10/29/2008 13 : 24

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 Association of Home Builders

(b) Address (number and street) ☐ check if different than previously reported
1201 15th St NW

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

2. FEC Identification Number
C C00000000

(d) Name of Employer or Principal Place of Business

(e) Occupation

3. Is This Statement ☒ **New** or ☐ **Amended**

4. Covering Period MM/DD/YYYY 10/29/2008 through MM/DD/YYYY 10/30/2008

5. (a) Date of Public Distribution(s) MM/DD/YYYY 10/29/2008 **(b) Communication Title** phones

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: 501 C 6

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
Joseph Barney

(b) Address (number and street)

(c) City, State and ZIP Code

(d) Name of Employer or Principal Place of Business

(e) Occupation

9. Total Donations This Statement .00

10. Total Disbursements/Obligations This Statement 17900.00

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

TYPE OR PRINT NAME OF PERSON COMPLETING FORM Karl Eckhart

SIGNATURE Electronically Filed by Karl Eckhart DATE 10/29/2008

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

28039904592

SCHEDULE 9-B
Disbursement(s) Made or Obligations

A. Full Name (Last, First, Middle Initial) of Payee
National Association of Home Builders

Mailing Address of Payee
1201 15th St NW

City: Washington | State: DC | Zip Code: 20005

Name of Employer | Occupation

Date of Disbursement or Obligation: MM 10 / DD 29 / YYYY 2008

Amount: 2500.00

Communication Date: MM 10 / DD 29 / YYYY 2008

Transction ID : F93.000001

Purpose of Disbursement (including title(s) of communication(s))
phone

Name of Federal Candidate: Gary Miller
F94.000003
Office Sought: X House / Senate / President
State: CA
District: 42
Disbursement/Obligation For: 2008
Primary / X General / Other (specify)

Name of Federal Candidate
Office Sought: House / Senate / President
State:
District:
Disbursement/Obligation For: Primary / General / Other (specify)

Name of Federal Candidate
Office Sought: House / Senate / President
State:
District:
Disbursement/Obligation For: Primary / General / Other (specify)

B. Full Name (Last, First, Middle Initial) of Payee
National Association of Home Builders

Mailing Address of Payee

City | State | Zip Code

Name of Employer | Occupation

Date of Disbursement or Obligation: MM 10 / DD 29 / YYYY 2008

Amount: 9000.00

Communication Date: MM 10 / DD 29 / YYYY 2008

Transction ID : F93.000002

Purpose of Disbursement (including title(s) of communication(s))
phone

Name of Federal Candidate: Joeseph Knollenberg
F94.000004
Office Sought: X House / Senate / President
State: PA
District: 11
Disbursement/Obligation For: 2008
Primary / X General / Other (specify)

Name of Federal Candidate
Office Sought: House / Senate / President
State:
District:
Disbursement/Obligation For: Primary / General / Other (specify)

Name of Federal Candidate
Office Sought: House / Senate / President
State:
District:
Disbursement/Obligation For: Primary / General / Other (specify)

SUBTOTAL of Disbursement/Obligation This Page (optional) 11500.00

TOTAL This Period (last page this line number only) .....
(carry total from last page to line 10)

28039904593

SCHEDULE 9-B
Disbursement(s) Made or Obligations

A. Full Name (Last, First, Middle Initial) of Payee
National Association of Home Builders

Mailing Address of Payee

City | State | Zip Code

Name of Employer | Occupation

Date of Disbursement or Obligation
M M / D D / Y Y Y Y
10 29 2008

Amount
6400.00

Communication Date
M M / D D / Y Y Y Y
10 29 2008

Transction ID : F93.000003

Purpose of Disbursement (including title(s) of communication(s))
phone

Name of Federal Candidate: Shelley Capito
F94.000006
Office Sought: X House / Senate / President
State: WV
District: 02
Disbursement/Obligation For: 2008
Primary X General
Other (specify) _____

Name of Federal Candidate
Office Sought: House / Senate / President
State:
District:
Disbursement/Obligation For:
Primary General
Other (specify) _____

Name of Federal Candidate
Office Sought: House / Senate / President
State:
District:
Disbursement/Obligation For:
Primary General
Other (specify) _____

SUBTOTAL of Disbursement/Obligation This Page (optional) 6400.00

TOTAL This Period (last page this line number only) 17900.00
(carry total from last page to line 10)

28039904594

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	Postmarked
Delivery Confirmation™ or Signature Confirmation™ Label ☐	
☐ USPS Express Mail	Postmarked
☐ Postmark Illegible	
☐ No Postmark	
☐ Overnight Delivery Service (Specify):	Shipping Date
Next Business Day Delivery ☐	
☐ 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): Web Form #355	Date of Receipt or Postmarked 10/29/08
JAH PREPARER	10/29/08 DATE PREPARED

(3/2005)

28039045595