

FEC FORM 9

24 HOUR NOTICE OF DISBURSEMENTS/OBLIGATIONS FOR ELECTIONEERING COMMUNICATIONS

1. Person Making the Disbursements/Obligations

(a) Name **United Against Illegal Guns Support Fund**

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

(c) City, State and ZIP Code
New York NY 10022

(d) Name of Employer or Principal Place of Business (e) Occupation

2. FEC Identification Number

C C30002034

3. Is This Statement

New
or
 Amended

4. Covering Period

M M M / D D D / Y Y Y Y Y Y
09 / 25 / 2012
through
M M M / D D D / Y Y Y Y Y Y
10 / 01 / 2012

5. (a) Date of Public Distribution(s) M M M / D D D / Y Y Y Y Y Y
10 / 01 / 2012 (b) Communication Title 48,000

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. If the filer is an individual, unincorporated organization or qualified nonprofit corporation, were the disbursements made exclusively from donations to a segregated bank account? Yes No

8. Custodian of Records

(a) Name
Kathleen McInerney

(b) Address (number and street)
909 Third Avenue

(c) City, State and ZIP Code
New York NY 10022

(d) Name of Employer or Principal Place of Business (e) Occupation
Geller & Co. Financial Advisor

9. Total Donations This Statement

_____, _____, _____, .00

10. Total Disbursements/Obligations This Statement

_____, _____, _____, 178660.73

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

TYPE OR PRINT NAME OF PERSON COMPLETING FORM John Feinblatt

SIGNATURE John Feinblatt

[Electronically Filed] DATE 10/02/2012

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

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

11. Person(s) Sharing/Exercising Control

A. (a) Name	Transaction ID : F91.000001	
John Feinblatt		
(b) Address (number and street)	909 Third Avenue	
(c) City, State and ZIP Code	NY	10022
(d) Name of Employer or Principal Place of Business	(e) Occupation	
United Against Illegal Guns SF	President	

B. (a) Name	Transaction ID : F91.000002	
Richard DeScherer		
(b) Address (number and street)	909 Third Avenue	
(c) City, State and ZIP Code	NY	10022
(d) Name of Employer or Principal Place of Business	(e) Occupation	
United Against Illegal Guns SF	Vice President	

C. (a) Name	Transaction ID : F91.000003	
Ian Shapiro		
(b) Address (number and street)	909 Third Avenue	
(c) City, State and ZIP Code	NY	10022
(d) Name of Employer or Principal Place of Business	(e) Occupation	
United Against Illegal Guns SF	Secretary	

D. (a) Name	Transaction ID : F91.000004	
Ed Skyler		
(b) Address (number and street)	909 Third Avenue	
(c) City, State and ZIP Code	NY	10022
(d) Name of Employer or Principal Place of Business	(e) Occupation	
United Against Illegal Guns SF	Treasurer	

E. (a) Name		
(b) Address (number and street)		
(c) City, State and ZIP Code		
(d) Name of Employer or Principal Place of Business	(e) Occupation	

SCHEDULE 9-B

Disbursement(s) Made or Obligation(s)

<p>A. Full Name (Last, First, Middle Initial) of Payee Devine Mulvey, Inc.</p> <hr/> <p>Mailing Address of Payee 2141 Wisconsin Avenue, NW Suite H</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>20007</td> </tr> </table> <hr/> <p>Name of Employer _____ Occupation _____</p> <hr/> <p>Purpose of Disbursement (Including title(s) of communication(s)) Media Production - 48,000</p>	City	State	Zip Code	Washington	DC	20007	<p>Date of Disbursement or Obligation MM / DD / YYYY 10 / 01 / 2012</p> <hr/> <p>Amount 28160.73</p> <hr/> <p>Communication Date MM / DD / YYYY 10 / 01 / 2012</p> <hr/> <p>Transaction ID : F93.000001</p>
City	State	Zip Code					
Washington	DC	20007					
<p>Name of Federal Candidate Barack Obama</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President</p> <p>State: _____ District: _____</p> <p>Transaction ID : F94.000002</p> <p>Name of Federal Candidate Mitt Romney</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President</p> <p>State: _____ District: _____</p> <p>Transaction ID : F94.000003</p> <p>Name of Federal Candidate _____</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: _____ District: _____</p>	<p>Disbursement/Obligation For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____</p> <hr/> <p>Disbursement/Obligation For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____</p> <hr/> <p>Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____</p>						
<p>B. Full Name (Last, First, Middle Initial) of Payee Buying Time, LLC</p> <hr/> <p>Mailing Address of Payee 650 Massachusetts Avenue, NW Suite 210</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>20001</td> </tr> </table> <hr/> <p>Name of Employer _____ Occupation _____</p> <hr/> <p>Purpose of Disbursement (Including title(s) of communication(s)) Media Buy - 48,000</p>	City	State	Zip Code	Washington	DC	20001	<p>Date of Disbursement or Obligation MM / DD / YYYY 09 / 25 / 2012</p> <hr/> <p>Amount 150500.00</p> <hr/> <p>Communication Date MM / DD / YYYY 10 / 01 / 2012</p> <hr/> <p>Transaction ID : F93.000002</p>
City	State	Zip Code					
Washington	DC	20001					
<p>Name of Federal Candidate Barack Obama</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President</p> <p>State: _____ District: _____</p> <p>Transaction ID : F94.000005</p> <p>Name of Federal Candidate Mitt Romney</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President</p> <p>State: _____ District: _____</p> <p>Transaction ID : F94.000006</p> <p>Name of Federal Candidate _____</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: _____ District: _____</p>	<p>Disbursement/Obligation For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____</p> <hr/> <p>Disbursement/Obligation For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____</p> <hr/> <p>Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____</p>						
<p>SUBTOTAL of Disbursements/Obligations This Page (optional) ▶</p> <hr/> <p>TOTAL This Period (last page this line number only) ▶ (carry total from last page to Line 10)</p>	<p>178660.73</p> <hr/> <p>178660.73</p>						