

# 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

(b) Address (number and street)  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

**2. FEC Identification Number**  
C C30000673

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

**4. Covering Period**  
M M / D D / Y Y Y Y  
1 0 / 1 8 / 2 0 0 8  
through  
M M / D D / Y Y Y Y  
1 0 / 2 1 / 2 0 0 8

**5. (a) Date of Public Distribution(s)** M M / D D / Y Y Y Y  
1 0 / 2 0 / 2 0 0 8 **(b) Communication Title** House Radio Ads

**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** 50000.00

**10. Total Disbursements/Obligations This Statement** 49887.00

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 10/21/2008

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**

<b>A.</b>	(a) Name Mr. Daniel Villanueva	<b>Transaction ID :</b> 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	
<b>B.</b>	(a) Name Mr. Bobb Biehl	<b>Transaction ID :</b> F91.4140	
	(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>C.</b>	(a) Name Mrs. Elsa Prince Broekhuizen	<b>Transaction ID :</b> F91.4141	
	(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>D.</b>	(a) Name Lt. Gen. Patrick Caruana	<b>Transaction ID :</b> F91.4142	
	(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	
<b>E.</b>	(a) Name Mr. James D. Daly	<b>Transaction ID :</b> F91.4143	
	(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	

**List of Person(s) Sharing/Exercising Control**

(use additional pages as necessary)

**11. Person(s) Sharing/Exercising Control**

<b>A.</b>	(a) Name Dr. James C. Dobson	<b>Transaction ID : F91.4144</b>	
	(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	
<b>B.</b>	(a) Name Mrs. Shirley Dobson	<b>Transaction ID : F91.4145</b>	
	(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>C.</b>	(a) Name Mr. Robert E. Hamby, Jr.	<b>Transaction ID : F91.4146</b>	
	(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>D.</b>	(a) Name Dr. R. Albert Mohler	<b>Transaction ID : F91.4147</b>	
	(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>E.</b>	(a) Name Mr. Paul Nelson	<b>Transaction ID : F91.4148</b>	
	(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**

<b>A.</b>	(a) Name Dr. Kathleen Nielson	<b>Transaction ID : F91.4149</b>	
	(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>B.</b>	(a) Name Mr. Eric Pillmore	<b>Transaction ID : F91.4150</b>	
	(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>C.</b>	(a) Name Mr. Kim Robinson	<b>Transaction ID : F91.4151</b>	
	(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>D.</b>	(a) Name Mr. Lee Torrence	<b>Transaction ID : F91.4152</b>	
	(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	

Image# 28933991649  
**SCHEDULE 9-A**  
**Donation(s) Received**

**A.** Full Name of Donor

contributions Unitemized

Mailing Address of Donor  
8655 Explorer Drive

City	State	Zip
Colorado Springs	CO	80920

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 2 0 / 2 0 0 8

Amount

50000.00

Transaction ID : F92.4191

**SUBTOTAL** of Donations This Page (optional).....

50000.00

**TOTAL** This Period (last page this line number only).....  
(carry total from last page to Line 9)

50000.00

**SCHEDULE 9-B**

**Disbursement(s) Made or Obligations**

<b>A.</b> Full Name (Last, First, Middle Initial) of Payee KAYX-AM <hr/> Mailing Address of Payee 111 W. Main St. <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>Richmond</td> <td>MO</td> <td>64085</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	Richmond	MO	64085	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 0 / 2 0 / 2 0 0 8</td> </tr> </table> <hr/> Amount <table style="width:100%; border: none;"> <tr> <td style="text-align: right;">897.00</td> </tr> </table> <hr/> 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 0 / 2 0 / 2 0 0 8</td> </tr> </table> <hr/> <b>Transaction ID :</b> F93.4180	M M / D D / Y Y Y Y	1 0 / 2 0 / 2 0 0 8	897.00	M M / D D / Y Y Y Y	1 0 / 2 0 / 2 0 0 8
City	State	Zip Code												
Richmond	MO	64085												
Name of Employer	Occupation													
M M / D D / Y Y Y Y														
1 0 / 2 0 / 2 0 0 8														
897.00														
M M / D D / Y Y Y Y														
1 0 / 2 0 / 2 0 0 8														

Purpose of Disbursement (including title(s) of communication(s)) Radio Ad - Missouri House Race			
Name of Federal Candidate KAY BARNES	Office Sought:	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: MO District: 06 Disbursement/Obligation For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
F94.4178			
Name of Federal Candidate SAMUEL B 'SAM' GRAVES	Office Sought:	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: MO District: 06 Disbursement/Obligation For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
F94.4179			
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>B.</b> Full Name (Last, First, Middle Initial) of Payee KCOL-AM <hr/> Mailing Address of Payee 4270 Byrd Drive <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>Loveland</td> <td>CO</td> <td>80538</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	Loveland	CO	80538	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 0 / 2 0 / 2 0 0 8</td> </tr> </table> <hr/> Amount <table style="width:100%; border: none;"> <tr> <td style="text-align: right;">6480.00</td> </tr> </table> <hr/> 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 0 / 2 0 / 2 0 0 8</td> </tr> </table> <hr/> <b>Transaction ID :</b> F93.4162	M M / D D / Y Y Y Y	1 0 / 2 0 / 2 0 0 8	6480.00	M M / D D / Y Y Y Y	1 0 / 2 0 / 2 0 0 8
City	State	Zip Code												
Loveland	CO	80538												
Name of Employer	Occupation													
M M / D D / Y Y Y Y														
1 0 / 2 0 / 2 0 0 8														
6480.00														
M M / D D / Y Y Y Y														
1 0 / 2 0 / 2 0 0 8														

Purpose of Disbursement (including title(s) of communication(s)) Radio Ad - Colorado House Race			
Name of Federal Candidate MARILYN MUSGRAVE	Office Sought:	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: CO District: 04 Disbursement/Obligation For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
F94.4164			
Name of Federal Candidate ELIZABETH HELEN MARKEY	Office Sought:	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: CO District: 04 Disbursement/Obligation For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
F94.4165			
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>SUBTOTAL</b> of Disbursement/Obligation This Page (optional) .....	7377.00
<b>TOTAL</b> This Period (last page this line number only) .....	
(carry total from last page to line 10)	

**SCHEDULE 9-B**

**Disbursement(s) Made or Obligations**

<b>A.</b> Full Name (Last, First, Middle Initial) of Payee KCWJ-AM			Date of Disbursement or Obligation M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 8		
Mailing Address of Payee 4240 Blue Ridge Blvd Blue Ridge Tower, Suite 530			Amount 3600.00		
City Kansas City	State MO	Zip Code 64133	Communication Date M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 8		
Name of Employer		Occupation			
Transaction ID : F93.4176					

Purpose of Disbursement (including title(s) of communication(s))  
Radio Ad - Missouri House Race

Name of Federal Candidate KAY BARNES	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: MO District: 06	Disbursement/Obligation For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
F94.4178			
Name of Federal Candidate SAMUEL B 'SAM' GRAVES	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: MO District: 06	Disbursement/Obligation For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
F94.4179			
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>B.</b> Full Name (Last, First, Middle Initial) of Payee KLTT-AM			Date of Disbursement or Obligation M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 8		
Mailing Address of Payee 2150 West 29th Avenue Suite 300			Amount 4104.00		
City Denver	State CO	Zip Code 80211	Communication Date M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 8		
Name of Employer		Occupation			
Transaction ID : F93.4166					

Purpose of Disbursement (including title(s) of communication(s))  
Radio Ad - Colorado House Race

Name of Federal Candidate MARILYN MUSGRAVE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: CO District: 04	Disbursement/Obligation For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
F94.4164			
Name of Federal Candidate ELIZABETH HELEN MARKEY	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: CO District: 04	Disbursement/Obligation For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
F94.4165			
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>SUBTOTAL</b> of Disbursement/Obligation This Page (optional) .....	7704.00
<b>TOTAL</b> This Period (last page this line number only) ..... (carry total from last page to line 10)	

**SCHEDULE 9-B**

**Disbursement(s) Made or Obligations**

<p><b>A.</b> Full Name (Last, First, Middle Initial) of Payee KLZ-AM</p> <hr/> <p>Mailing Address of Payee 2150 West 29th Ave Suite 300</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>Denver</td> <td>CO</td> <td>80211</td> </tr> </table> <hr/> <p>Name of Employer _____ Occupation _____</p> <hr/> <p>Purpose of Disbursement (including title(s) of communication(s)) Radio Ad - Colorado House Race</p>	City	State	Zip Code	Denver	CO	80211	<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 0 / 2 0 / 2 0 0 8</td> </tr> </table> </p> <p>Amount  <table style="width:100%; border: none;"> <tr> <td style="text-align:right;">4104.00</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 0 / 2 0 / 2 0 0 8</td> </tr> </table> </p> <p><b>Transaction ID :</b> F93.4168</p>	M M / D D / Y Y Y Y	1 0 / 2 0 / 2 0 0 8	4104.00	M M / D D / Y Y Y Y	1 0 / 2 0 / 2 0 0 8				
City	State	Zip Code														
Denver	CO	80211														
M M / D D / Y Y Y Y																
1 0 / 2 0 / 2 0 0 8																
4104.00																
M M / D D / Y Y Y Y																
1 0 / 2 0 / 2 0 0 8																
<table style="width:100%; border: none;"> <tr> <td style="width:33%;">Name of Federal Candidate MARILYN MUSGRAVE</td> <td style="width:33%;">Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</td> <td style="width:33%;">State: CO District: 04</td> </tr> <tr> <td>F94.4164</td> <td colspan="2"></td> </tr> <tr> <td>Name of Federal Candidate ELIZABETH HELEN MARKEY</td> <td>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</td> <td>State: CO District: 04</td> </tr> <tr> <td>F94.4165</td> <td colspan="2"></td> </tr> <tr> <td>Name of Federal Candidate</td> <td>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</td> <td>State: _____ District: _____</td> </tr> </table>	Name of Federal Candidate MARILYN MUSGRAVE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: CO District: 04	F94.4164			Name of Federal Candidate ELIZABETH HELEN MARKEY	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: CO District: 04	F94.4165			Name of Federal Candidate	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: _____ District: _____	<p>Disbursement/Obligation For: 2008  <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify) _____</p> <p>Disbursement/Obligation For: 2008  <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify) _____</p> <p>Disbursement/Obligation For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) _____</p>
Name of Federal Candidate MARILYN MUSGRAVE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: CO District: 04														
F94.4164																
Name of Federal Candidate ELIZABETH HELEN MARKEY	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: CO District: 04														
F94.4165																
Name of Federal Candidate	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: _____ District: _____														
<p><b>B.</b> Full Name (Last, First, Middle Initial) of Payee WCHR-AM</p> <hr/> <p>Mailing Address of Payee 1371 Woodside 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>Yardley</td> <td>PA</td> <td>19067</td> </tr> </table> <hr/> <p>Name of Employer _____ Occupation _____</p> <hr/> <p>Purpose of Disbursement (including title(s) of communication(s)) Radio Ad - Pennsylvania House Race</p>	City	State	Zip Code	Yardley	PA	19067	<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 0 / 2 0 / 2 0 0 8</td> </tr> </table> </p> <p>Amount  <table style="width:100%; border: none;"> <tr> <td style="text-align:right;">1605.00</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 0 / 2 0 / 2 0 0 8</td> </tr> </table> </p> <p><b>Transaction ID :</b> F93.4182</p>	M M / D D / Y Y Y Y	1 0 / 2 0 / 2 0 0 8	1605.00	M M / D D / Y Y Y Y	1 0 / 2 0 / 2 0 0 8				
City	State	Zip Code														
Yardley	PA	19067														
M M / D D / Y Y Y Y																
1 0 / 2 0 / 2 0 0 8																
1605.00																
M M / D D / Y Y Y Y																
1 0 / 2 0 / 2 0 0 8																
<table style="width:100%; border: none;"> <tr> <td style="width:33%;">Name of Federal Candidate CHRISTOPHER CARNEY</td> <td style="width:33%;">Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</td> <td style="width:33%;">State: PA District: 10</td> </tr> <tr> <td>F94.4184</td> <td colspan="2"></td> </tr> <tr> <td>Name of Federal Candidate CHRISTOPHER LAWRENCE HACKETT</td> <td>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</td> <td>State: PA District: 10</td> </tr> <tr> <td>F94.4185</td> <td colspan="2"></td> </tr> <tr> <td>Name of Federal Candidate</td> <td>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</td> <td>State: _____ District: _____</td> </tr> </table>	Name of Federal Candidate CHRISTOPHER CARNEY	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 10	F94.4184			Name of Federal Candidate CHRISTOPHER LAWRENCE HACKETT	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 10	F94.4185			Name of Federal Candidate	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: _____ District: _____	<p>Disbursement/Obligation For: 2008  <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify) _____</p> <p>Disbursement/Obligation For: 2008  <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify) _____</p> <p>Disbursement/Obligation For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) _____</p>
Name of Federal Candidate CHRISTOPHER CARNEY	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 10														
F94.4184																
Name of Federal Candidate CHRISTOPHER LAWRENCE HACKETT	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 10														
F94.4185																
Name of Federal Candidate	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: _____ District: _____														
<p><b>SUBTOTAL</b> of Disbursement/Obligation This Page (optional) .....</p>		<table style="width:100%; border: none;"> <tr> <td style="text-align:right;">5709.00</td> </tr> </table>	5709.00													
5709.00																
<p><b>TOTAL</b> This Period (last page this line number only) ..... (carry total from last page to line 10)</p>		<table style="width:100%; border: none;"> <tr> <td style="border: 1px solid black; height: 20px;"></td> </tr> </table>														

**SCHEDULE 9-B**

**Disbursement(s) Made or Obligations**

<p><b>A.</b> Full Name (Last, First, Middle Initial) of Payee WDEO-AM</p> <hr/> <p>Mailing Address of Payee 24 Frank Lloyd Wright Drive</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>Ann Arbor</td> <td>MI</td> <td>48105</td> </tr> </table> <hr/> <p>Name of Employer _____ Occupation _____</p>	City	State	Zip Code	Ann Arbor	MI	48105	<p>Date of Disbursement or Obligation  <table style="width:100%; border: none;"> <tr> <td style="border: 1px solid black; padding: 2px;">M</td> <td style="border: 1px solid black; padding: 2px;">M</td> <td style="border: 1px solid black; padding: 2px;">/</td> <td style="border: 1px solid black; padding: 2px;">D</td> <td style="border: 1px solid black; padding: 2px;">D</td> <td style="border: 1px solid black; padding: 2px;">/</td> <td style="border: 1px solid black; padding: 2px;">Y</td> </tr> <tr> <td>1</td> <td>0</td> <td></td> <td>2</td> <td>0</td> <td></td> <td>2</td> <td>0</td> <td>0</td> <td>8</td> </tr> </table> </p> <p>Amount  <table style="width:100%; border: none;"> <tr> <td style="border: 1px solid black; padding: 2px;">6</td> <td style="border: 1px solid black; padding: 2px;">2</td> <td style="border: 1px solid black; padding: 2px;">8</td> <td style="border: 1px solid black; padding: 2px;">5</td> <td style="border: 1px solid black; padding: 2px;">0</td> <td style="border: 1px solid black; padding: 2px;">0</td> </tr> </table> </p> <p>Communication Date  <table style="width:100%; border: none;"> <tr> <td style="border: 1px solid black; padding: 2px;">M</td> <td style="border: 1px solid black; padding: 2px;">M</td> <td style="border: 1px solid black; padding: 2px;">/</td> <td style="border: 1px solid black; padding: 2px;">D</td> <td style="border: 1px solid black; padding: 2px;">D</td> <td style="border: 1px solid black; padding: 2px;">/</td> <td style="border: 1px solid black; padding: 2px;">Y</td> </tr> <tr> <td>1</td> <td>0</td> <td></td> <td>2</td> <td>0</td> <td></td> <td>2</td> <td>0</td> <td>0</td> <td>8</td> </tr> </table> </p> <p><b>Transaction ID :</b> F93.4170</p>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		2	0		2	0	0	8	6	2	8	5	0	0	M	M	/	D	D	/	Y	Y	Y	Y	1	0		2	0		2	0	0	8
City	State	Zip Code																																																			
Ann Arbor	MI	48105																																																			
M	M	/	D	D	/	Y	Y	Y	Y																																												
1	0		2	0		2	0	0	8																																												
6	2	8	5	0	0																																																
M	M	/	D	D	/	Y	Y	Y	Y																																												
1	0		2	0		2	0	0	8																																												

Purpose of Disbursement (including title(s) of communication(s))  
Radio Ad - Michigan House Race

Name of Federal Candidate MARK HAMILTON SCHAUER	Office Sought:	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: MI	District: 07	Disbursement/Obligation For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
F94.4172	Office Sought:	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: MI	District: 07	Disbursement/Obligation For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
Name of Federal Candidate TIMOTHY L. WALBERG	Office Sought:	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: MI	District: 07	Disbursement/Obligation For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
F94.4173	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) _____

<p><b>B.</b> Full Name (Last, First, Middle Initial) of Payee WFIL-AM</p> <hr/> <p>Mailing Address of Payee 117 Ridge Pike</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>Lafayette Hill</td> <td>PA</td> <td>19444</td> </tr> </table> <hr/> <p>Name of Employer _____ Occupation _____</p>	City	State	Zip Code	Lafayette Hill	PA	19444	<p>Date of Disbursement or Obligation  <table style="width:100%; border: none;"> <tr> <td style="border: 1px solid black; padding: 2px;">M</td> <td style="border: 1px solid black; padding: 2px;">M</td> <td style="border: 1px solid black; padding: 2px;">/</td> <td style="border: 1px solid black; padding: 2px;">D</td> <td style="border: 1px solid black; padding: 2px;">D</td> <td style="border: 1px solid black; padding: 2px;">/</td> <td style="border: 1px solid black; padding: 2px;">Y</td> </tr> <tr> <td>1</td> <td>0</td> <td></td> <td>2</td> <td>0</td> <td></td> <td>2</td> <td>0</td> <td>0</td> <td>8</td> </tr> </table> </p> <p>Amount  <table style="width:100%; border: none;"> <tr> <td style="border: 1px solid black; padding: 2px;">5</td> <td style="border: 1px solid black; padding: 2px;">3</td> <td style="border: 1px solid black; padding: 2px;">5</td> <td style="border: 1px solid black; padding: 2px;">5</td> <td style="border: 1px solid black; padding: 2px;">0</td> <td style="border: 1px solid black; padding: 2px;">0</td> </tr> </table> </p> <p>Communication Date  <table style="width:100%; border: none;"> <tr> <td style="border: 1px solid black; padding: 2px;">M</td> <td style="border: 1px solid black; padding: 2px;">M</td> <td style="border: 1px solid black; padding: 2px;">/</td> <td style="border: 1px solid black; padding: 2px;">D</td> <td style="border: 1px solid black; padding: 2px;">D</td> <td style="border: 1px solid black; padding: 2px;">/</td> <td style="border: 1px solid black; padding: 2px;">Y</td> </tr> <tr> <td>1</td> <td>0</td> <td></td> <td>2</td> <td>0</td> <td></td> <td>2</td> <td>0</td> <td>0</td> <td>8</td> </tr> </table> </p> <p><b>Transaction ID :</b> F93.4186</p>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		2	0		2	0	0	8	5	3	5	5	0	0	M	M	/	D	D	/	Y	Y	Y	Y	1	0		2	0		2	0	0	8
City	State	Zip Code																																																			
Lafayette Hill	PA	19444																																																			
M	M	/	D	D	/	Y	Y	Y	Y																																												
1	0		2	0		2	0	0	8																																												
5	3	5	5	0	0																																																
M	M	/	D	D	/	Y	Y	Y	Y																																												
1	0		2	0		2	0	0	8																																												

Purpose of Disbursement (including title(s) of communication(s))  
Radio Ad - Pennsylvania House Race

Name of Federal Candidate CHRISTOPHER CARNEY	Office Sought:	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: PA	District: 10	Disbursement/Obligation For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
F94.4184	Office Sought:	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: PA	District: 10	Disbursement/Obligation For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
Name of Federal Candidate CHRISTOPHER LAWRENCE HACKETT	Office Sought:	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: PA	District: 10	Disbursement/Obligation For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
F94.4185	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>SUBTOTAL</b> of Disbursement/Obligation This Page (optional) .....	11640.00
<b>TOTAL</b> This Period (last page this line number only) ..... (carry total from last page to line 10)	

**SCHEDULE 9-B**  
**Disbursement(s) Made or Obligations**

<p><b>A.</b> Full Name (Last, First, Middle Initial) of Payee WHIM-AM</p> <hr/> <p>Mailing Address of Payee 1188 Lake View Drive</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>Altamonte Springs</td> <td>FL</td> <td>32714</td> </tr> </table> <hr/> <p>Name of Employer _____ Occupation _____</p> <hr/> <p>Purpose of Disbursement (including title(s) of communication(s)) Radio Ad - Florida House Race</p>	City	State	Zip Code	Altamonte Springs	FL	32714	<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 0 / 2 0 / 2 0 0 8</td> </tr> </table> </p> <p>Amount  <table style="width:100%; border: none;"> <tr> <td style="text-align:right;">1980.00</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 0 / 2 0 / 2 0 0 8</td> </tr> </table> </p> <p><b>Transaction ID :</b> F93.4160</p>	M M / D D / Y Y Y Y	1 0 / 2 0 / 2 0 0 8	1980.00	M M / D D / Y Y Y Y	1 0 / 2 0 / 2 0 0 8				
City	State	Zip Code														
Altamonte Springs	FL	32714														
M M / D D / Y Y Y Y																
1 0 / 2 0 / 2 0 0 8																
1980.00																
M M / D D / Y Y Y Y																
1 0 / 2 0 / 2 0 0 8																
<table style="width:100%; border: none;"> <tr> <td style="width:33%;">Name of Federal Candidate SUZANNE KOSMAS</td> <td style="width:33%;">Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</td> <td style="width:33%;">State: FL District: 24</td> </tr> <tr> <td>F94.4156</td> <td colspan="2"></td> </tr> </table> <hr/> <table style="width:100%; border: none;"> <tr> <td style="width:33%;">Name of Federal Candidate TOM FEENEY</td> <td style="width:33%;">Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</td> <td style="width:33%;">State: FL District: 24</td> </tr> <tr> <td>F94.4157</td> <td colspan="2"></td> </tr> </table> <hr/> <table style="width:100%; border: none;"> <tr> <td style="width:33%;">Name of Federal Candidate</td> <td style="width:33%;">Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</td> <td style="width:33%;">State: _____ District: _____</td> </tr> </table>	Name of Federal Candidate SUZANNE KOSMAS	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District: 24	F94.4156			Name of Federal Candidate TOM FEENEY	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District: 24	F94.4157			Name of Federal Candidate	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: _____ District: _____	<p>Disbursement/Obligation For: 2008  <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify) _____</p> <hr/> <p>Disbursement/Obligation For: 2008  <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify) _____</p> <hr/> <p>Disbursement/Obligation For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) _____</p>
Name of Federal Candidate SUZANNE KOSMAS	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District: 24														
F94.4156																
Name of Federal Candidate TOM FEENEY	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District: 24														
F94.4157																
Name of Federal Candidate	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: _____ District: _____														
<p><b>B.</b> Full Name (Last, First, Middle Initial) of Payee WNTP-AM</p> <hr/> <p>Mailing Address of Payee 117 Ridge Pike</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>Lafayette Hill</td> <td>PA</td> <td>19444</td> </tr> </table> <hr/> <p>Name of Employer _____ Occupation _____</p> <hr/> <p>Purpose of Disbursement (including title(s) of communication(s)) Radio Ad - Pennsylvania House Race</p>	City	State	Zip Code	Lafayette Hill	PA	19444	<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 0 / 2 0 / 2 0 0 8</td> </tr> </table> </p> <p>Amount  <table style="width:100%; border: none;"> <tr> <td style="text-align:right;">5685.00</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 0 / 2 0 / 2 0 0 8</td> </tr> </table> </p> <p><b>Transaction ID :</b> F93.4188</p>	M M / D D / Y Y Y Y	1 0 / 2 0 / 2 0 0 8	5685.00	M M / D D / Y Y Y Y	1 0 / 2 0 / 2 0 0 8				
City	State	Zip Code														
Lafayette Hill	PA	19444														
M M / D D / Y Y Y Y																
1 0 / 2 0 / 2 0 0 8																
5685.00																
M M / D D / Y Y Y Y																
1 0 / 2 0 / 2 0 0 8																
<table style="width:100%; border: none;"> <tr> <td style="width:33%;">Name of Federal Candidate CHRISTOPHER CARNEY</td> <td style="width:33%;">Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</td> <td style="width:33%;">State: PA District: 10</td> </tr> <tr> <td>F94.4184</td> <td colspan="2"></td> </tr> </table> <hr/> <table style="width:100%; border: none;"> <tr> <td style="width:33%;">Name of Federal Candidate CHRISTOPHER LAWRENCE HACKETT</td> <td style="width:33%;">Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</td> <td style="width:33%;">State: PA District: 10</td> </tr> <tr> <td>F94.4185</td> <td colspan="2"></td> </tr> </table> <hr/> <table style="width:100%; border: none;"> <tr> <td style="width:33%;">Name of Federal Candidate</td> <td style="width:33%;">Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</td> <td style="width:33%;">State: _____ District: _____</td> </tr> </table>	Name of Federal Candidate CHRISTOPHER CARNEY	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 10	F94.4184			Name of Federal Candidate CHRISTOPHER LAWRENCE HACKETT	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 10	F94.4185			Name of Federal Candidate	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: _____ District: _____	<p>Disbursement/Obligation For: 2008  <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify) _____</p> <hr/> <p>Disbursement/Obligation For: 2008  <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify) _____</p> <hr/> <p>Disbursement/Obligation For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) _____</p>
Name of Federal Candidate CHRISTOPHER CARNEY	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 10														
F94.4184																
Name of Federal Candidate CHRISTOPHER LAWRENCE HACKETT	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 10														
F94.4185																
Name of Federal Candidate	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: _____ District: _____														
<p><b>SUBTOTAL</b> of Disbursement/Obligation This Page (optional) .....</p> <hr/> <p><b>TOTAL</b> This Period (last page this line number only) ..... (carry total from last page to line 10)</p>	<table style="width:100%; border: none;"> <tr> <td style="text-align:right;">7665.00</td> </tr> </table> <hr/> <table style="width:100%; border: none;"> <tr> <td style="text-align:right;"> </td> </tr> </table>	7665.00														
7665.00																



**SCHEDULE 9-B**

**Disbursement(s) Made or Obligations**

<b>A.</b> Full Name (Last, First, Middle Initial) of Payee WTLN-AM <hr/> Mailing Address of Payee 1188 Lake View Drive <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>Altamonte Springs</td> <td>FL</td> <td>32714</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	Altamonte Springs	FL	32714	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 0 / 2 0 / 2 0 0 8</td> </tr> </table> Amount <table style="width:100%; border: none;"> <tr> <td style="text-align: right;">3960.00</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 0 / 2 0 / 2 0 0 8</td> </tr> </table> <b>Transaction ID :</b> F93.4154	M M / D D / Y Y Y Y	1 0 / 2 0 / 2 0 0 8	3960.00	M M / D D / Y Y Y Y	1 0 / 2 0 / 2 0 0 8
City	State	Zip Code												
Altamonte Springs	FL	32714												
Name of Employer	Occupation													
M M / D D / Y Y Y Y														
1 0 / 2 0 / 2 0 0 8														
3960.00														
M M / D D / Y Y Y Y														
1 0 / 2 0 / 2 0 0 8														

Purpose of Disbursement (including title(s) of communication(s))  
 Radio Ad - Florida House Race

Name of Federal Candidate SUZANNE KOSMAS	Office Sought:	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: FL	District: 24	Disbursement/Obligation For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
F94.4156					
Name of Federal Candidate TOM FEENEY	Office Sought:	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: FL	District: 24	Disbursement/Obligation For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
F94.4157					
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>SUBTOTAL</b> of Disbursement/Obligation This Page (optional) .....	3960.00
<b>TOTAL</b> This Period (last page this line number only) ..... (carry total from last page to line 10)	49887.00