

TO THE FEC
202-219-0174

3 New FEC 9 Forms
2 Amended Forms
33 Total Pages

From US Chamber
Contact Justin Wilson at 202-463-5532 if you have any questions

28059850258

FEC FORM 9

24 HOUR NOTICE OF DISBURSEMENTS/OBLIGATIONS FOR ELECTIONEERING COMMUNICATIONS

1. Person Making the Disbursements/Obligations

(a) Name U.S. Chamber of Commerce
(b) Address (number and street) ☐ check if different than previously reported
1615 H Street, NW
(c) City, State and ZIP Code
Washington, DC 20062
(d) Name of Employer or Principal Place of Business

2. FEC Identification Number

030001101

3. Is This Statement ☐ New
or
☒ Amended

4. Covering Period

08' 22' 2008
through

09' 23' 2008

5. (a) Date of Public Distribution(a) 09' 23' 2008 (b) Communication Title Landrien - Energy

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 Rob Engstrom
(b) Address (number and street)
1615 H Street, NW
(c) City, State and ZIP Code
Washington, DC 20062
(d) Name of Employer or Principal Place of Business
U.S. Chamber of Commerce (e) Occupation
Vice President

9. Total Donations This Statement

0.00

10. Total Disbursements/Obligations This Statement

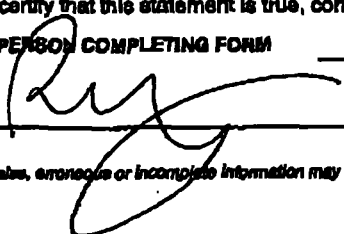
175,000.00

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

TYPE OR PRINT NAME OF PERSON COMPLETING FORM

Rob Engstrom

SIGNATURE



DATE

10/7/08

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

PAGE 2 OF 3

11. Person(s) Sharing/Exercising Control

A.	(a) Name Rob Engstrom	(b) Address (number and street) 1615 H Street, NW	(c) City, State and ZIP Code Washington, DC 20062	(d) Name of Employer or Principal Place of Business U.S. Chamber of Commerce	(e) Occupation Vice President
B.	(a) Name Bill Miller	(b) Address (number and street) 1615 H Street, NW	(c) City, State and ZIP Code Washington, DC 20062	(d) Name of Employer or Principal Place of Business U.S. Chamber of Commerce	(e) Occupation Senior Vice President
C.	(a) Name	(b) Address (number and street)	(c) City, State and ZIP Code	(d) Name of Employer or Principal Place of Business	(e) Occupation
D.	(a) Name	(b) Address (number and street)	(c) City, State and ZIP Code	(d) Name of Employer or Principal Place of Business	(e) Occupation
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)

PAGE 3 OF 3

A. Full Name (Last, First, Middle Initial) of Payee <u>Strother - Duffy - Strother</u>		Date of Disbursement or Obligation <u>08' 22' 2008</u>	
Mailing Address of Payee <u>713 Wisconsin Ave Suite 610E</u>		Amount <u>175,000.00</u>	
City <u>Bethesda</u>	State <u>MD</u>	Zip Code <u>20814</u>	
Name of Employer 		Occupation 	
Purpose of Disbursement (Including title(s) of communication(s)) <u>Landrien Energy - TV Ad</u>			
Name of Federal Candidate <u>Mary Landrien</u>	Office Sought: ☒ House ☒ Senate ☐ President	State: <u>LA</u>	Disbursement/Obligation For: ☒ Primary ☐ General ☐ Other (specify) ▶
Name of Federal Candidate 	Office Sought: ☐ House ☐ Senate ☐ President	State: 	Disbursement/Obligation For: ☐ Primary ☐ General ☐ Other (specify) ▶
Name of Federal Candidate 	Office Sought: ☐ House ☐ Senate ☐ President	State: 	Disbursement/Obligation For: ☐ Primary ☐ General ☐ Other (specify) ▶
B. Full Name (Last, First, Middle Initial) of Payee 		Date of Disbursement or Obligation 	
Mailing Address of Payee 		Amount 	
City 	State 	Zip Code 	
Name of Employer 		Occupation 	
Purpose of Disbursement (Including title(s) of communication(s)) 			
Name of Federal Candidate 	Office Sought: ☐ House ☐ Senate ☐ President	State: 	Disbursement/Obligation For: ☐ Primary ☐ General ☐ Other (specify) ▶
Name of Federal Candidate 	Office Sought: ☐ House ☐ Senate ☐ President	State: 	Disbursement/Obligation For: ☐ Primary ☐ General ☐ Other (specify) ▶
Name of Federal Candidate 	Office Sought: ☐ House ☐ Senate ☐ President	State: 	Disbursement/Obligation For: ☐ Primary ☐ General ☐ Other (specify) ▶
SUBTOTAL of Disbursements/Obligations This Page (optional) ▶			
TOTAL This Period (last page this line number only) ▶ (carry total from last page to Line 10)		<u>175,000.00</u>	

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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.

☐ Hand Delivered	Date of Receipt
☐ USPS First Class Mail	Postmarked
☐ USPS Registered/Certified	Postmarked (R/C)
☐ USPS Priority Mail	Postmarked
Delivery Confirmation™ or Signature Confirmation™ Label ☐	
☐ USPS Express Mail	Postmarked
☐ Postmark Illegible	
☐ No Postmark	
☐ Overnight Delivery Service (Specify):	Shipping Date
Next Business Day Delivery ☐	
☐ Received from House Records & Registration Office	Date of Receipt
☐ Received from Senate Public Records Office	Date of Receipt
☐ Received from Electronic Filing Office	Date of Receipt
☒ Other (Specify): <i>FAX to Public Record</i>	Date of Receipt or Postmarked <i>10/7/08</i>
<i>JAL</i> PREPARER	<i>10/8/08</i> DATE PREPARED

(3/2005)

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