

RECEIVED
FEDERAL ELECTION
COMMISSION
PUBLIC DISCLOSURE
SECTION

2008 DEC -5 P 4:09

9/30/2008

Form 9

"EIK"

28039942245

RECEIVED
FEDERAL ELECTION
COMMISSION
POLITICAL DISCLOSURE
DIVISION

2008 DEC -5 P 4: 09

FEC FORM 9

24 HOUR NOTICE OF DISBURSEMENTS/OBLIGATIONS FOR ELECTIONEERING COMMUNICATIONS

1. Person Making the Disbursements/Obligations

(a) Name
Freedom's Watch Inc.

(b) Address (number and street) check if different than previously reported
401 9th St. NW

(c) City, State and ZIP Code
Washington, DC 20004

(d) Name of Employer or Principal Place of Business

(e) Occupation

2. FEC Identification Number
C 30000756

3. Is This Statement New or Amended

4. Covering Period
"09 29 2008" through "09 30 2008"

5. (a) Date of Public Distribution(s) 09 30 2008 (b) Communication Title "Elk"

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
Douglas W. Robinson

(b) Address (number and street)
401 9th St. NW

(c) City, State and ZIP Code
Washington, DC 20004

(d) Name of Employer or Principal Place of Business


(e) Occupation
Chief Financial Officer

9. Total Donations This Statement , 0.00

10. Total Disbursements/Obligations This Statement , 37, 748. 69

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

TYPE OR PRINT NAME OF PERSON COMPLETING FORM Douglas W. Robinson

SIGNATURE  DATE 11/4/08

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

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11. Person(s) Sharing/Exercising Control

A. (a) Name Mel Sembler	
(b) Address (number and street) 5858 Central Avenue	
(c) City, State and ZIP Code St. Petersburg, FL, 33707-1728	
(d) Name of Employer or Principal Place of Business The Sembler Company	(e) Occupation Chairman
B. (a) Name Matthew Brooks	
(b) Address (number and street) 50 F Street NW Suite 100	
(c) City, State and ZIP Code Washington, DC 20001	
(d) Name of Employer or Principal Place of Business Republican Jewish Coalition	(e) Occupation Executive Director
C. (a) Name Ari Fleischer	
(b) Address (number and street) 624 Old Post Road	
(c) City, State and ZIP Code Bedford, NY 10506	
(d) Name of Employer or Principal Place of Business Fleischer Communications	(e) Occupation President
D. (a) Name William Weidner	
(b) Address (number and street) 3355 Las Vegas Blvd South	
(c) City, State and ZIP Code Las Vegas, NV 89109	
(d) Name of Employer or Principal Place of Business Las Vegas Sands Corporation	(e) Occupation President
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

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SCHEDULE 9-A
Donation(s) Received

28039942248

<p>A. Full Name of Donor</p> <hr/> <p>Mailing Address of Donor</p> <hr/> <p>City State Zip</p>	<p>Date of Receipt</p> <p>____/____/____</p> <p>Amount</p> <p>_____</p>
<p>B. Full Name of Donor</p> <hr/> <p>Mailing Address of Donor</p> <hr/> <p>City State Zip</p>	<p>Date of Receipt</p> <p>____/____/____</p> <p>Amount</p> <p>_____</p>
<p>C. Full Name of Donor</p> <hr/> <p>Mailing Address of Donor</p> <hr/> <p>City State Zip</p>	<p>Date of Receipt</p> <p>____/____/____</p> <p>Amount</p> <p>_____</p>
<p>D. Full Name of Donor</p> <hr/> <p>Mailing Address of Donor</p> <hr/> <p>City State Zip</p>	<p>Date of Receipt</p> <p>____/____/____</p> <p>Amount</p> <p>_____</p>
<p>E. Full Name of Donor</p> <hr/> <p>Mailing Address of Donor</p> <hr/> <p>City State Zip</p>	<p>Date of Receipt</p> <p>____/____/____</p> <p>Amount</p> <p>_____</p>
<p>SUBTOTAL of Donations This Page (optional) ▶</p>	
<p>TOTAL This Period (last page this line number only) ▶ (carry total from last page to Line 9)</p>	

SCHEDULE 9-B

Disbursement(s) Made or Obligation(s)

A. Full Name (Last, First, Middle Initial) of Payee Smart Media Group				Date of Disbursement or Obligation 09 29 2008	
Mailing Address of Payee 814 King Street, Suite 400				Amount 28,952.88	
City Alexandria		State VA	Zip Code 22314		Communication Date 09 30 2008
Name of Employer		Occupation		Purpose of Disbursement (Including title(s) of communication(s)) Media Placement	
Name of Federal Candidate Mark Udall	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: CO District:	Disbursement/Obligation For: <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 Scott Howell and Company				Date of Disbursement or Obligation 09 29 2008	
Mailing Address of Payee 208 North Market Street Suite 250				Amount 8,795.81	
City Dallas		State TX	Zip Code 75202		Communication Date 09 30 2008
Name of Employer		Occupation		Purpose of Disbursement (Including title(s) of communication(s)) Media Production	
Name of Federal Candidate Mark Udall	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: CO District:	Disbursement/Obligation For: <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 Disbursements/Obligations This Page (optional) ▶				37,748.69	
TOTAL This Period (last page this line number only) ▶ (carry total from last page to Line 10)				37,748.69	

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

<input checked="" type="checkbox"/> Hand Delivered	Date of Receipt <i>12/5/08</i>
<input type="checkbox"/> USPS First Class Mail	Postmarked
<input type="checkbox"/> USPS Registered/Certified	Postmarked (R/C)
<input type="checkbox"/> USPS Priority Mail	Postmarked
Delivery Confirmation™ or Signature Confirmation™ Label <input type="checkbox"/>	
<input type="checkbox"/> USPS Express Mail	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
Next Business Day Delivery <input type="checkbox"/>	
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked

<i>Jms</i> PREPARER	<i>12/5/08</i> DATE PREPARED
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