEDULE 9-B

Disbursement(s) Made or Obligations

<p>A. Full Name (Last, First, Middle Initial) of Payee Walmart</p> <hr/> <p>Mailing Address of Payee 3133 Garfield Ave</p> <hr/> <p>City State Zip Code Loveland CO</p> <hr/> <p>Name of Employer Occupation</p> <hr/> <p>Purpose of Disbursement (including title(s) of communication(s)) water</p>	<p>Date of Disbursement or Obligation <table border="1" style="width:100%; text-align:center;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>1</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> </p> <p>Amount <table border="1" style="width:100%; text-align:right;"> <tr> <td>32.06</td> </tr> </table> </p> <p>Communication Date <table border="1" style="width:100%; text-align:center;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>2</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> </p> <p>Transaction ID : F93.4180</p>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	0		2	0	0	8	32.06	M	M	/	D	D	/	Y	Y	Y	Y	1	0		2	1		2	0	0	8	
M	M	/	D	D	/	Y	Y	Y	Y																																		
1	0		1	0		2	0	0	8																																		
32.06																																											
M	M	/	D	D	/	Y	Y	Y	Y																																		
1	0		2	1		2	0	0	8																																		
<p>Name of Federal Candidate Office Sought: <input checked="" type="checkbox"/> House State: CO Disbursement/Obligation For: 2008 MARILYN MUSGRAVE <input type="checkbox"/> Senate District: 04 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General F94.4101 <input type="checkbox"/> President</p> <hr/> <p>Name of Federal Candidate Office Sought: <input type="checkbox"/> House State: Disbursement/Obligation For: <input type="checkbox"/> Senate District: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> President</p> <hr/> <p>Name of Federal Candidate Office Sought: <input type="checkbox"/> House State: Disbursement/Obligation For: <input type="checkbox"/> Senate District: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> President</p>	<p>B. Full Name (Last, First, Middle Initial) of Payee Wild Bunch Consulting</p> <hr/> <p>Mailing Address of Payee 900 19th St NW, Suite 400</p> <hr/> <p>City State Zip Code Washington DC 20006</p> <hr/> <p>Name of Employer Occupation</p> <hr/> <p>Purpose of Disbursement (including title(s) of communication(s)) TV ad production</p>	<p>Date of Disbursement or Obligation <table border="1" style="width:100%; text-align:center;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>2</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> </p> <p>Amount <table border="1" style="width:100%; text-align:right;"> <tr> <td>6912.49</td> </tr> </table> </p> <p>Communication Date <table border="1" style="width:100%; text-align:center;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>2</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> </p> <p>Transaction ID : F93.4209</p>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		2	1		2	0	0	8	6912.49	M	M	/	D	D	/	Y	Y	Y	Y	1	0		2	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y																																		
1	0		2	1		2	0	0	8																																		
6912.49																																											
M	M	/	D	D	/	Y	Y	Y	Y																																		
1	0		2	1		2	0	0	8																																		
<p>Name of Federal Candidate Office Sought: <input type="checkbox"/> House State: Disbursement/Obligation For: 2008 JOHN S. MCCAIN <input type="checkbox"/> Senate District: 00 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General F94.4208 <input checked="" type="checkbox"/> President</p> <hr/> <p>Name of Federal Candidate Office Sought: <input type="checkbox"/> House State: Disbursement/Obligation For: <input type="checkbox"/> Senate District: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> President</p> <hr/> <p>Name of Federal Candidate Office Sought: <input type="checkbox"/> House State: Disbursement/Obligation For: <input type="checkbox"/> Senate District: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> President</p>	<p>SUBTOTAL of Disbursement/Obligation This Page (optional) <table border="1" style="width:100%; text-align:right;"><tr><td>6944.55</td></tr></table></p> <hr/> <p>TOTAL This Period (last page this line number only) <table border="1" style="width:100%; text-align:right;"><tr><td> </td></tr></table> (carry total from last page to line 10)</p>	6944.55																																									
6944.55																																											

SCHEDULE 9-B

Disbursement(s) Made or Obligations

<p>A. Full Name (Last, First, Middle Initial) of Payee Wild Bunch Consulting</p> <hr/> <p>Mailing Address of Payee 900 19th St NW, Suite 400</p> <hr/> <table style="width:100%; border: none;"> <tr> <td style="width:33%;">City</td> <td style="width:33%;">State</td> <td style="width:33%;">Zip Code</td> </tr> <tr> <td>Washington</td> <td>DC</td> <td>20006</td> </tr> </table> <hr/> <p>Name of Employer _____ Occupation _____</p>	City	State	Zip Code	Washington	DC	20006	<p>Date of Disbursement or Obligation <table style="width:100%; border: none;"> <tr> <td style="text-align:center;">M M / D D / Y Y Y Y</td> </tr> <tr> <td style="text-align:center;">1 0 / 2 1 / 2 0 0 8</td> </tr> </table> </p> <p>Amount <table style="width:100%; border: none;"> <tr> <td style="text-align:right;">63.34</td> </tr> </table> </p> <p>Communication Date <table style="width:100%; border: none;"> <tr> <td style="text-align:center;">M M / D D / Y Y Y Y</td> </tr> <tr> <td style="text-align:center;">1 0 / 2 1 / 2 0 0 8</td> </tr> </table> </p> <p>Transaction ID : F93.4219</p>	M M / D D / Y Y Y Y	1 0 / 2 1 / 2 0 0 8	63.34	M M / D D / Y Y Y Y	1 0 / 2 1 / 2 0 0 8
City	State	Zip Code										
Washington	DC	20006										
M M / D D / Y Y Y Y												
1 0 / 2 1 / 2 0 0 8												
63.34												
M M / D D / Y Y Y Y												
1 0 / 2 1 / 2 0 0 8												

Purpose of Disbursement (including title(s) of communication(s))
TV ad expenses

Name of Federal Candidate STEVE PEARCE	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NM District: 00	Disbursement/Obligation For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
F94.4220			
Name of Federal Candidate	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: _____ District: _____	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: _____	Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

<p>B. Full Name (Last, First, Middle Initial) of Payee Wild Bunch Consulting</p> <hr/> <p>Mailing Address of Payee 900 19th St NW, Suite 400</p> <hr/> <table style="width:100%; border: none;"> <tr> <td style="width:33%;">City</td> <td style="width:33%;">State</td> <td style="width:33%;">Zip Code</td> </tr> <tr> <td>Washington</td> <td>DC</td> <td>20006</td> </tr> </table> <hr/> <p>Name of Employer _____ Occupation _____</p>	City	State	Zip Code	Washington	DC	20006	<p>Date of Disbursement or Obligation <table style="width:100%; border: none;"> <tr> <td style="text-align:center;">M M / D D / Y Y Y Y</td> </tr> <tr> <td style="text-align:center;">1 0 / 2 1 / 2 0 0 8</td> </tr> </table> </p> <p>Amount <table style="width:100%; border: none;"> <tr> <td style="text-align:right;">98.25</td> </tr> </table> </p> <p>Communication Date <table style="width:100%; border: none;"> <tr> <td style="text-align:center;">M M / D D / Y Y Y Y</td> </tr> <tr> <td style="text-align:center;">1 0 / 2 1 / 2 0 0 8</td> </tr> </table> </p> <p>Transaction ID : F93.4221</p>	M M / D D / Y Y Y Y	1 0 / 2 1 / 2 0 0 8	98.25	M M / D D / Y Y Y Y	1 0 / 2 1 / 2 0 0 8
City	State	Zip Code										
Washington	DC	20006										
M M / D D / Y Y Y Y												
1 0 / 2 1 / 2 0 0 8												
98.25												
M M / D D / Y Y Y Y												
1 0 / 2 1 / 2 0 0 8												

Purpose of Disbursement (including title(s) of communication(s))
TV ad expenses

Name of Federal Candidate WILLIAM T SALI	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: ID District: 01	Disbursement/Obligation For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
F94.4222			
Name of Federal Candidate	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: _____ District: _____	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: _____	Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

SUBTOTAL of Disbursement/Obligation This Page (optional)	161.59
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 Ed Yoon	Date of Disbursement or Obligation <table border="1" style="width:100%; text-align: center;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	5		2	0	0	8						
M	M	/	D	D	/	Y	Y	Y	Y																		
1	0		1	5		2	0	0	8																		
Mailing Address of Payee 146 S Oxford Ave #1	Amount <table border="1" style="width:100%; text-align: right;"> <tr> <td style="width:80%;"></td> <td>1280.00</td> </tr> </table>		1280.00																								
	1280.00																										
<table style="width:100%;"> <tr> <td style="width:33%;">City</td> <td style="width:33%;">State</td> <td style="width:33%;">Zip Code</td> </tr> <tr> <td>Los Angeles</td> <td>CA</td> <td>90004</td> </tr> </table>	City	State	Zip Code	Los Angeles	CA	90004	Communication Date <table border="1" style="width:100%; text-align: center;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>2</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		2	1		2	0	0	8
City	State	Zip Code																									
Los Angeles	CA	90004																									
M	M	/	D	D	/	Y	Y	Y	Y																		
1	0		2	1		2	0	0	8																		
<table style="width:100%;"> <tr> <td style="width:45%;">Name of Employer</td> <td style="width:55%;">Occupation</td> </tr> <tr> <td>Defenders of Willdife Action F</td> <td>Field Director</td> </tr> </table>	Name of Employer	Occupation	Defenders of Willdife Action F	Field Director	Transaction ID : F93.4212																						
Name of Employer	Occupation																										
Defenders of Willdife Action F	Field Director																										

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

Name of Federal Candidate MARILYN MUSGRAVE	Office Sought:	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: <u>CO</u>	District: <u>04</u>	Disbursement/Obligation For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
F94.4101					
Name of Federal Candidate	Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: _____	District: _____	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: _____	Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

SUBTOTAL of Disbursement/Obligation This Page (optional)	<table border="1" style="width:100%; text-align: right;"> <tr> <td>1280.00</td> </tr> </table>	1280.00
1280.00		
TOTAL This Period (last page this line number only) (carry total from last page to line 10)	<table border="1" style="width:100%; text-align: right;"> <tr> <td>99692.53</td> </tr> </table>	99692.53
99692.53		