

# 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 CitizenLink (formerly Focus on the Family Action)		<b>2. FEC Identification Number</b> <b>C</b> C30000673
(b) Address (number and street) <input type="checkbox"/> check if different than previously reported 8655 EXPLORER DRIVE	(c) City, State and ZIP Code COLORADO SPRINGS CO 80920	
(d) Name of Employer or Principal Place of Business		(e) Occupation

<b>3. Is This Statement</b> <input checked="" type="checkbox"/> <b>New</b> or <input type="checkbox"/> <b>Amended</b>	<b>4. Covering Period</b>					
	<table border="0"> <tr> <td>M M / D D / Y Y Y Y</td> <td>through</td> <td>M M / D D / Y Y Y Y</td> </tr> <tr> <td>1 0 / 0 1 / 2 0 1 0</td> <td></td> <td>1 0 / 0 7 / 2 0 1 0</td> </tr> </table>	M M / D D / Y Y Y Y	through	M M / D D / Y Y Y Y	1 0 / 0 1 / 2 0 1 0	
M M / D D / Y Y Y Y	through	M M / D D / Y Y Y Y				
1 0 / 0 1 / 2 0 1 0		1 0 / 0 7 / 2 0 1 0				

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

1 0 / 0 7 / 2 0 1 0

**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. Were the disbursements for the electioneering communication made exclusively from donations to a segregated bank account?** Yes  No

**8. Custodian of Records**

(a) Name  
Dan Mellema

(b) Address (number and street)  
8655 Explorer Drive

(c) City, State and ZIP Code  
Colorado Springs CO 80920

(d) Name of Employer or Principal Place of Business  
CitizenLink

(e) Occupation  
Vice President of Finance

**9. Total Donations This Statement** 4220.00

**10. Total Disbursements/Obligations This Statement** 36700.00

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

TYPE OR PRINT NAME OF PERSON COMPLETING FORM Sonja Swiatkiewicz

SIGNATURE Electronically Filed by Sonja Swiatkiewicz DATE 10/07/2010

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**

<b>A.</b>	(a) Name Mrs. Elsa Prince Broekhuizen	<b>Transaction ID :</b> F91.4110	
	(b) Address (number and street) 8655 Explorer Drive		
	(c) City, State and Zip Code Colorado Springs	CO	80920
	(d) Name of Employer or Principal Place of Business	(e) Occupation Board Member	
<b>B.</b>	(a) Name Lt. Gen. Patrick Caruana	<b>Transaction ID :</b> F91.4110	
	(b) Address (number and street) 8655 Explorer Drive		
	(c) City, State and Zip Code Colorado Springs	CO	80920
	(d) Name of Employer or Principal Place of Business	(e) Occupation Chairman	
<b>C.</b>	(a) Name Mr. James D. Daly	<b>Transaction ID :</b> F91.4112	
	(b) Address (number and street) 8655 Explorer Drive		
	(c) City, State and Zip Code Colorado Springs	CO	80920
	(d) Name of Employer or Principal Place of Business CitizenLink	(e) Occupation President	
<b>D.</b>	(a) Name Mr. Robert E. Hamby, Jr.	<b>Transaction ID :</b> F91.4115	
	(b) Address (number and street) 8655 Explorer Drive		
	(c) City, State and Zip Code Colorado Springs	CO	80920
	(d) Name of Employer or Principal Place of Business	(e) Occupation Board Member	
<b>E.</b>	(a) Name Dr. R. Albert Mohler	<b>Transaction ID :</b> F91.4116	
	(b) Address (number and street) 8655 Explorer Drive		
	(c) City, State and Zip Code Colorado Springs	CO	80920
	(d) Name of Employer or Principal Place of Business	(e) Occupation Board Member	

**List of Person(s) Sharing/Exercising Control**

(use additional pages as necessary)

**11. Person(s) Sharing/Exercising Control**

<b>A.</b>	(a) Name Mr. Paul Nelson	<b>Transaction ID : F91.4117</b>	
	(b) Address (number and street) 8655 Explorer Drive		
	(c) City, State and Zip Code Colorado Springs	CO	80920
	(d) Name of Employer or Principal Place of Business	(e) Occupation Board Member	
<b>B.</b>	(a) Name Dr. Kathleen Nielson	<b>Transaction ID : F91.4118</b>	
	(b) Address (number and street) 8655 Explorer Drive		
	(c) City, State and Zip Code Colorado Springs	CO	80920
	(d) Name of Employer or Principal Place of Business	(e) Occupation Board Member	
<b>C.</b>	(a) Name Mr. Tony Wauterlek	<b>Transaction ID : F91.4122</b>	
	(b) Address (number and street) 8655 Explorer Drive		
	(c) City, State and Zip Code Colorado Springs	CO	80920
	(d) Name of Employer or Principal Place of Business	(e) Occupation Board Member	
<b>D.</b>	(a) Name Mr. Daniel Villanueva	<b>Transaction ID : F91.4100</b>	
	(b) Address (number and street) 8655 Explorer Drive		
	(c) City, State and Zip Code Colorado Springs	CO	80920
	(d) Name of Employer or Principal Place of Business	(e) Occupation Board Member	
<b>E.</b>	(a) Name Mr. Lee Torrence	<b>Transaction ID : F91.4121</b>	
	(b) Address (number and street) 8655 Explorer Drive		
	(c) City, State and Zip Code Colorado Springs	CO	80920
	(d) Name of Employer or Principal Place of Business	(e) Occupation Board Member	

# List of Person(s) Sharing/Exercising Control

(use additional pages as necessary)

## 11. Person(s) Sharing/Exercising Control

<b>A.</b>	(a) Name Mr. Kim Robinson	<b>Transaction ID :</b> F91.4120
	(b) Address (number and street) 8655 Explorer Drive	
	(c) City, State and Zip Code Colorado Springs CO 80920	
	(d) Name of Employer or Principal Place of Business	(e) Occupation Board Member
<b>B.</b>	(a) Name Mr. Eric Pillmore	<b>Transaction ID :</b> F91.4119
	(b) Address (number and street) 8655 Explorer Drive	
	(c) City, State and Zip Code Colorado Springs CO 80920	
	(d) Name of Employer or Principal Place of Business	(e) Occupation Board Member

**A.** Full Name of Donor

COMMON SENSE ISSUES INC

Mailing Address of Donor

8190-A BEECHMONT AVENUE - 103

City

State

Zip

CINCINNATI

OH

45255

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 0 4 / 2 0 1 0

Amount

4220.00

Transaction ID : F92.4126

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

4220.00

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

4220.00

A. Form/Schedule : **F92**

in kind contribution

Transaction ID : **F92.4126**

**SCHEDULE 9-B**

**Disbursement(s) Made or Obligations**

<p><b>A.</b> Full Name (Last, First, Middle Initial) of Payee KCYK-FM</p> <hr/> <p>Mailing Address of Payee 1185 9th St. NE</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>Thompson</td> <td>ND</td> <td>58728</td> </tr> </table> <hr/> <p>Name of Employer _____ Occupation _____</p>	City	State	Zip Code	Thompson	ND	58728	<p>Date of Disbursement or Obligation  <table style="width:100%; border: none;"> <tr> <td style="text-align:center;">M M / D D / Y Y Y Y</td> </tr> <tr> <td style="text-align:center;">1 0 / 0 6 / 2 0 1 0</td> </tr> </table> </p> <p>Amount  <table style="width:100%; border: none;"> <tr> <td style="text-align:right;">1920.00</td> </tr> </table> </p> <p>Communication Date  <table style="width:100%; border: none;"> <tr> <td style="text-align:center;">M M / D D / Y Y Y Y</td> </tr> <tr> <td style="text-align:center;">1 0 / 0 7 / 2 0 1 0</td> </tr> </table> </p> <p><b>Transaction ID :</b> F93.4182</p>	M M / D D / Y Y Y Y	1 0 / 0 6 / 2 0 1 0	1920.00	M M / D D / Y Y Y Y	1 0 / 0 7 / 2 0 1 0
City	State	Zip Code										
Thompson	ND	58728										
M M / D D / Y Y Y Y												
1 0 / 0 6 / 2 0 1 0												
1920.00												
M M / D D / Y Y Y Y												
1 0 / 0 7 / 2 0 1 0												
<p>Purpose of Disbursement (including title(s) of communication(s)) radio ad - Always There</p>												
<p>Name of Federal Candidate EARL R. POMEROY</p> <p>F94.4167</p>	<p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: ND District: 00</p>											
<p>Disbursement/Obligation For: 2010  <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify) _____</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:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) _____</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:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) _____</p>												
<p><b>B.</b> Full Name (Last, First, Middle Initial) of Payee KDLO-FM</p> <hr/> <p>Mailing Address of Payee 921 9th Ave SE</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>Watertown</td> <td>SD</td> <td>57201</td> </tr> </table> <hr/> <p>Name of Employer _____ Occupation _____</p>	City	State	Zip Code	Watertown	SD	57201	<p>Date of Disbursement or Obligation  <table style="width:100%; border: none;"> <tr> <td style="text-align:center;">M M / D D / Y Y Y Y</td> </tr> <tr> <td style="text-align:center;">1 0 / 0 1 / 2 0 1 0</td> </tr> </table> </p> <p>Amount  <table style="width:100%; border: none;"> <tr> <td style="text-align:right;">1526.00</td> </tr> </table> </p> <p>Communication Date  <table style="width:100%; border: none;"> <tr> <td style="text-align:center;">M M / D D / Y Y Y Y</td> </tr> <tr> <td style="text-align:center;">1 0 / 0 7 / 2 0 1 0</td> </tr> </table> </p> <p><b>Transaction ID :</b> F93.4143</p>	M M / D D / Y Y Y Y	1 0 / 0 1 / 2 0 1 0	1526.00	M M / D D / Y Y Y Y	1 0 / 0 7 / 2 0 1 0
City	State	Zip Code										
Watertown	SD	57201										
M M / D D / Y Y Y Y												
1 0 / 0 1 / 2 0 1 0												
1526.00												
M M / D D / Y Y Y Y												
1 0 / 0 7 / 2 0 1 0												
<p>Purpose of Disbursement (including title(s) of communication(s)) radio ad - Always There</p>												
<p>Name of Federal Candidate STEPHANIE M HERSETH SANDLIN</p> <p>F94.4132</p>	<p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: SD District: 00</p>											
<p>Disbursement/Obligation For: 2010  <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify) _____</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:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) _____</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:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) _____</p>												
<p><b>SUBTOTAL</b> of Disbursement/Obligation This Page (optional) ..... <table style="width:100%; border: none;"><tr><td style="text-align:right;">3446.00</td></tr></table></p>		3446.00										
3446.00												
<p><b>TOTAL</b> This Period (last page this line number only) ..... <table style="width:100%; border: none;"><tr><td style="text-align:right;"> </td></tr></table> (carry total from last page to line 10)</p>												

**SCHEDULE 9-B**

**Disbursement(s) Made or Obligations**

<b>A.</b> Full Name (Last, First, Middle Initial) of Payee KELO-AM			Date of Disbursement or Obligation M M / D D / Y Y Y Y 1 0 / 0 1 / 2 0 1 0		
Mailing Address of Payee 500 S. Phillips Ave			Amount 2443.00		
City Sioux Falls	State SD	Zip Code 57104	Communication Date M M / D D / Y Y Y Y 1 0 / 0 7 / 2 0 1 0		
Name of Employer		Occupation			
<b>Transaction ID :</b> F93.4135					

Purpose of Disbursement (including title(s) of communication(s))  
radio ad - Always There

Name of Federal Candidate STEPHANIE M HERSETH SANDLIN	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: SD District: 00	Disbursement/Obligation For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
F94.4132			
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>B.</b> Full Name (Last, First, Middle Initial) of Payee KELO-FM			Date of Disbursement or Obligation M M / D D / Y Y Y Y 1 0 / 0 1 / 2 0 1 0		
Mailing Address of Payee 500 S. Phillips Ave			Amount 2443.00		
City Sioux Falls	State SD	Zip Code 57104	Communication Date M M / D D / Y Y Y Y 1 0 / 0 7 / 2 0 1 0		
Name of Employer		Occupation			
<b>Transaction ID :</b> F93.4137					

Purpose of Disbursement (including title(s) of communication(s))  
radio ad - Always There

Name of Federal Candidate STEPHANIE M HERSETH SANDLIN	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: SD District: 00	Disbursement/Obligation For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
F94.4132			
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>SUBTOTAL</b> of Disbursement/Obligation This Page (optional) .....	4886.00
<b>TOTAL</b> This Period (last page this line number only) .....	
(carry total from last page to line 10)	



**SCHEDULE 9-B**  
**Disbursement(s) Made or Obligations**

<p><b>A.</b> Full Name (Last, First, Middle Initial) of Payee KFGO-AM</p> <hr/> <p>Mailing Address of Payee 1020 S. 25th Street</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>Fargo</td> <td>ND</td> <td>58103</td> </tr> </table> <hr/> <p>Name of Employer _____ Occupation _____</p>	City	State	Zip Code	Fargo	ND	58103	<p>Date of Disbursement or Obligation  <table style="width:100%; border: none;"> <tr> <td style="text-align:center;">M M / D D / Y Y Y Y</td> </tr> <tr> <td style="text-align:center;">1 0 / 0 6 / 2 0 1 0</td> </tr> </table> </p> <p>Amount  <table style="width:100%; border: none;"> <tr> <td style="text-align:right;">2880.00</td> </tr> </table> </p> <p>Communication Date  <table style="width:100%; border: none;"> <tr> <td style="text-align:center;">M M / D D / Y Y Y Y</td> </tr> <tr> <td style="text-align:center;">1 0 / 0 7 / 2 0 1 0</td> </tr> </table> </p> <p><b>Transaction ID :</b> F93.4168</p>	M M / D D / Y Y Y Y	1 0 / 0 6 / 2 0 1 0	2880.00	M M / D D / Y Y Y Y	1 0 / 0 7 / 2 0 1 0
City	State	Zip Code										
Fargo	ND	58103										
M M / D D / Y Y Y Y												
1 0 / 0 6 / 2 0 1 0												
2880.00												
M M / D D / Y Y Y Y												
1 0 / 0 7 / 2 0 1 0												
<p>Purpose of Disbursement (including title(s) of communication(s)) radio ad - Always There</p>												
<p>Name of Federal Candidate EARL R. POMEROY</p> <p>F94.4167</p>	<p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: ND District: 00</p>											
<p>Disbursement/Obligation For: 2010  <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify) _____</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:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) _____</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:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) _____</p>												
<p><b>B.</b> Full Name (Last, First, Middle Initial) of Payee KFYR-AM</p> <hr/> <p>Mailing Address of Payee 3500 East Rosser Ave.</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>Bismark</td> <td>ND</td> <td>58501</td> </tr> </table> <hr/> <p>Name of Employer _____ Occupation _____</p>	City	State	Zip Code	Bismark	ND	58501	<p>Date of Disbursement or Obligation  <table style="width:100%; border: none;"> <tr> <td style="text-align:center;">M M / D D / Y Y Y Y</td> </tr> <tr> <td style="text-align:center;">1 0 / 0 6 / 2 0 1 0</td> </tr> </table> </p> <p>Amount  <table style="width:100%; border: none;"> <tr> <td style="text-align:right;">2560.00</td> </tr> </table> </p> <p>Communication Date  <table style="width:100%; border: none;"> <tr> <td style="text-align:center;">M M / D D / Y Y Y Y</td> </tr> <tr> <td style="text-align:center;">1 0 / 0 7 / 2 0 1 0</td> </tr> </table> </p> <p><b>Transaction ID :</b> F93.4174</p>	M M / D D / Y Y Y Y	1 0 / 0 6 / 2 0 1 0	2560.00	M M / D D / Y Y Y Y	1 0 / 0 7 / 2 0 1 0
City	State	Zip Code										
Bismark	ND	58501										
M M / D D / Y Y Y Y												
1 0 / 0 6 / 2 0 1 0												
2560.00												
M M / D D / Y Y Y Y												
1 0 / 0 7 / 2 0 1 0												
<p>Purpose of Disbursement (including title(s) of communication(s)) radio ad - Always There</p>												
<p>Name of Federal Candidate EARL R. POMEROY</p> <p>F94.4167</p>	<p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: ND District: 00</p>											
<p>Disbursement/Obligation For: 2010  <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify) _____</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:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) _____</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:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) _____</p>												
<p><b>SUBTOTAL</b> of Disbursement/Obligation This Page (optional) ..... <table style="float:right; border: 1px solid black; width: 200px; text-align: right;">5440.00</table></p>												
<p><b>TOTAL</b> This Period (last page this line number only) ..... <table style="float:right; border: 1px solid black; width: 200px; text-align: right;"> </table> (carry total from last page to line 10)</p>												

**SCHEDULE 9-B**

**Disbursement(s) Made or Obligations**

<p><b>A.</b> Full Name (Last, First, Middle Initial) of Payee KGFX-AM</p> <hr/> <p>Mailing Address of Payee 214 W. Pleasant</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>Pierre</td> <td>SD</td> <td>57501</td> </tr> </table> <hr/> <p>Name of Employer _____ Occupation _____</p> <hr/> <p>Purpose of Disbursement (including title(s) of communication(s)) radio ad - Always There</p> <hr/> <table style="width:100%; border: none;"> <tr> <td style="width:30%;">Name of Federal Candidate STEPHANIE M HERSETH SANDLIN</td> <td style="width:15%;">Office Sought:</td> <td style="width:15%;"><input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</td> <td style="width:10%;">State: SD</td> <td style="width:10%;">District: 00</td> <td style="width:20%;">Disbursement/Obligation For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____</td> </tr> <tr> <td>F94.4132</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </table> <hr/> <table style="width:100%; 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border: none;"> <tr> <td style="border: 1px solid black; padding: 2px;">M</td> <td style="border: 1px solid black; padding: 2px;">M</td> <td style="border: 1px solid black; padding: 2px;">/</td> <td style="border: 1px solid black; padding: 2px;">D</td> <td style="border: 1px solid black; padding: 2px;">D</td> <td style="border: 1px solid black; padding: 2px;">/</td> <td style="border: 1px solid black; padding: 2px;">Y</td> <td style="border: 1px solid black; padding: 2px;">Y</td> <td style="border: 1px solid black; padding: 2px;">Y</td> <td style="border: 1px solid black; padding: 2px;">Y</td> </tr> <tr> <td style="text-align: center;">1</td> <td style="text-align: center;">0</td> <td></td> <td style="text-align: center;">0</td> <td style="text-align: center;">1</td> <td></td> <td style="text-align: center;">2</td> <td style="text-align: center;">0</td> <td style="text-align: center;">1</td> <td style="text-align: center;">0</td> </tr> </table> </p> <p>Amount  <table style="width:100%; border: none;"> <tr> <td style="border: 1px solid black; width: 80%;"></td> <td style="border: 1px solid black; width: 20%; text-align: right;">765.00</td> </tr> </table> </p> <p>Communication Date  <table style="width:100%; border: none;"> <tr> <td style="border: 1px solid black; padding: 2px;">M</td> <td style="border: 1px solid black; padding: 2px;">M</td> <td style="border: 1px solid black; padding: 2px;">/</td> <td style="border: 1px solid black; padding: 2px;">D</td> <td style="border: 1px solid black; padding: 2px;">D</td> <td style="border: 1px solid black; padding: 2px;">/</td> <td style="border: 1px solid black; padding: 2px;">Y</td> <td style="border: 1px solid black; padding: 2px;">Y</td> <td style="border: 1px solid black; padding: 2px;">Y</td> <td style="border: 1px solid black; padding: 2px;">Y</td> </tr> <tr> <td style="text-align: center;">1</td> <td style="text-align: center;">0</td> <td></td> <td style="text-align: center;">0</td> <td style="text-align: center;">7</td> <td></td> <td style="text-align: center;">2</td> <td style="text-align: center;">0</td> <td style="text-align: center;">1</td> <td style="text-align: center;">0</td> </tr> </table> </p> <p><b>Transaction ID :</b> F93.4130</p>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		0	1		2	0	1	0		765.00	M	M	/	D	D	/	Y	Y	Y	Y	1	0		0	7		2	0	1	0
City	State	Zip Code																																																																							
Pierre	SD	57501																																																																							
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<p><b>B.</b> Full Name (Last, First, Middle Initial) of Payee KGIM-FM</p> <hr/> <p>Mailing Address of Payee 13541 386th Ave</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>Aberdeen</td> <td>SD</td> <td>57401</td> </tr> </table> <hr/> <p>Name of Employer _____ Occupation _____</p> <hr/> <p>Purpose of Disbursement (including title(s) of communication(s)) radio ads - Always There</p> <hr/> <table style="width:100%; border: none;"> <tr> <td style="width:30%;">Name of Federal Candidate STEPHANIE M HERSETH SANDLIN</td> <td style="width:15%;">Office Sought:</td> <td style="width:15%;"><input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</td> <td style="width:10%;">State: SD</td> <td style="width:10%;">District: 00</td> <td style="width:20%;">Disbursement/Obligation For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____</td> </tr> <tr> <td>F94.4132</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </table> <hr/> <table style="width:100%; 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City	State	Zip Code																																																																							
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Name of Federal Candidate STEPHANIE M HERSETH SANDLIN	Office Sought:	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: SD	District: 00	Disbursement/Obligation For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____																																																																				
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M	M	/	D	D	/	Y	Y	Y	Y																																																																
1	0		0	7		2	0	1	0																																																																
<p><b>SUBTOTAL</b> of Disbursement/Obligation This Page (optional) .....</p> <hr/> <p><b>TOTAL</b> This Period (last page this line number only) ..... (carry total from last page to line 10)</p>		<table style="width:100%; border: none;"> <tr> <td style="border: 1px solid black; width: 80%;"></td> <td style="border: 1px solid black; width: 20%; text-align: right;">1287.00</td> </tr> <tr> <td style="border: 1px solid black; width: 80%;"></td> <td style="border: 1px solid black; width: 20%;"></td> </tr> </table>		1287.00																																																																					
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**SCHEDULE 9-B**

**Disbursement(s) Made or Obligations**

<b>A.</b> Full Name (Last, First, Middle Initial) of Payee KHRT-AM <hr/> Mailing Address of Payee 3600 County Road 19 South <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>Minot</td> <td>ND</td> <td>58701</td> </tr> </table> <hr/> Name of Employer _____ Occupation _____	City	State	Zip Code	Minot	ND	58701	Date of Disbursement or Obligation <table style="width:100%; border: none;"> <tr> <td style="text-align: center;">M M / D D / Y Y Y Y</td> </tr> <tr> <td style="text-align: center;">1 0 / 0 6 / 2 0 1 0</td> </tr> </table> Amount <table style="width:100%; border: none;"> <tr> <td style="text-align: right;">320.00</td> </tr> </table> Communication Date <table style="width:100%; border: none;"> <tr> <td style="text-align: center;">M M / D D / Y Y Y Y</td> </tr> <tr> <td style="text-align: center;">1 0 / 0 7 / 2 0 1 0</td> </tr> </table> <b>Transaction ID :</b> F93.4186	M M / D D / Y Y Y Y	1 0 / 0 6 / 2 0 1 0	320.00	M M / D D / Y Y Y Y	1 0 / 0 7 / 2 0 1 0
City	State	Zip Code										
Minot	ND	58701										
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320.00												
M M / D D / Y Y Y Y												
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Purpose of Disbursement (including title(s) of communication(s)) radio ad - Always There			
Name of Federal Candidate EARL R. POMEROY	Office Sought:	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: ND District: 00 Disbursement/Obligation For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
F94.4167			
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>B.</b> Full Name (Last, First, Middle Initial) of Payee KHRT-FM <hr/> Mailing Address of Payee 3600 County Road 19 South <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>Minot</td> <td>ND</td> <td>58701</td> </tr> </table> <hr/> Name of Employer _____ Occupation _____	City	State	Zip Code	Minot	ND	58701	Date of Disbursement or Obligation <table style="width:100%; border: none;"> <tr> <td style="text-align: center;">M M / D D / Y Y Y Y</td> </tr> <tr> <td style="text-align: center;">1 0 / 0 6 / 2 0 1 0</td> </tr> </table> Amount <table style="width:100%; border: none;"> <tr> <td style="text-align: right;">320.00</td> </tr> </table> Communication Date <table style="width:100%; border: none;"> <tr> <td style="text-align: center;">M M / D D / Y Y Y Y</td> </tr> <tr> <td style="text-align: center;">1 0 / 0 7 / 2 0 1 0</td> </tr> </table> <b>Transaction ID :</b> F93.4188	M M / D D / Y Y Y Y	1 0 / 0 6 / 2 0 1 0	320.00	M M / D D / Y Y Y Y	1 0 / 0 7 / 2 0 1 0
City	State	Zip Code										
Minot	ND	58701										
M M / D D / Y Y Y Y												
1 0 / 0 6 / 2 0 1 0												
320.00												
M M / D D / Y Y Y Y												
1 0 / 0 7 / 2 0 1 0												

Purpose of Disbursement (including title(s) of communication(s)) radio ad - Always There			
Name of Federal Candidate EARL R. POMEROY	Office Sought:	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: ND District: 00 Disbursement/Obligation For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
F94.4167			
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>SUBTOTAL</b> of Disbursement/Obligation This Page (optional) .....	640.00
<b>TOTAL</b> This Period (last page this line number only) ..... (carry total from last page to line 10)	_____

**SCHEDULE 9-B**

**Disbursement(s) Made or Obligations**

<b>A.</b> Full Name (Last, First, Middle Initial) of Payee KIKN-FM			Date of Disbursement or Obligation M M / D D / Y Y Y Y 1 0 / 0 1 / 2 0 1 0		
Mailing Address of Payee 5100 South Tennis Lane			Amount 1467.00		
City	State	Zip Code	Communication Date M M / D D / Y Y Y Y 1 0 / 0 7 / 2 0 1 0		
Sioux Falls	SD	57108	<b>Transaction ID :</b> F93.4133		
Name of Employer Occupation					

Purpose of Disbursement (including title(s) of communication(s))  
radio ad - Always There

Name of Federal Candidate STEPHANIE M HERSETH SANDLIN	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: SD District: 00	Disbursement/Obligation For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
F94.4132			
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>B.</b> Full Name (Last, First, Middle Initial) of Payee KIXX-FM			Date of Disbursement or Obligation M M / D D / Y Y Y Y 1 0 / 0 1 / 2 0 1 0		
Mailing Address of Payee 921 9th Ave SE			Amount 1166.00		
City	State	Zip Code	Communication Date M M / D D / Y Y Y Y 1 0 / 0 7 / 2 0 1 0		
Watertown	SD	57201	<b>Transaction ID :</b> F93.4145		
Name of Employer Occupation					

Purpose of Disbursement (including title(s) of communication(s))  
radio ad - Always There

Name of Federal Candidate STEPHANIE M HERSETH SANDLIN	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: SD District: 00	Disbursement/Obligation For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
F94.4132			
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>SUBTOTAL</b> of Disbursement/Obligation This Page (optional) .....	2633.00
<b>TOTAL</b> This Period (last page this line number only) ..... (carry total from last page to line 10)	



**SCHEDULE 9-B**  
**Disbursement(s) Made or Obligations**

<p><b>A.</b> Full Name (Last, First, Middle Initial) of Payee KMXC-FM</p> <hr/> <p>Mailing Address of Payee 5100 South Tennis Lane</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>Sioux Falls</td> <td>SD</td> <td>57108</td> </tr> </table> <hr/> <p>Name of Employer _____ Occupation _____</p> <hr/> <p>Purpose of Disbursement (including title(s) of communication(s)) radio ad - Always There</p> <hr/> <table style="width:100%; border: none;"> <tr> <td style="width:33%;">Name of Federal Candidate STEPHANIE M HERSETH SANDLIN</td> <td style="width:15%;">Office Sought:</td> <td style="width:15%;"><input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</td> <td style="width:10%;">State: SD</td> <td style="width:10%;">District: 00</td> <td style="width:17%;">Disbursement/Obligation For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____</td> </tr> <tr> <td>F94.4132</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </table> <hr/> <table style="width:100%; border: none;"> <tr> <td style="width:33%;">Name of Federal Candidate</td> <td style="width:15%;">Office Sought:</td> <td style="width:15%;"><input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</td> <td style="width:10%;">State: _____</td> <td style="width:10%;">District: _____</td> <td style="width:17%;">Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____</td> </tr> </table> <hr/> <table style="width:100%; border: none;"> <tr> <td style="width:33%;">Name of Federal Candidate</td> <td style="width:15%;">Office Sought:</td> <td style="width:15%;"><input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</td> <td style="width:10%;">State: _____</td> <td style="width:10%;">District: _____</td> <td style="width:17%;">Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____</td> </tr> </table>	City	State	Zip Code	Sioux Falls	SD	57108	Name of Federal Candidate STEPHANIE M HERSETH SANDLIN	Office Sought:	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: SD	District: 00	Disbursement/Obligation For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	F94.4132						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) _____	<p>Date of Disbursement or Obligation  <table style="width:100%; border: none;"> <tr> <td style="width:33%; text-align: center;">M M / D D / Y Y Y Y</td> </tr> <tr> <td style="text-align: center;">1 0 / 0 1 / 2 0 1 0</td> </tr> </table> </p> <p>Amount  <table style="width:100%; border: none;"> <tr> <td style="width:80%;"></td> <td style="width:20%; text-align: right;">1467.00</td> </tr> </table> </p> <p>Communication Date  <table style="width:100%; border: none;"> <tr> <td style="width:33%; text-align: center;">M M / D D / Y Y Y Y</td> </tr> <tr> <td style="text-align: center;">1 0 / 0 7 / 2 0 1 0</td> </tr> </table> </p> <p><b>Transaction ID :</b> F93.4139</p>	M M / D D / Y Y Y Y	1 0 / 0 1 / 2 0 1 0		1467.00	M M / D D / Y Y Y Y	1 0 / 0 7 / 2 0 1 0
City	State	Zip Code																																			
Sioux Falls	SD	57108																																			
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<p><b>B.</b> Full Name (Last, First, Middle Initial) of Payee KNDR-FM</p> <hr/> <p>Mailing Address of Payee 1400 3rd St NE</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>Mandan</td> <td>ND</td> <td>58554</td> </tr> </table> <hr/> <p>Name of Employer _____ Occupation _____</p> <hr/> <p>Purpose of Disbursement (including title(s) of communication(s)) radio ad - Always There</p> <hr/> <table style="width:100%; border: none;"> <tr> <td style="width:33%;">Name of Federal Candidate EARL R. POMEROY</td> <td style="width:15%;">Office Sought:</td> <td style="width:15%;"><input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</td> <td style="width:10%;">State: ND</td> <td style="width:10%;">District: 00</td> <td style="width:17%;">Disbursement/Obligation For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____</td> </tr> <tr> <td>F94.4167</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </table> <hr/> <table style="width:100%; border: none;"> <tr> <td style="width:33%;">Name of Federal Candidate</td> <td style="width:15%;">Office Sought:</td> <td style="width:15%;"><input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</td> <td style="width:10%;">State: _____</td> <td style="width:10%;">District: _____</td> <td style="width:17%;">Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____</td> </tr> </table> <hr/> <table style="width:100%; border: none;"> <tr> <td style="width:33%;">Name of Federal Candidate</td> <td style="width:15%;">Office Sought:</td> <td style="width:15%;"><input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</td> <td style="width:10%;">State: _____</td> <td style="width:10%;">District: _____</td> <td style="width:17%;">Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____</td> </tr> </table>	City	State	Zip Code	Mandan	ND	58554	Name of Federal Candidate EARL R. POMEROY	Office Sought:	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: ND	District: 00	Disbursement/Obligation For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	F94.4167						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) _____	<p>Date of Disbursement or Obligation  <table style="width:100%; border: none;"> <tr> <td style="width:33%; text-align: center;">M M / D D / Y Y Y Y</td> </tr> <tr> <td style="text-align: center;">1 0 / 0 6 / 2 0 1 0</td> </tr> </table> </p> <p>Amount  <table style="width:100%; border: none;"> <tr> <td style="width:80%;"></td> <td style="width:20%; text-align: right;">250.00</td> </tr> </table> </p> <p>Communication Date  <table style="width:100%; border: none;"> <tr> <td style="width:33%; text-align: center;">M M / D D / Y Y Y Y</td> </tr> <tr> <td style="text-align: center;">1 0 / 0 7 / 2 0 1 0</td> </tr> </table> </p> <p><b>Transaction ID :</b> F93.4178</p>	M M / D D / Y Y Y Y	1 0 / 0 6 / 2 0 1 0		250.00	M M / D D / Y Y Y Y	1 0 / 0 7 / 2 0 1 0
City	State	Zip Code																																			
Mandan	ND	58554																																			
Name of Federal Candidate EARL R. POMEROY	Office Sought:	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: ND	District: 00	Disbursement/Obligation For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____																																
F94.4167																																					
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) _____																																
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M M / D D / Y Y Y Y																																					
1 0 / 0 7 / 2 0 1 0																																					
<p><b>SUBTOTAL</b> of Disbursement/Obligation This Page (optional) .....</p> <hr/> <p><b>TOTAL</b> This Period (last page this line number only) ..... (carry total from last page to line 10)</p>		<table style="width:100%; border: none;"> <tr> <td style="width:80%;"></td> <td style="width:20%; text-align: right;">1717.00</td> </tr> </table> <hr/> <table style="width:100%; border: none;"> <tr> <td style="width:80%;"></td> <td style="width:20%;"></td> </tr> </table>		1717.00																																	
	1717.00																																				

**SCHEDULE 9-B**

**Disbursement(s) Made or Obligations**

<b>A.</b> Full Name (Last, First, Middle Initial) of Payee KOKK-AM			Date of Disbursement or Obligation M M / D D / Y Y Y Y 1 0 / 0 1 / 2 0 1 0		
Mailing Address of Payee 1726 Dakota Ave., S			Amount 309.00		
City Huron	State SD	Zip Code 57350	Communication Date M M / D D / Y Y Y Y 1 0 / 0 7 / 2 0 1 0		
Name of Employer		Occupation			
<b>Transaction ID :</b> F93.4149					

Purpose of Disbursement (including title(s) of communication(s))  
radio ad - Always There

Name of Federal Candidate STEPHANIE M HERSETH SANDLIN	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: SD District: 00	Disbursement/Obligation For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
F94.4132			
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>B.</b> Full Name (Last, First, Middle Initial) of Payee KORN-AM			Date of Disbursement or Obligation M M / D D / Y Y Y Y 1 0 / 0 1 / 2 0 1 0		
Mailing Address of Payee 319 N. Main Street			Amount 632.00		
City Mitchell	State SD	Zip Code 57301	Communication Date M M / D D / Y Y Y Y 1 0 / 0 7 / 2 0 1 0		
Name of Employer		Occupation			
<b>Transaction ID :</b> F93.4152					

Purpose of Disbursement (including title(s) of communication(s))  
radio ad - Always There

Name of Federal Candidate STEPHANIE M HERSETH SANDLIN	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: SD District: 00	Disbursement/Obligation For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
F94.4132			
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>SUBTOTAL</b> of Disbursement/Obligation This Page (optional) .....	941.00
<b>TOTAL</b> This Period (last page this line number only) ..... (carry total from last page to line 10)	

**SCHEDULE 9-B**

**Disbursement(s) Made or Obligations**

<b>A.</b> Full Name (Last, First, Middle Initial) of Payee KOTA-AM			Date of Disbursement or Obligation M M / D D / Y Y Y Y 1 0 / 0 1 / 2 0 1 0		
Mailing Address of Payee 518 St. Joseph's St			Amount 1064.00		
City Rapid City	State SD	Zip Code 57701	Communication Date M M / D D / Y Y Y Y 1 0 / 0 7 / 2 0 1 0		
Name of Employer		Occupation			
<b>Transaction ID :</b> F93.4158					

Purpose of Disbursement (including title(s) of communication(s))  
radio ad - Always There

Name of Federal Candidate STEPHANIE M HERSETH SANDLIN	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: SD District: 00	Disbursement/Obligation For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
F94.4132			
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>B.</b> Full Name (Last, First, Middle Initial) of Payee KOUT-FM			Date of Disbursement or Obligation M M / D D / Y Y Y Y 1 0 / 0 1 / 2 0 1 0		
Mailing Address of Payee 660 Flormann St, Suite 100			Amount 1064.00		
City Rapid City	State SD	Zip Code 57701	Communication Date M M / D D / Y Y Y Y 1 0 / 0 7 / 2 0 1 0		
Name of Employer		Occupation			
<b>Transaction ID :</b> F93.4162					

Purpose of Disbursement (including title(s) of communication(s))  
radio ad - Always There

Name of Federal Candidate STEPHANIE M HERSETH SANDLIN	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: SD District: 00	Disbursement/Obligation For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
F94.4132			
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>SUBTOTAL</b> of Disbursement/Obligation This Page (optional) .....	2128.00
<b>TOTAL</b> This Period (last page this line number only) ..... (carry total from last page to line 10)	



**SCHEDULE 9-B**  
**Disbursement(s) Made or Obligations**

<p><b>A.</b> Full Name (Last, First, Middle Initial) of Payee KQDY-FM</p> <hr/> <p>Mailing Address of Payee 3500 East Rosser Ave.</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>Bismark</td> <td>ND</td> <td>58501</td> </tr> </table> <hr/> <p>Name of Employer _____ Occupation _____</p> <hr/> <p>Purpose of Disbursement (including title(s) of communication(s)) radio ad - Always There</p> <hr/> <table style="width:100%; border: none;"> <tr> <td style="width:33%;">Name of Federal Candidate EARL R. POMEROY</td> <td style="width:15%;">Office Sought:</td> <td style="width:15%;"><input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</td> <td style="width:10%;">State: ND</td> <td style="width:10%;">District: 00</td> <td style="width:17%;">Disbursement/Obligation For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____</td> </tr> <tr> <td>F94.4167</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </table> <hr/> <table style="width:100%; border: none;"> <tr> <td style="width:33%;">Name of Federal Candidate</td> <td style="width:15%;">Office Sought:</td> <td style="width:15%;"><input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</td> <td style="width:10%;">State: _____</td> <td style="width:10%;">District: _____</td> <td style="width:17%;">Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____</td> </tr> </table> <hr/> <table style="width:100%; border: none;"> <tr> <td style="width:33%;">Name of Federal Candidate</td> <td style="width:15%;">Office Sought:</td> <td style="width:15%;"><input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</td> <td style="width:10%;">State: _____</td> <td style="width:10%;">District: _____</td> <td style="width:17%;">Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____</td> </tr> </table>	City	State	Zip Code	Bismark	ND	58501	Name of Federal Candidate EARL R. POMEROY	Office Sought:	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: ND	District: 00	Disbursement/Obligation For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	F94.4167						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) _____	<p>Date of Disbursement or Obligation  <table style="width:100%; border: none;"> <tr> <td style="text-align:center;">M M / D D / Y Y Y Y</td> </tr> <tr> <td style="text-align:center;">1 0 / 0 6 / 2 0 1 0</td> </tr> </table> </p> <p>Amount  <table style="width:100%; border: none;"> <tr> <td style="text-align:right;">1344.00</td> </tr> </table> </p> <p>Communication Date  <table style="width:100%; border: none;"> <tr> <td style="text-align:center;">M M / D D / Y Y Y Y</td> </tr> <tr> <td style="text-align:center;">1 0 / 0 7 / 2 0 1 0</td> </tr> </table> </p> <p><b>Transaction ID :</b> F93.4176</p>	M M / D D / Y Y Y Y	1 0 / 0 6 / 2 0 1 0	1344.00	M M / D D / Y Y Y Y	1 0 / 0 7 / 2 0 1 0
City	State	Zip Code																																		
Bismark	ND	58501																																		
Name of Federal Candidate EARL R. POMEROY	Office Sought:	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: ND	District: 00	Disbursement/Obligation For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____																															
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<p><b>B.</b> Full Name (Last, First, Middle Initial) of Payee KRRZ-AM</p> <hr/> <p>Mailing Address of Payee 1000 20th Ave. SW</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>Minot</td> <td>ND</td> <td>58701</td> </tr> </table> <hr/> <p>Name of Employer _____ Occupation _____</p> <hr/> <p>Purpose of Disbursement (including title(s) of communication(s)) radio ad - Always There</p> <hr/> <table style="width:100%; border: none;"> <tr> <td style="width:33%;">Name of Federal Candidate EARL R. POMEROY</td> <td style="width:15%;">Office Sought:</td> <td style="width:15%;"><input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</td> <td style="width:10%;">State: ND</td> <td style="width:10%;">District: 00</td> <td style="width:17%;">Disbursement/Obligation For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____</td> </tr> <tr> <td>F94.4167</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </table> <hr/> <table style="width:100%; border: none;"> <tr> <td style="width:33%;">Name of Federal Candidate</td> <td style="width:15%;">Office Sought:</td> <td style="width:15%;"><input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</td> <td style="width:10%;">State: _____</td> <td style="width:10%;">District: _____</td> <td style="width:17%;">Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____</td> </tr> </table> <hr/> <table style="width:100%; border: none;"> <tr> <td style="width:33%;">Name of Federal Candidate</td> <td style="width:15%;">Office Sought:</td> <td style="width:15%;"><input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</td> <td style="width:10%;">State: _____</td> <td style="width:10%;">District: _____</td> <td style="width:17%;">Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____</td> </tr> </table>	City	State	Zip Code	Minot	ND	58701	Name of Federal Candidate EARL R. POMEROY	Office Sought:	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: ND	District: 00	Disbursement/Obligation For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	F94.4167						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) _____	<p>Date of Disbursement or Obligation  <table style="width:100%; border: none;"> <tr> <td style="text-align:center;">M M / D D / Y Y Y Y</td> </tr> <tr> <td style="text-align:center;">1 0 / 0 6 / 2 0 1 0</td> </tr> </table> </p> <p>Amount  <table style="width:100%; border: none;"> <tr> <td style="text-align:right;">1344.00</td> </tr> </table> </p> <p>Communication Date  <table style="width:100%; border: none;"> <tr> <td style="text-align:center;">M M / D D / Y Y Y Y</td> </tr> <tr> <td style="text-align:center;">1 0 / 0 7 / 2 0 1 0</td> </tr> </table> </p> <p><b>Transaction ID :</b> F93.4190</p>	M M / D D / Y Y Y Y	1 0 / 0 6 / 2 0 1 0	1344.00	M M / D D / Y Y Y Y	1 0 / 0 7 / 2 0 1 0
City	State	Zip Code																																		
Minot	ND	58701																																		
Name of Federal Candidate EARL R. POMEROY	Office Sought:	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: ND	District: 00	Disbursement/Obligation For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____																															
F94.4167																																				
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) _____																															
M M / D D / Y Y Y Y																																				
1 0 / 0 6 / 2 0 1 0																																				
1344.00																																				
M M / D D / Y Y Y Y																																				
1 0 / 0 7 / 2 0 1 0																																				
<p><b>SUBTOTAL</b> of Disbursement/Obligation This Page (optional) .....</p> <hr/> <p><b>TOTAL</b> This Period (last page this line number only) ..... (carry total from last page to line 10)</p>		<table style="width:100%; border: none;"> <tr> <td style="text-align:right;">2688.00</td> </tr> </table> <hr/> <table style="width:100%; border: none;"> <tr> <td style="text-align:right;"> </td> </tr> </table>	2688.00																																	
2688.00																																				

**SCHEDULE 9-B**

**Disbursement(s) Made or Obligations**

<b>A.</b> Full Name (Last, First, Middle Initial) of Payee KSLT-FM <hr/> Mailing Address of Payee 1853 Fountain Plaza Dr <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>Rapid City</td> <td>SD</td> <td>57702</td> </tr> </table> <hr/> <table style="width:100%; border: none;"> <tr> <td style="width:60%;">Name of Employer</td> <td>Occupation</td> </tr> </table>	City	State	Zip Code	Rapid City	SD	57702	Name of Employer	Occupation	Date of Disbursement or Obligation <table style="width:100%; border: none;"> <tr> <td style="text-align: center;">M M / D D / Y Y Y Y</td> </tr> <tr> <td style="text-align: center;">1 0 / 0 1 / 2 0 1 0</td> </tr> </table> <hr/> Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">801.00</div> <hr/> Communication Date <table style="width:100%; border: none;"> <tr> <td style="text-align: center;">M M / D D / Y Y Y Y</td> </tr> <tr> <td style="text-align: center;">1 0 / 0 7 / 2 0 1 0</td> </tr> </table>	M M / D D / Y Y Y Y	1 0 / 0 1 / 2 0 1 0	M M / D D / Y Y Y Y	1 0 / 0 7 / 2 0 1 0
City	State	Zip Code											
Rapid City	SD	57702											
Name of Employer	Occupation												
M M / D D / Y Y Y Y													
1 0 / 0 1 / 2 0 1 0													
M M / D D / Y Y Y Y													
1 0 / 0 7 / 2 0 1 0													

Transaction ID : F93.4164

Purpose of Disbursement (including title(s) of communication(s))  
radio ad - Always There

Name of Federal Candidate STEPHANIE M HERSETH SANDLIN	Office Sought:	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: SD	District: 00	Disbursement/Obligation For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
F94.4132	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>B.</b> Full Name (Last, First, Middle Initial) of Payee KSNR-FM <hr/> Mailing Address of Payee 1433 Main Ave. N. <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>Thief River Falls</td> <td>MN</td> <td>56701</td> </tr> </table> <hr/> <table style="width:100%; border: none;"> <tr> <td style="width:60%;">Name of Employer</td> <td>Occupation</td> </tr> </table>	City	State	Zip Code	Thief River Falls	MN	56701	Name of Employer	Occupation	Date of Disbursement or Obligation <table style="width:100%; border: none;"> <tr> <td style="text-align: center;">M M / D D / Y Y Y Y</td> </tr> <tr> <td style="text-align: center;">1 0 / 0 6 / 2 0 1 0</td> </tr> </table> <hr/> Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">960.00</div> <hr/> Communication Date <table style="width:100%; border: none;"> <tr> <td style="text-align: center;">M M / D D / Y Y Y Y</td> </tr> <tr> <td style="text-align: center;">1 0 / 0 7 / 2 0 1 0</td> </tr> </table>	M M / D D / Y Y Y Y	1 0 / 0 6 / 2 0 1 0	M M / D D / Y Y Y Y	1 0 / 0 7 / 2 0 1 0
City	State	Zip Code											
Thief River Falls	MN	56701											
Name of Employer	Occupation												
M M / D D / Y Y Y Y													
1 0 / 0 6 / 2 0 1 0													
M M / D D / Y Y Y Y													
1 0 / 0 7 / 2 0 1 0													

Transaction ID : F93.4184

Purpose of Disbursement (including title(s) of communication(s))  
radio ad - Always There

Name of Federal Candidate EARL R. POMEROY	Office Sought:	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: ND	District: 00	Disbursement/Obligation For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
F94.4167	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>SUBTOTAL</b> of Disbursement/Obligation This Page (optional) .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;">1761.00</div>
<b>TOTAL</b> This Period (last page this line number only) ..... (carry total from last page to line 10)	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100%; height: 20px;"></div>

**SCHEDULE 9-B**  
**Disbursement(s) Made or Obligations**

<p><b>A.</b> Full Name (Last, First, Middle Initial) of Payee KTPT-FM</p> <hr/> <p>Mailing Address of Payee 1853 Fountain Plaza Drive</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>Rapid City</td> <td>SD</td> <td>57702</td> </tr> </table> <hr/> <p>Name of Employer _____ Occupation _____</p>	City	State	Zip Code	Rapid City	SD	57702	<p>Date of Disbursement or Obligation  <table style="width:100%; border: none;"> <tr> <td style="text-align:center;">M M / D D / Y Y Y Y</td> </tr> <tr> <td style="text-align:center;">1 0 / 0 1 / 2 0 1 0</td> </tr> </table> </p> <p>Amount  <table style="width:100%; border: none;"> <tr> <td style="text-align:right;">801.00</td> </tr> </table> </p> <p>Communication Date  <table style="width:100%; border: none;"> <tr> <td style="text-align:center;">M M / D D / Y Y Y Y</td> </tr> <tr> <td style="text-align:center;">1 0 / 0 7 / 2 0 1 0</td> </tr> </table> </p> <p><b>Transaction ID :</b> F93.4141</p>	M M / D D / Y Y Y Y	1 0 / 0 1 / 2 0 1 0	801.00	M M / D D / Y Y Y Y	1 0 / 0 7 / 2 0 1 0
City	State	Zip Code										
Rapid City	SD	57702										
M M / D D / Y Y Y Y												
1 0 / 0 1 / 2 0 1 0												
801.00												
M M / D D / Y Y Y Y												
1 0 / 0 7 / 2 0 1 0												
<p>Purpose of Disbursement (including title(s) of communication(s)) radio ad - Always There</p>												
<p>Name of Federal Candidate STEPHANIE M HERSETH SANDLIN</p> <p>F94.4132</p>	<p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: SD District: 00</p>											
<p>Disbursement/Obligation For: 2010  <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify) _____</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:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) _____</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:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) _____</p>												
<p><b>B.</b> Full Name (Last, First, Middle Initial) of Payee KVOX-FM</p> <hr/> <p>Mailing Address of Payee 2720 7th Ave. S.</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>Fargo</td> <td>ND</td> <td>58103</td> </tr> </table> <hr/> <p>Name of Employer _____ Occupation _____</p>	City	State	Zip Code	Fargo	ND	58103	<p>Date of Disbursement or Obligation  <table style="width:100%; border: none;"> <tr> <td style="text-align:center;">M M / D D / Y Y Y Y</td> </tr> <tr> <td style="text-align:center;">1 0 / 0 6 / 2 0 1 0</td> </tr> </table> </p> <p>Amount  <table style="width:100%; border: none;"> <tr> <td style="text-align:right;">3584.00</td> </tr> </table> </p> <p>Communication Date  <table style="width:100%; border: none;"> <tr> <td style="text-align:center;">M M / D D / Y Y Y Y</td> </tr> <tr> <td style="text-align:center;">1 0 / 0 7 / 2 0 1 0</td> </tr> </table> </p> <p><b>Transaction ID :</b> F93.4172</p>	M M / D D / Y Y Y Y	1 0 / 0 6 / 2 0 1 0	3584.00	M M / D D / Y Y Y Y	1 0 / 0 7 / 2 0 1 0
City	State	Zip Code										
Fargo	ND	58103										
M M / D D / Y Y Y Y												
1 0 / 0 6 / 2 0 1 0												
3584.00												
M M / D D / Y Y Y Y												
1 0 / 0 7 / 2 0 1 0												
<p>Purpose of Disbursement (including title(s) of communication(s)) radio ad - Always There</p>												
<p>Name of Federal Candidate EARL R. POMEROY</p> <p>F94.4167</p>	<p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: ND District: 00</p>											
<p>Disbursement/Obligation For: 2010  <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify) _____</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:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) _____</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:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) _____</p>												
<p><b>SUBTOTAL</b> of Disbursement/Obligation This Page (optional) ..... <table style="float:right; border: 1px solid black; width: 150px; text-align: right;">4385.00</table></p>												
<p><b>TOTAL</b> This Period (last page this line number only) ..... <table style="float:right; border: 1px solid black; width: 150px; text-align: right;"> </table> (carry total from last page to line 10)</p>												

**SCHEDULE 9-B**

**Disbursement(s) Made or Obligations**

<b>A.</b> Full Name (Last, First, Middle Initial) of Payee KZMX-AM <hr/> Mailing Address of Payee Wind Cave Road <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>Hot Springs</td> <td>SD</td> <td>57747</td> </tr> </table> <hr/> <table style="width:100%; border: none;"> <tr> <td style="width:60%;">Name of Employer</td> <td style="width:40%;">Occupation</td> </tr> </table>	City	State	Zip Code	Hot Springs	SD	57747	Name of Employer	Occupation	Date of Disbursement or Obligation <table style="width:100%; border: none;"> <tr> <td style="text-align: center;">M M / D D / Y Y Y Y</td> </tr> <tr> <td style="text-align: center;">1 0 / 0 1 / 2 0 1 0</td> </tr> </table> <hr/> Amount <table style="width:100%; border: none;"> <tr> <td style="text-align: right;">508.00</td> </tr> </table> <hr/> Communication Date <table style="width:100%; border: none;"> <tr> <td style="text-align: center;">M M / D D / Y Y Y Y</td> </tr> <tr> <td style="text-align: center;">1 0 / 0 7 / 2 0 1 0</td> </tr> </table> <hr/> <b>Transaction ID :</b> F93.4156	M M / D D / Y Y Y Y	1 0 / 0 1 / 2 0 1 0	508.00	M M / D D / Y Y Y Y	1 0 / 0 7 / 2 0 1 0
City	State	Zip Code												
Hot Springs	SD	57747												
Name of Employer	Occupation													
M M / D D / Y Y Y Y														
1 0 / 0 1 / 2 0 1 0														
508.00														
M M / D D / Y Y Y Y														
1 0 / 0 7 / 2 0 1 0														

Purpose of Disbursement (including title(s) of communication(s))  
 radio ad - Always There

Name of Federal Candidate STEPHANIE M HERSETH SANDLIN	Office Sought:	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: SD	District: 00	Disbursement/Obligation For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
F94.4132	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>B.</b> Full Name (Last, First, Middle Initial) of Payee KZMX-FM <hr/> Mailing Address of Payee Wind Cave Road <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>Hot Springs</td> <td>SD</td> <td>57747</td> </tr> </table> <hr/> <table style="width:100%; border: none;"> <tr> <td style="width:60%;">Name of Employer</td> <td style="width:40%;">Occupation</td> </tr> </table>	City	State	Zip Code	Hot Springs	SD	57747	Name of Employer	Occupation	Date of Disbursement or Obligation <table style="width:100%; border: none;"> <tr> <td style="text-align: center;">M M / D D / Y Y Y Y</td> </tr> <tr> <td style="text-align: center;">1 0 / 0 1 / 2 0 1 0</td> </tr> </table> <hr/> Amount <table style="width:100%; border: none;"> <tr> <td style="text-align: right;">508.00</td> </tr> </table> <hr/> Communication Date <table style="width:100%; border: none;"> <tr> <td style="text-align: center;">M M / D D / Y Y Y Y</td> </tr> <tr> <td style="text-align: center;">1 0 / 0 7 / 2 0 1 0</td> </tr> </table> <hr/> <b>Transaction ID :</b> F93.4154	M M / D D / Y Y Y Y	1 0 / 0 1 / 2 0 1 0	508.00	M M / D D / Y Y Y Y	1 0 / 0 7 / 2 0 1 0
City	State	Zip Code												
Hot Springs	SD	57747												
Name of Employer	Occupation													
M M / D D / Y Y Y Y														
1 0 / 0 1 / 2 0 1 0														
508.00														
M M / D D / Y Y Y Y														
1 0 / 0 7 / 2 0 1 0														

Purpose of Disbursement (including title(s) of communication(s))  
 radio ad - Always There

Name of Federal Candidate STEPHANIE M HERSETH SANDLIN	Office Sought:	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: SD	District: 00	Disbursement/Obligation For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
F94.4132	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>SUBTOTAL</b> of Disbursement/Obligation This Page (optional) .....	1016.00
<b>TOTAL</b> This Period (last page this line number only) ..... (carry total from last page to line 10)	_____

**SCHEDULE 9-B**

**Disbursement(s) Made or Obligations**

<b>A.</b> Full Name (Last, First, Middle Initial) of Payee WDAY-AM <hr/> Mailing Address of Payee 301 8th Street S. <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>Fargo</td> <td>ND</td> <td>58103</td> </tr> </table> <hr/> <table style="width:100%; border: none;"> <tr> <td style="width:60%;">Name of Employer</td> <td style="width:40%;">Occupation</td> </tr> </table>	City	State	Zip Code	Fargo	ND	58103	Name of Employer	Occupation	Date of Disbursement or Obligation <table style="width:100%; border: none;"> <tr> <td style="text-align: center;">M M / D D / Y Y Y Y</td> </tr> <tr> <td style="text-align: center;">1 0 / 0 6 / 2 0 1 0</td> </tr> </table> <hr/> Amount <table style="width:100%; border: none;"> <tr> <td style="text-align: right;">2160.00</td> </tr> </table> <hr/> Communication Date <table style="width:100%; border: none;"> <tr> <td style="text-align: center;">M M / D D / Y Y Y Y</td> </tr> <tr> <td style="text-align: center;">1 0 / 0 7 / 2 0 1 0</td> </tr> </table> <hr/> <b>Transaction ID :</b> F93.4170	M M / D D / Y Y Y Y	1 0 / 0 6 / 2 0 1 0	2160.00	M M / D D / Y Y Y Y	1 0 / 0 7 / 2 0 1 0
City	State	Zip Code												
Fargo	ND	58103												
Name of Employer	Occupation													
M M / D D / Y Y Y Y														
1 0 / 0 6 / 2 0 1 0														
2160.00														
M M / D D / Y Y Y Y														
1 0 / 0 7 / 2 0 1 0														

Purpose of Disbursement (including title(s) of communication(s))  
 radio ad - Always There

Name of Federal Candidate EARL R. POMEROY	Office Sought:	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: ND	District: 00	Disbursement/Obligation For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
F94.4167					
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>SUBTOTAL</b> of Disbursement/Obligation This Page (optional) .....	2160.00
<b>TOTAL</b> This Period (last page this line number only) ..... (carry total from last page to line 10)	36700.00