

**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  
National Federation of Independent Business

(b) Address (number and street)  check if different than previously reported  
1201 F Street NW

(c) City, State and ZIP Code  
Washington DC 20004

**2. FEC Identification Number**

**C** C00000000

(d) Name of Employer or Principal Place of Business (e) Occupation  
Lobbying

3. Is This Statement  New  
or  
 Amended

4. Covering Period  
M M / D D / Y Y Y Y  
10 / 22 / 2008  
through  
M M / D D / Y Y Y Y  
11 / 01 / 2008

5. (a) Date of Public Distribution(s) M M / D D / Y Y Y Y (b) Communication Title Card Check  
10 / 22 / 2008

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  
Michael Maloney

(b) Address (number and street)  
1201 F Street NW

(c) City, State and ZIP Code  
Washington DC 20004

(d) Name of Employer or Principal Place of Business (e) Occupation  
Natl Fed of Independent Business Director of Compliance

9. Total Donations This Statement .00

10. Total Disbursements/Obligations This Statement 60675.00

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

TYPE OR PRINT NAME OF PERSON COMPLETING FORM Michael Maloney

SIGNATURE Electronically Filed by Michael Maloney

DATE 10/23/2008

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

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