



International Strategy Group, LLC

444 West Ocean Blvd., Suite 1020, Long Beach, California 90802
Tel: 562.951.9736 ◊ Fax: 562.951.9742 ◊ info@internationalstrategygroupp.com

FAX COVER SHEET

FAX COVER SHEET	
TO: Federal Election Commission	Fax Number: 202-219-0174
FROM: Sooz Sovern On behalf of John E. Wade II	DATE: Friday, November 21, 2008
Re: FEC Form 5	
No. of Pages including cover sheet : 3	

If you have any questions or require additional information, please do not hesitate to contact me at 562-951-9736.

28039923510

FEC FORM 5

REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED

To Be Used by Persons (Other than Political Committees) including Qualified Nonprofit Corporations

1. (a) Name of Individual, Organization or Corporation John E. Wade II		3. FEC Identification Number C
(b) Address (number and street) <input type="checkbox"/> check if different than previously reported 1225 2nd Street		
(c) City, State and ZIP Code New Orleans, LA 70130		
2. Corporate filers only Is the filer a qualified nonprofit corporation? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Individual filers only Name of Employer Self-Employed		Occupation Author & Philanthropist

4. TYPE OF REPORT (check appropriate boxes):

- (a) April 15 Quarterly Report
- July 15 Quarterly Report
- October 15 Quarterly Report
- January 31 Year-End Report
- 24-Hour Report
- 48-Hour Report

b) Is this Report an amendment? Yes No

5. COVERING PERIOD: FROM

10 / 16 / 2008
 THROUGH
 11 / 20 / 2008

6. TOTAL CONTRIBUTIONS.....

2 3 4 1 2 2 8

7. TOTAL INDEPENDENT EXPENDITURES

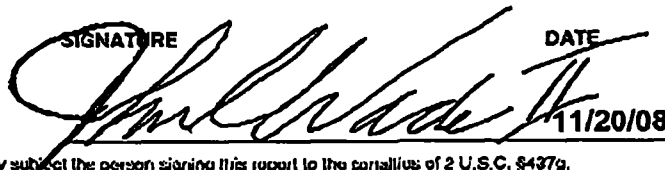
2 3 4 1 2 2 8

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or any political party committee or its agent. In addition, if the independent expenditures reported herein were made by a corporation I certify that the corporation is a qualified nonprofit corporation under the Commission's regulations.

TYPE OR PRINT NAME OF PERSON COMPLETING FORM

John E. Wade II

SIGNATURE



DATE

11/20/08

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

For further information, contact:
Federal Election Commission, 999 E Street, N.W., Washington, D.C. 20463 Toll Free 800-424-9530, Local 202-694-1100

28039923511

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 1 OF 1
FOR LINE 7 OF FORM 5

NAME OF FILER (In Full) John E. Wade II	
---------------------------------------------------	--

Full Name (Last, First, Middle Initial) of Payee Highwire Advertising Design		Date 11 20 2008
Mailing Address P.O. Box 500817		Amount 410600
City Atlanta	State GA	
Zip Code 70130		
Purpose of Expenditure Website Development	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: John McCain		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 4735100		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Livingston, Patricia		Date 11 20 2008
Mailing Address 1502 Jena St		Amount 21250
City New Orleans	State LA	
Zip Code 70115		
Purpose of Expenditure Campaign Materials	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: John McCain		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 197500		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee International Strategy Group, LLC		Date 11 20 2008
Mailing Address 444 W. Ocean Blvd, Suite 1020		Amount 1909378
City Long Beach	State CA	
Zip Code 90802		
Purpose of Expenditure Campaign Materials	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: John McCain		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 3964992		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures.....	2341228
(b) SUBTOTAL of Unitemized Independent Expenditures.....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	2341228

28039923512

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.

28039923513

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> USPS First Class Mail	Postmarked
<input type="checkbox"/> USPS Registered/Certified	Postmarked (R/C)
<input type="checkbox"/> USPS Priority Mail	Postmarked Delivery Confirmation™ Label <input type="checkbox"/>
<input type="checkbox"/> USPS Express Mail	Postmarked
<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
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input checked="" type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked
<p>The document preceding this page was received by FAX at the FEC. The receiving FAX machine has printed at the bottom of each page the date and time of receipt, the phone number of the transmitting machine and the sequential page numbers.</p>	

N/A
 PREPARER

N/A
 DATE PREPARED