Bridget_Weiss@aporter.com on 08/25/2008 07:36:57 PM

To: 2022190174@fcc.gov
cc: "Ken Weber" <ken.weber@one.org>

Subject: The ONE Campaign - Form 9

On behalf of The ONE Campaign, please find attached a Form 9 disclosure. Although the communication at issue does not refer to any clearly identified federal candidate (instead containing the voices of the spouses of two federal candidates), The ONE Campaign is proceeding with this filing out of an abundance of caution. This filing is being made via email, as the online webform appears to provide an error message where the form does not refer to a federal candidate.

Please contact me if you have questions.

Sincerely,
Bridget M. Weiss
Arnold & Porter LLP
Counsel to The ONE Campaign

(See attached file: DOC000.pdf)

Bridget Weiss
Arnold & Porter LLP
555 Twelfth Street, NW
Washington, DC 20004-1206

Bridget_Weiss@aporter.com
Telephone: 202-942-5839
Fax: 202-942-5999

For more information about Arnold & Porter LLP, click here:

http://www.arnoldporter.com DOC000.pdf

FEC FORM 9

24 HOUR NOTICE OF DISBURSEMENTS/OBLIGATIONS FOR ELECTIONEERING COMMUNICATIONS

1. Person Making the Disbursements/Obligations

(a) Name
The ONE Campaign

(b) Address (number and street) ☐ check if different than previously reported
1400 Eye Street, NW

(c) City, State and ZIP Code
Washington, DC 20005

2. FEC Identification Number
C 3 0 0 0 0 8 0 6

(d) Name of Employer or Principal Place of Business

(e) Occupation

3. Is This Statement X New / or Amended

4. Covering Period 08 24 2008 through 09 04 2008

5. (a) Date of Public Distribution(s) 08 27 2008 **(b) Communication Title** "Voices" ad

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

8. Custodian of Records

(a) Name
David Lane

(b) Address (number and street)
1400 Eye Street, NW

(c) City, State and ZIP Code
Washington, DC 20005

(d) Name of Employer or Principal Place of Business
The ONE Campaign

(e) Occupation
President and CEO

9. Total Donations This Statement 0.00

10. Total Disbursements/Obligations This Statement 1,809,436.00

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

TYPE OR PRINT NAME OF PERSON COMPLETING FORM KEN WEBER, CFO

SIGNATURE _____ DATE AUG 25, 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.

FEC FORM 9 (REV. 12/2007)

28039821500

11. Person(s) Sharing/Exercising Control

A. (a) Name
David Lane
(b) Address (number and street)
1400 Eye Street, NW
(c) City, State and ZIP Code
Washington, DC 20005
(d) Name of Employer or Principal Place of Business
The ONE Campaign
(e) Occupation
President and CEO

B. (a) Name

(b) Address (number and street)

(c) City, State and ZIP Code

(d) Name of Employer or Principal Place of Business

(e) Occupation

C. (a) Name

(b) Address (number and street)

(c) City, State and ZIP Code

(d) Name of Employer or Principal Place of Business

(e) Occupation

D. (a) Name

(b) Address (number and street)

(c) City, State and ZIP Code

(d) Name of Employer or Principal Place of Business

(e) Occupation

E. (a) Name

(b) Address (number and street)

(c) City, State and ZIP Code

(d) Name of Employer or Principal Place of Business

(e) Occupation

28039821501

SCHEDULE 9-A
Donation(s) Received

A. Full Name of Donor

None

Mailing Address of Donor

City | State | Zip

Date of Receipt

Amount

B. Full Name of Donor

Mailing Address of Donor

City | State | Zip

Date of Receipt

Amount

C. Full Name of Donor

Mailing Address of Donor

City | State | Zip

Date of Receipt

Amount

D. Full Name of Donor

Mailing Address of Donor

City | State | Zip

Date of Receipt

Amount

E. Full Name of Donor

Mailing Address of Donor

City | State | Zip

Date of Receipt

Amount

SUBTOTAL of Donations This Page (optional) ▶ 0.00

TOTAL This Period (last page this line number only) ▶ 0.00
(carry total from last page to Line 9)

28039821502

SCHEDULE 9-B
Disbursement(s) Made or Obligation(s)

A. Full Name (Last, First, Middle Initial) of Payee
The Glover Park Group LLC
Mailing Address of Payee
3299 K Street, NW, Suite 500
City | State | Zip Code
Washington, DC 20007
Name of Employer | Occupation

Date of Disbursement or Obligation: 08 19 2008
Amount: 1,557,559.00
Communication Date: 08 24 2008

Purpose of Disbursement (including title(s) of communication(s))
Media buy, "Voices"

Name of Federal Candidate	Office Sought	State / District	Disbursement/Obligation For
None (Cindy McCain)	[ ] House [ ] Senate [X] President	State: National District:	[ ] Primary [X] General [ ] Other (specify)
None (Michelle Obama)	[ ] House [ ] Senate [X] President	State: District:	[ ] Primary [X] General [ ] Other (specify)
	[ ] House [ ] Senate [ ] President	State: District:	[ ] Primary [ ] General [ ] Other (specify)

B. Full Name (Last, First, Middle Initial) of Payee
The Martin Agency
Mailing Address of Payee
One Shockhoe Plaza
City | State | Zip Code
Richmond, VA 23219
Name of Employer | Occupation

Date of Disbursement or Obligation: 08 11 2008
Amount: 249,817.00
Communication Date:

Purpose of Disbursement (including title(s) of communication(s))
Ad production, "Voices"

Name of Federal Candidate	Office Sought	State / District	Disbursement/Obligation For
None (Cindy McCain)	[ ] House [ ] Senate [X] President	State: National District:	[ ] Primary [X] General [ ] Other (specify)
None (Michelle Obama)	[ ] House [ ] Senate [X] President	State: District:	[ ] Primary [X] General [ ] Other (specify)
	[ ] House [ ] Senate [ ] President	State: District:	[ ] Primary [ ] General [ ] Other (specify)

SUBTOTAL of Disbursements/Obligations This Page (optional) ▶ 1809436.00

TOTAL This Period (last page this one number only; carry total from last page to Line 16) ▶ 1809436.00

28039821503

Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
The FEC added this page to the end of this filing to indicate how it was received.

☐ Hand Delivered	Date of Receipt
☐ USPS First Class Mail	Postmarked
☐ USPS Registered/Certified	Postmarked (R/C)
☐ USPS Priority Mail Delivery Confirmation™ or Signature Confirmation™ Label ☐	Postmarked
☐ USPS Express Mail	Postmarked
☐ Postmark Illegible	
☐ No Postmark	
☐ Overnight Delivery Service (Specify): Next Business Day Delivery ☐	Shipping Date
☐ Received from House Records & Registration Office	Date of Receipt
☐ Received from Senate Public Records Office	Date of Receipt
☐ Received from Electronic Filing Office	Date of Receipt
☑ Other (Specify): E-MAIL	Date of Receipt or Postmarked 8/26/08
JM/A PREPARER	8/26/08 DATE PREPARED

(3/2005)

28039821504