FEC FORM 9

24 HOUR NOTICE OF DISBURSEMENTS/OBLIGATIONS FOR ELECTIONEERING COMMUNICATIONS

1. Person Making the Disbursements/Obligations

(a) Name: COUNCIL FOR CITIZENS AGAINST GOVERNMENT WASTE

(b) Address (number and street) ☐ check if different than previously reported: 1301 CONNECTICUT AVE NW STE 400

(c) City, State and ZIP Code: WASHINGTON, DC 20036

(d) Name of Employer or Principal Place of Business

(e) Occupation

2. FEC Identification Number C

3. Is This Statement ☒ New or ☐ Amended

4. Covering Period 08/21/2008 through 08/26/2008

5. (a) Date of Public Distribution(s) 08/21/2008 **(b) Communication Title** SUNNY FLORIDA

6. The filer is a(n): (a) ☐ Individual (b) ☐ Unincorporated Organization (c) ☐ Qualified Nonprofit Corporation (11 CFR 114.10)

(d) ☒ Corporation, Labor Organization or Qualified Nonprofit Corporation making communications under 11 CFR 114.15

(e) ☐ Other, specify: _____

7. If the filer is an individual, unincorporated organization or qualified nonprofit corporation, were the disbursements made exclusively from donations to a segregated bank account? Yes ☐ No ☒

8. Custodian of Records

(a) Name: THOMAS A SCHATZ / R.J. TEDESCHI

(b) Address (number and street): 1301 CONNECTICUT AVE NW STE 400

(c) City, State and ZIP Code: WASHINGTON DC 20036

(d) Name of Employer or Principal Place of Business

(e) Occupation

9. Total Donations This Statement 25000.00

10. Total Disbursements/Obligations This Statement 24,998.1

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

TYPE OR PRINT NAME OF PERSON COMPLETING FORM: R.J. TEDESCHI

SIGNATURE _____ DATE 8/22/08

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

FEC FORM 9 (REV. 12/2007)

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