

FEC FORM 5

REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED

To Be Used by Persons (Other than Political Committees) Including Qualified Nonprofit Corporations

1. (a) Name of Individual, Organization or Corporation Nancy Cathleen Robbins		3. FEC Identification Number C C00000000
(b) Address (number and street) <input type="checkbox"/> check if different than previously reported 1400 Dominique Drive		
(c) City, State and ZIP Code Austin TX 78753		
2. Corporate filers only Is the filer a qualified nonprofit corporation? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Individual filers only	Name of Employer None	Occupation None

4. TYPE OF REPORT (check appropriate boxes):

(a) April 15 Quarterly Report 24-Hour Notice 48-Hour Notice

July 15 Quarterly Report

October Quarterly Report

January 31 Year-End Report

(b) Is this Report an amendment? Yes No

5. COVERING PERIOD: FROM ^M0^M1 / ^D0^D1 / ^Y2^Y0^Y0^Y8

THROUGH

^M0^M4 / ^D1^D5 / ^Y2^Y0^Y0^Y8

6. TOTAL CONTRIBUTIONS00

7. TOTAL INDEPENDENT EXPENDITURES..... 4644.00

Under penalty of perjury, I certify that the independent expenditures reported herein were not made with the cooperation or prior consent of, or in constitution with, or at the request or suggestion of, a candidate or a candidate's agent or authorized committee or a political party committee or its agent. In addition, if the independent expenditures 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	SIGNATURE	DATE
Nancy Cathleen Robbins		03/07/2008

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

For further information, contact:
Federal Election Commission, 999 E Street, N.W., Washington, D.C. 20463 Toll Free 800-424-9530, Local 202-694-1100

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**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Nancy Cathleen Robbins

Full Name (Last, First, Middle Initial) of Payee
Nancy Cathleen Robbins

Date
M M / D D / Y Y Y Y
01 / 18 / 2008

Mailing Address
1400 Dominique Drive

Amount
4644.00

City State Zip Code
Austin TX 78753

Purpose of Expenditure
Grassroots advertising Campaign - Austin Loves Ron Paul

Office Sought: House State: TX
 Senate
Presidential President District: _____

Name of Federal Candidate Supported or Opposed by Expenditure:
Ron Paul

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought .00

Disbursement For: 2008 Primary General
 Other (specify) _____

(This area is intentionally left blank for itemized expenditures.)

(a) SUBTOTAL of Itemized Independent Expenditures	4644.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	4644.00
(carry total from last page forward to Line 7)	

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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.

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<input type="checkbox"/> Hand Delivered	Date of Receipt
<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 checked="" type="checkbox"/> Other (Specify): <i>Webform # 187</i>	Date of Receipt or Postmarked <i>3/7/08</i>
<i>EW</i> PREPARER	<i>3/10/08</i> DATE PREPARED