

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 FOCUS ON THE FAMILY ACTION		2. FEC Identification Number C 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

3. Is This Statement <input checked="" type="checkbox"/> New or <input type="checkbox"/> Amended	4. Covering Period					
	<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 1 / 0 4 / 2 0 0 8</td> <td></td> <td>1 1 / 1 9 / 2 0 0 8</td> </tr> </table>	M M / D D / Y Y Y Y	through	M M / D D / Y Y Y Y	1 1 / 0 4 / 2 0 0 8	
M M / D D / Y Y Y Y	through	M M / D D / Y Y Y Y				
1 1 / 0 4 / 2 0 0 8		1 1 / 1 9 / 2 0 0 8				

5. (a) Date of Public Distribution(s) 1 1 / 1 9 / 2 0 0 8 **(b) Communication Title** Georgia Senate Runoff Election Radio Ad

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
Mrs. Sonja Kristine Swiatkiewicz

(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
Focus on the Family Action

(e) Occupation
Director, Issues Response

9. Total Donations This Statement 0.00

10. Total Disbursements/Obligations This Statement 35310.00

Under penalty of perjury, I certify that this statement is true, correct and complete.
 TYPE OR PRINT NAME OF PERSON COMPLETING FORM Mrs. Sonja Kristine Swiatkiewicz
 SIGNATURE Electronically Filed by Mrs. Sonja Kristine Swiatkiewicz DATE 11/19/2008

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

List of Person(s) Sharing/Exercising Control

(use additional pages as necessary)

11. Person(s) Sharing/Exercising Control

A.	(a) Name Mr. Bobb Biehl	Transaction ID : F91.4108	
	(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.	(a) Name Mrs. Elsa Prince Broekhuizen	Transaction ID : F91.4109	
	(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	
C.	(a) Name Lt. Gen. Patrick Caruana	Transaction ID : 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 Vice Chairman	
D.	(a) Name Mr. James D. Daly	Transaction ID : F91.4111	
	(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 Focus on the Family Action	(e) Occupation President	
E.	(a) Name Dr. James C. Dobson	Transaction ID : 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	(e) Occupation Chairman	

List of Person(s) Sharing/Exercising Control

(use additional pages as necessary)

11. Person(s) Sharing/Exercising Control

A.	(a) Name Mrs. Shirley Dobson	Transaction ID : F91.4113	
	(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 Secretary	
B.	(a) Name Mr. Robert E. Hamby, Jr.	Transaction ID : F91.4114	
	(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	
C.	(a) Name Dr. R. Albert Mohler	Transaction ID : 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	
D.	(a) Name Dr. Kathleen Nielson	Transaction ID : F91.4117	
	(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	
E.	(a) Name Mr. Eric Pillmore	Transaction ID : F91.4118	
	(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

A.	(a) Name Mr. Kim Robinson	Transaction ID : 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
B.	(a) Name Mr. Lee Torrence	Transaction ID : 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
C.	(a) Name Mr. Daniel Villanueva	Transaction ID : F91.4099
	(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

SCHEDULE 9-B

Disbursement(s) Made or Obligations

A. Full Name (Last, First, Middle Initial) of Payee WDUN-AM			Date of Disbursement or Obligation M M / D D / Y Y Y Y 1 1 / 1 9 / 2 0 0 8		
Mailing Address of Payee 1102 Thompson Bridge Road			Amount 3051.00		
City Gainesville	State GA	Zip Code 30501	Communication Date M M / D D / Y Y Y Y 1 1 / 1 9 / 2 0 0 8		
Name of Employer		Occupation			
Transaction ID : F93.4137					

Purpose of Disbursement (including title(s) of communication(s))
Radio Ad - Georgia Senate Runoff

Name of Federal Candidate C SAXBY CHAMBLISS	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: GA District: 00	Disbursement/Obligation For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <u>Runoff</u>
F94.4123			
Name of Federal Candidate JAMES FRANCIS MARTIN	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: GA District: 00	Disbursement/Obligation For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <u>Runoff</u>
F94.4124			
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 WFAM-AM			Date of Disbursement or Obligation M M / D D / Y Y Y Y 1 1 / 1 9 / 2 0 0 8		
Mailing Address of Payee 552 Laney-Walker Extension			Amount 950.00		
City Augusta	State GA	Zip Code 30901	Communication Date M M / D D / Y Y Y Y 1 1 / 1 9 / 2 0 0 8		
Name of Employer		Occupation			
Transaction ID : F93.4133					

Purpose of Disbursement (including title(s) of communication(s))
Radio Ad - Georgia Senate Runoff

Name of Federal Candidate C SAXBY CHAMBLISS	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: GA District: 00	Disbursement/Obligation For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <u>Runoff</u>
F94.4123			
Name of Federal Candidate JAMES FRANCIS MARTIN	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: GA District: 00	Disbursement/Obligation For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <u>Runoff</u>
F94.4124			
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 Disbursement/Obligation This Page (optional)	4001.00
TOTAL This Period (last page this line number only) (carry total from last page to line 10)	

SCHEDULE 9-B

Disbursement(s) Made or Obligations

A. Full Name (Last, First, Middle Initial) of Payee WFSH-FM			Date of Disbursement or Obligation <input type="text" value="11"/> / <input type="text" value="19"/> / <input type="text" value="2008"/>		
Mailing Address of Payee 2970 Peachtree Rd NW			Amount <input type="text" value="9900.00"/>		
City	State	Zip Code	Communication Date <input type="text" value="11"/> / <input type="text" value="19"/> / <input type="text" value="2008"/>		
Atlanta	GA	30305	Transaction ID : F93.4125		
Name of Employer Occupation					

Purpose of Disbursement (including title(s) of communication(s))
 Radio Ad - Georgia Senate Runoff

Name of Federal Candidate C SAXBY CHAMBLISS	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: GA District: 00	Disbursement/Obligation For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <u>Runoff</u>
F94.4123			
Name of Federal Candidate JAMES FRANCIS MARTIN	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: GA District: 00	Disbursement/Obligation For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <u>Runoff</u>
F94.4124			
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 WGAC-AM			Date of Disbursement or Obligation <input type="text" value="11"/> / <input type="text" value="19"/> / <input type="text" value="2008"/>		
Mailing Address of Payee 4051 Jimmie Dyess Pkwy			Amount <input type="text" value="4620.00"/>		
City	State	Zip Code	Communication Date <input type="text" value="11"/> / <input type="text" value="19"/> / <input type="text" value="2008"/>		
Augusta	GA	30909	Transaction ID : F93.4131		
Name of Employer Occupation					

Purpose of Disbursement (including title(s) of communication(s))
 Radio Ad - Georgia Senate Runoff

Name of Federal Candidate C SAXBY CHAMBLISS	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: GA District: 00	Disbursement/Obligation For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <u>Runoff</u>
F94.4123			
Name of Federal Candidate JAMES FRANCIS MARTIN	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: GA District: 00	Disbursement/Obligation For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <u>Runoff</u>
F94.4124			
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 Disbursement/Obligation This Page (optional)	<input type="text" value="14520.00"/>
TOTAL This Period (last page this line number only) (carry total from last page to line 10)	<input type="text"/>

SCHEDULE 9-B
Disbursement(s) Made or Obligations

<p>A. Full Name (Last, First, Middle Initial) of Payee WGAU-AM</p> <hr/> <p>Mailing Address of Payee 850 Bobbin Mill Road</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>Athens</td> <td>GA</td> <td>30606</td> </tr> </table> <hr/> <p>Name of Employer _____ Occupation _____</p> <hr/> <p>Purpose of Disbursement (including title(s) of communication(s)) Radio Ad - Georgia Senate Runoff</p>	City	State	Zip Code	Athens	GA	30606	<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 1 / 1 9 / 2 0 0 8</td> </tr> </table> </p> <p>Amount <table style="width:100%; border: none;"> <tr> <td style="text-align:right;">1764.00</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 1 / 1 9 / 2 0 0 8</td> </tr> </table> </p> <p>Transaction ID : F93.4135</p>	M M / D D / Y Y Y Y	1 1 / 1 9 / 2 0 0 8	1764.00	M M / D D / Y Y Y Y	1 1 / 1 9 / 2 0 0 8																															
City	State	Zip Code																																									
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Name of Federal Candidate C SAXBY CHAMBLISS	Office Sought:	<input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: GA	District: 00	Disbursement/Obligation For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <u>Runoff</u>																																						
F94.4123																																											
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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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<p>SUBTOTAL of Disbursement/Obligation This Page (optional)</p>					<table style="width:100%; border: none;"> <tr> <td style="text-align:right;">3164.00</td> </tr> </table>	3164.00																																					
3164.00																																											
<p>TOTAL This Period (last page this line number only) (carry total from last page to line 10)</p>																																											

SCHEDULE 9-B
Disbursement(s) Made or Obligations

<p>A. Full Name (Last, First, Middle Initial) of Payee WGST-AM</p> <hr/> <p>Mailing Address of Payee 1819 Peachtree Rd NE #700</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>Atlanta</td> <td>GA</td> <td>30309</td> </tr> </table> <hr/> <p>Name of Employer _____ Occupation _____</p>	City	State	Zip Code	Atlanta	GA	30309	<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 1 / 1 9 / 2 0 0 8</td> </tr> </table> </p> <p>Amount <table style="width:100%; border: none;"> <tr> <td style="text-align:right;">11550.00</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 1 / 1 9 / 2 0 0 8</td> </tr> </table> </p> <p>Transaction ID : F93.4121</p>	M M / D D / Y Y Y Y	1 1 / 1 9 / 2 0 0 8	11550.00	M M / D D / Y Y Y Y	1 1 / 1 9 / 2 0 0 8
City	State	Zip Code										
Atlanta	GA	30309										
M M / D D / Y Y Y Y												
1 1 / 1 9 / 2 0 0 8												
11550.00												
M M / D D / Y Y Y Y												
1 1 / 1 9 / 2 0 0 8												
<p>Purpose of Disbursement (including title(s) of communication(s)) Radio Ad - Georgia Senate Runoff</p>												
<p>Name of Federal Candidate C SAXBY CHAMBLISS</p> <p>F94.4123</p>	<p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: GA District: 00</p>											
<p>Disbursement/Obligation For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <u>Runoff</u></p>												
<p>Name of Federal Candidate JAMES FRANCIS MARTIN</p> <p>F94.4124</p>	<p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: GA District: 00</p>											
<p>Disbursement/Obligation For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <u>Runoff</u></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. Full Name (Last, First, Middle Initial) of Payee WNIV-AM</p> <hr/> <p>Mailing Address of Payee 2970 Peachtree Rd NW #700</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>Atlanta</td> <td>GA</td> <td>30305</td> </tr> </table> <hr/> <p>Name of Employer _____ Occupation _____</p>	City	State	Zip Code	Atlanta	GA	30305	<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 1 / 1 9 / 2 0 0 8</td> </tr> </table> </p> <p>Amount <table style="width:100%; border: none;"> <tr> <td style="text-align:right;">1440.00</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 1 / 1 9 / 2 0 0 8</td> </tr> </table> </p> <p>Transaction ID : F93.4127</p>	M M / D D / Y Y Y Y	1 1 / 1 9 / 2 0 0 8	1440.00	M M / D D / Y Y Y Y	1 1 / 1 9 / 2 0 0 8
City	State	Zip Code										
Atlanta	GA	30305										
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<p>Purpose of Disbursement (including title(s) of communication(s)) Radio Ad - Georgia Senate Runoff</p>												
<p>Name of Federal Candidate C SAXBY CHAMBLISS</p> <p>F94.4123</p>	<p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: GA District: 00</p>											
<p>Disbursement/Obligation For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <u>Runoff</u></p>												
<p>Name of Federal Candidate JAMES FRANCIS MARTIN</p> <p>F94.4124</p>	<p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: GA District: 00</p>											
<p>Disbursement/Obligation For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <u>Runoff</u></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>SUBTOTAL of Disbursement/Obligation This Page (optional) <table style="float:right; border: 1px solid black; width: 150px; text-align: right;">12990.00</table></p>												
<p>TOTAL 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

A. Full Name (Last, First, Middle Initial) of Payee WRGA-AM <hr/> Mailing Address of Payee 20 John Davenport 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>Rome</td> <td>GA</td> <td>30165</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	Rome	GA	30165	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 1 / 1 9 / 2 0 0 8</td> </tr> </table> Amount <table style="width:100%; border: none;"> <tr> <td style="text-align: right;">635.00</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 1 / 1 9 / 2 0 0 8</td> </tr> </table> Transaction ID : F93.4139	M M / D D / Y Y Y Y	1 1 / 1 9 / 2 0 0 8	635.00	M M / D D / Y Y Y Y	1 1 / 1 9 / 2 0 0 8
City	State	Zip Code												
Rome	GA	30165												
Name of Employer	Occupation													
M M / D D / Y Y Y Y														
1 1 / 1 9 / 2 0 0 8														
635.00														
M M / D D / Y Y Y Y														
1 1 / 1 9 / 2 0 0 8														

Purpose of Disbursement (including title(s) of communication(s))
 Radio Ad - Georgia Senate Runoff

Name of Federal Candidate C SAXBY CHAMBLISS	Office Sought:	<input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: GA	District: 00	Disbursement/Obligation For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <u>Runoff</u>
F94.4123					
Name of Federal Candidate JAMES FRANCIS MARTIN	Office Sought:	<input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: GA	District: 00	Disbursement/Obligation For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <u>Runoff</u>
F94.4124					
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 Disbursement/Obligation This Page (optional)	635.00
TOTAL This Period (last page this line number only) (carry total from last page to line 10)	35310.00