



Malea Stenzel <malea@campaigntodefendamerica.org>@iraqcampaign.org> on
02/27/2008 04:30:48 PM

Please respond to <malca@campaigntodefendamerica.org>

Sent by: Malca Stenzel <malca@iraqcampaign.org>

To: <2022190174@fec.gov>

cc: "Neil P. Reiff" <reiff@sandlerreiff.com>, "Rachel Steinberg" <steinberg@sandlerreiff.com>

Subject: Form 9, 24 Hour Report

Please see attached Form 9.

Please let me know if you have any questions. Please reply to confirm receipt. Thanks.

Sincerely,
Malea Stenzel

Malea Stenzel
malea@campaigntodefendamerica.org
Direct: 202-609-7675
Cell: 651-261-3166
Fax: 888-712-7990



form 9, mcsame ad, ohio.pdf

28039644344

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

CAMPAIGN TO DEFEND AMERICA

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

PO BOX 65304

(c) City, State and ZIP Code

Washington

DC

20035

2. FEC Identification Number

C

(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
02 / 11 / 2008

through

M M / D D / Y Y Y Y
02 / 27 / 2008

5. (a) Date of Public Distribution(s) M M / D D / Y Y Y Y **(b) Communication Title** McSame

02 / 26 / 2008

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

Yes ☒

No ☐

7. Were the disbursements for the electioneering communication made exclusively from donations to a segregated bank account?

Yes ☒

No ☐

8. Custodian of Records

(a) Name

Malea Stenzel

(b) Address (number and street)

PO BOX 65304

(c) City, State and ZIP Code

Washington

DC

20005

(d) Name of Employer or Principal Place of Business

(e) Occupation

9. Total Donations This Statement

400000.00

10. Total Disbursements/Obligations This Statement

141073.06

Under penalty of perjury, I certify that this statement is true, correct and complete. In addition, if the electioneering communications reported herein were made by a corporation, I certify that the corporation is a qualified nonprofit corporation under the Commission's regulations.

TYPE OR PRINT NAME OF PERSON COMPLETING FORM

Malea Stenzel

SIGNATURE

Malea Stenzel

DATE 02/27/2008

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

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

PAGE 2 / 4

11. Person(s) Sharing/Exercising Control

A.	(a) Name	Transaction ID : F91.4098
	Lori Lodes	
	(b) Address (number and street)	
	PO BOX 65304	
	(c) City, State and Zip Code	
	Washington	DC 20035
	(d) Name of Employer or Principal Place of Business	(e) Occupation

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SCHEDULE 9-A
Donation(s) Received

PAGE 3/4

A. Full Name of Donor

Fund for America

Mailing Address of Donor
1800 Massachusetts Ave, NW

City	State	Zip
Washington	DC	20036

Date of Receipt

M M / D D / Y Y Y Y
02 / 11 / 2008

Amount

400000.00

Transaction ID : F92.4099

SUBTOTAL of Donations This Page (optional).....

400000.00

TOTAL This Period (last page this line number only).....
(carry total from last page to Line 9)

400000.00

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SCHEDULE 9-B
Disbursement(s) Made or Obligations

PAGE 4/4

A. Full Name (Last, First, Middle Initial) of Payee The New Media Firm, Inc. <hr/> Mailing Address of Payee 1634 Eye Street, NW Suite 704 <hr/> <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>Washington</td> <td>DC</td> <td>20006</td> </tr> </table> <hr/> Name of Employer _____ Occupation _____				City	State	Zip Code	Washington	DC	20006	Date of Disbursement or Obligation M M / D D / Y Y Y Y 02 / 26 / 2008 <hr/> Amount 80030.05 <hr/> Communication Date M M / D D / Y Y Y Y 02 / 26 / 2008 <hr/> Transaction ID: F93.4101	
City	State	Zip Code									
Washington	DC	20006									
Purpose of Disbursement (including title(s) of communication(s)) TV/Radio Ads-McSame-Ohio											
Name of Federal Candidate JOHN S MCCAIN <hr/> F94.4103		Office Sought: House Senate President	State: District: 00	Disbursement/Obligation For: 2008 <input checked="" type="checkbox"/> Primary General Other (specify) _____							
Name of Federal Candidate 		Office Sought: House Senate President	State: District:	Disbursement/Obligation For: Primary General Other (specify) _____							
Name of Federal Candidate 		Office Sought: House Senate President	State: District:	Disbursement/Obligation For: Primary General Other (specify) _____							
B. Full Name (Last, First, Middle Initial) of Payee Zimmerman & Markman <hr/> Mailing Address of Payee 725 Arizona Avenue <hr/> <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>Santa Monica</td> <td>CA</td> <td>90401</td> </tr> </table> <hr/> Name of Employer _____ Occupation _____				City	State	Zip Code	Santa Monica	CA	90401	Date of Disbursement or Obligation M M / D D / Y Y Y Y 02 / 26 / 2008 <hr/> Amount 81043.01 <hr/> Communication Date M M / D D / Y Y Y Y 02 / 26 / 2008 <hr/> Transaction ID: F93.4104	
City	State	Zip Code									
Santa Monica	CA	90401									
Purpose of Disbursement (including title(s) of communication(s)) Production-McSame-Ohio											
Name of Federal Candidate JOHN S MCCAIN <hr/> F94.4103		Office Sought: House Senate President	State: District: 00	Disbursement/Obligation For: 2008 <input checked="" type="checkbox"/> Primary General Other (specify) _____							
Name of Federal Candidate 		Office Sought: House Senate President	State: District:	Disbursement/Obligation For: Primary General Other (specify) _____							
Name of Federal Candidate 		Office Sought: House Senate President	State: District:	Disbursement/Obligation For: Primary General Other (specify) _____							
SUBTOTAL of Disbursement/Obligation This Page (optional)				141073.06							
TOTAL This Period (last page this line number only) (carry total from last page to line 10)				141073.06							

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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 type="checkbox"/> Hand Delivered	Date of Receipt
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<input type="checkbox"/> USPS Express Mail	Postmarked
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<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
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<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input checked="" type="checkbox"/> Other (Specify): <i>E-Mail</i>	Date of Receipt or Postmarked <i>2/27/08</i>
<i>En</i>	<i>2/28/08</i>
PREPARER	DATE PREPARED

(3/2005)

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