

FEC FORM 9

24 HOUR NOTICE OF DISBURSEMENTS/OBLIGATIONS FOR ELECTIONEERING COMMUNICATIONS

1. Person Making the Disbursements/Obligations

(a) Name

AMERICAN FEDERATION OF LABOR CONGRESS OF INDUSTRIAL ORGANIZATIONS AFL-CIO

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

815 16th STREET, NW

(c) City, State and ZIP Code

Washington, DC 20006

FEC Identification Number

C

(d) Name of Employer or Principal Place of Business

(e) Occupation

3. Is This Statement

New
or

Amended

4. Covering Period

08 20 2008
through

08 22 2008

5. (a) Date of Public Distribution(s)

08 22 2008

(b) Communication Title

Media Buys - Radio

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

Richard Trumka, Secy Treasurer

(b) Address (number and street)

815 16th Street, NW

(c) City, State and ZIP Code

Washington, DC 20006

(d) Name of Employer or Principal Place of Business

(e) Occupation

9. Total Donations This Statement

0.00

10. Total Disbursements/Obligations This Statement

95,096.00

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

TYPE OR PRINT NAME OF PERSON COMPLETING FORM

RICHARD TRUMKA

SIGNATURE

Richard Trumka

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)

28039820503

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

11. Person(s) Sharing/Exercising Control

A. (a) Name Richard Trunka
 (b) Address (number and street) 815 16th Street, NW Washington, DC 20006
 (c) City, State and ZIP Code
 (d) Name of Employer or Principal Place of Business AFL-CIO
 (e) Occupation Secy Treasurer

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

28039820504

SCHEDULE 9-A
Donation(s) Received

PAGE **3** OF **4**

28039820505

A. Full Name of Donor <hr/> Mailing Address of Donor <hr/> City State Zip	Date of Receipt <hr/> Amount
B. Full Name of Donor <hr/> Mailing Address of Donor <hr/> City State Zip	Date of Receipt <hr/> Amount
C. Full Name of Donor <hr/> Mailing Address of Donor <hr/> City State Zip	Date of Receipt <hr/> Amount
D. Full Name of Donor <hr/> Mailing Address of Donor <hr/> City State Zip	Date of Receipt <hr/> Amount
E. Full Name of Donor <hr/> Mailing Address of Donor <hr/> City State Zip	Date of Receipt <hr/> Amount

SUBTOTAL of Donations This Page (optional) ▶	00
TOTAL This Period (last page this line number only) ▶ (carry total from last page to Line 9)	00

SCHEDULE 9-B

Disbursement(s) Made or Obligation(s)

A. Full Name (Last, First, Middle Initial) of Payee Media Strategies and Research				Date of Disbursement or Obligation 08 20 2008	
Mailing Address of Payee 1580 Lincoln Street Suite 510				Amount 12,000.00	
City Denver,	State CO	Zip Code 80203			
Name of Employer Radio Media Ad				Communication Date 08 22 2008	
Purpose of Disbursement (Including title(s) of communication(s)) John Sununu Toot					
Name of Federal Candidate		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President		State: NH District: _____	
Disbursement/Obligation For: <input checked="" 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) _____					
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. Full Name (Last, First, Middle Initial) of Payee Media Strategies and Research				Date of Disbursement or Obligation 08 20 2008	
Mailing Address of Payee 1580 Lincoln Street Suite 510				Amount 23,096.00	
City Denver,	State CO	Zip Code 80203			
Name of Employer Radio Media Ad				Communication Date 08 22 2008	
Purpose of Disbursement (Including title(s) of communication(s)) Mary Landrieu Push Back					
Name of Federal Candidate		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President		State: LA District: _____	
Disbursement/Obligation For: <input checked="" 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) _____					
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) _____					
SUBTOTAL of Disbursements/Obligations This Page (optional)				95,096.00	
TOTAL This Period (last page this line number only) (carry total from last page to Line 10)				95,096.00	

28039820506

**Federal Election Commission
 ENVELOPE REPLACEMENT PAGE
 FOR INCOMING DOCUMENTS**

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<input type="checkbox"/> Hand Delivered	Date of Receipt
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<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
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28039820507