

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

CITIZENS FOR STRENGTH AND SECURITY

(b) Address (number and street) check if different than previously reported

1718 M STREET NW S342

(c) City, State and ZIP Code

WASHINGTON

DC

20036

(d) Name of Employer or Principal Place of Business

(e) Occupation

2. FEC Identification Number

 C30001259

 New

or

 Amended

4. Covering Period

 / /

through

 / /

5. (a) Date of Public Distribution(s) / / (b) Communication Title Back When - Social Security

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: 527 Political Org.

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

Haggard Lora

(b) Address (number and street)

1718 M Street, NW

(c) City, State and ZIP Code

Washington

DC

20036

(d) Name of Employer or Principal Place of Business

Citizens For Strength And Security

(e) Occupation

Treasurer

9. Total Donations This Statement

10. Total Disbursements/Obligations This Statement

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

TYPE OR PRINT NAME OF PERSON COMPLETING FORM Lora Haggard

SIGNATURE Electronically Filed by Lora Haggard

DATE 10/18/2008

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	Transaction ID : F91.000001	
Haggard Lora		
(b) Address (number and street)		
1718 M Street, NW S342 S342		
(c) City, State and Zip Code		
Washington	DC	20036
(d) Name of Employer or Principal Place of Business	(e) Occupation	
Citizens For Strength And Security	Treasurer	

A. Full Name of Donor

Jeanette Hyde
 Mailing Address of Donor
 2405 Glenwood Avenue
 City State Zip
 Raleigh NC 27608

Date of Receipt

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

Amount

2000.00

Transaction ID : F92.000001

B. Full Name of Donor

Leo Hindery, Jr.
 Mailing Address of Donor
 405 Lexington Avenue
 48th Floor
 City State Zip
 New York City NY 10174

Date of Receipt

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

Amount

25000.00

Transaction ID : F92.000002

C. Full Name of Donor

Patriot Majority
 Mailing Address of Donor
 300 M Street, SE
 S1102
 City State Zip
 Washington DC 20003

Date of Receipt

M M / D D / Y Y Y Y
 1 0 / 1 5 / 2 0 0 8

Amount

280000.00

Transaction ID : F92.000003

D. Full Name of Donor

Majority Action
 Mailing Address of Donor
 P.O. Box 76187
 City State Zip
 Washington DC 20013

Date of Receipt

M M / D D / Y Y Y Y
 1 0 / 1 7 / 2 0 0 8

Amount

200000.00

Transaction ID : F92.000004

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

507000.00

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

507000.00

SCHEDULE 9-B

Disbursement(s) Made or Obligations

<p>A. Full Name (Last, First, Middle Initial) of Payee LUC Media</p> <hr/> <p>Mailing Address of Payee 25 Whitlock Place Suite 201</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>Marietta</td> <td>GA</td> <td>30064</td> </tr> </table> <hr/> <p>Name of Employer _____ Occupation _____</p>	City	State	Zip Code	Marietta	GA	30064	<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 / 1 6 / 2 0 0 8</td> </tr> </table> </p> <p>Amount <table style="width:100%; border: none;"> <tr> <td style="text-align:right;">120000.00</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 / 1 7 / 2 0 0 8</td> </tr> </table> </p> <p>Transaction ID : F93.000001</p>	M M / D D / Y Y Y Y	1 0 / 1 6 / 2 0 0 8	120000.00	M M / D D / Y Y Y Y	1 0 / 1 7 / 2 0 0 8
City	State	Zip Code										
Marietta	GA	30064										
M M / D D / Y Y Y Y												
1 0 / 1 6 / 2 0 0 8												
120000.00												
M M / D D / Y Y Y Y												
1 0 / 1 7 / 2 0 0 8												
<p>Purpose of Disbursement (including title(s) of communication(s)) Media Buy: Back When - Social Security</p>												
<p>Name of Federal Candidate Elizabeth Dole</p> <p>F94.000002</p>	<p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: NC District: _____</p>											
<p>Disbursement/Obligation For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____</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>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 LUC Media</p> <hr/> <p>Mailing Address of Payee 25 Whitlock Place Sutie 201</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>Marietta</td> <td>GA</td> <td>30064</td> </tr> </table> <hr/> <p>Name of Employer _____ Occupation _____</p>	City	State	Zip Code	Marietta	GA	30064	<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 / 1 6 / 2 0 0 8</td> </tr> </table> </p> <p>Amount <table style="width:100%; border: none;"> <tr> <td style="text-align:right;">120000.00</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>Transaction ID : F93.000002</p>	M M / D D / Y Y Y Y	1 0 / 1 6 / 2 0 0 8	120000.00	M M / D D / Y Y Y Y	1 0 / 2 0 / 2 0 0 8
City	State	Zip Code										
Marietta	GA	30064										
M M / D D / Y Y Y Y												
1 0 / 1 6 / 2 0 0 8												
120000.00												
M M / D D / Y Y Y Y												
1 0 / 2 0 / 2 0 0 8												
<p>Purpose of Disbursement (including title(s) of communication(s)) Media Buy: Back When - Jobs</p>												
<p>Name of Federal Candidate Elizabeth Dole</p> <p>F94.000004</p>	<p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: NC District: _____</p>											
<p>Disbursement/Obligation For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____</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>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="width:100%; border: none;"><tr><td style="text-align:right;">240000.00</td></tr></table></p> <hr/> <p>TOTAL This Period (last page this line number only) <table style="width:100%; border: none;"><tr><td style="text-align:right;"> </td></tr></table> (carry total from last page to line 10)</p>		240000.00										
240000.00												

SCHEDULE 9-B

Disbursement(s) Made or Obligations

A. Full Name (Last, First, Middle Initial) of Payee LUC Media <hr/> Mailing Address of Payee 25 Whitlock Place Suite 201 <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>Marietta</td> <td>GA</td> <td>30064</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	Marietta	GA	30064	Name of Employer	Occupation	Date of Disbursement or Obligation <table style="width:100%; border: none;"> <tr> <td style="width:33%; text-align: center;">M M / D D / Y Y Y Y</td> </tr> <tr> <td style="text-align: center;">1 0 / 1 7 / 2 0 0 8</td> </tr> </table> Amount <table style="width:100%; border: none;"> <tr> <td style="text-align: right;">170000.00</td> </tr> </table> Communication Date <table style="width:100%; border: none;"> <tr> <td style="width:33%; text-align: center;">M M / D D / Y Y Y Y</td> </tr> <tr> <td style="text-align: center;">1 0 / 1 7 / 2 0 0 8</td> </tr> </table> Transaction ID : F93.000003	M M / D D / Y Y Y Y	1 0 / 1 7 / 2 0 0 8	170000.00	M M / D D / Y Y Y Y	1 0 / 1 7 / 2 0 0 8
City	State	Zip Code												
Marietta	GA	30064												
Name of Employer	Occupation													
M M / D D / Y Y Y Y														
1 0 / 1 7 / 2 0 0 8														
170000.00														
M M / D D / Y Y Y Y														
1 0 / 1 7 / 2 0 0 8														

Purpose of Disbursement (including title(s) of communication(s))
 Media Buy: Back When - Social Security

Name of Federal Candidate Elizabeth Dole	Office Sought:	<input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: _____	Disbursement/Obligation For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
F94.000006				
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) _____
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 LUC Media <hr/> Mailing Address of Payee 25 Whitlock Place Suite 201 <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>Marietta</td> <td>GA</td> <td>20064</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	Marietta	GA	20064	Name of Employer	Occupation	Date of Disbursement or Obligation <table style="width:100%; border: none;"> <tr> <td style="width:33%; text-align: center;">M M / D D / Y Y Y Y</td> </tr> <tr> <td style="text-align: center;">1 0 / 1 7 / 2 0 0 8</td> </tr> </table> Amount <table style="width:100%; border: none;"> <tr> <td style="text-align: right;">20000.00</td> </tr> </table> Communication Date <table style="width:100%; border: none;"> <tr> <td style="width:33%; text-align: center;">M M / D D / Y Y Y Y</td> </tr> <tr> <td style="text-align: center;">1 0 / 1 7 / 2 0 0 8</td> </tr> </table> Transaction ID : F93.000004	M M / D D / Y Y Y Y	1 0 / 1 7 / 2 0 0 8	20000.00	M M / D D / Y Y Y Y	1 0 / 1 7 / 2 0 0 8
City	State	Zip Code												
Marietta	GA	20064												
Name of Employer	Occupation													
M M / D D / Y Y Y Y														
1 0 / 1 7 / 2 0 0 8														
20000.00														
M M / D D / Y Y Y Y														
1 0 / 1 7 / 2 0 0 8														

Purpose of Disbursement (including title(s) of communication(s))
 Media Placement

Name of Federal Candidate Elizabeth Dole	Office Sought:	<input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NC District: _____	Disbursement/Obligation For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
F94.000010				
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) _____
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)	190000.00
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

<p>A. Full Name (Last, First, Middle Initial) of Payee Hamilton Campaigns</p> <hr/> <p>Mailing Address of Payee 4201 Connecticut Ave, NW S610</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>Washington</td> <td>DC</td> <td>20008</td> </tr> </table> <hr/> <table style="width:100%; border: none;"> <tr> <td style="width:60%;">Name of Employer</td> <td>Occupation</td> </tr> </table>	City	State	Zip Code	Washington	DC	20008	Name of Employer	Occupation	<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 / 1 7 / 2 0 0 8</td> </tr> </table> </p> <p>Amount <table style="width:100%; border: none;"> <tr> <td style="text-align: right;">9000.00</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 / 1 7 / 2 0 0 8</td> </tr> </table> </p> <p>Transaction ID : F93.000005</p>	M M / D D / Y Y Y Y	1 0 / 1 7 / 2 0 0 8	9000.00	M M / D D / Y Y Y Y	1 0 / 1 7 / 2 0 0 8		
City	State	Zip Code														
Washington	DC	20008														
Name of Employer	Occupation															
M M / D D / Y Y Y Y																
1 0 / 1 7 / 2 0 0 8																
9000.00																
M M / D D / Y Y Y Y																
1 0 / 1 7 / 2 0 0 8																
<p>Purpose of Disbursement (including title(s) of communication(s)) Research</p>																
<table style="width:100%; border: none;"> <tr> <td style="width:30%;">Name of Federal Candidate</td> <td style="width:15%;">Office Sought:</td> <td style="width:15%;"><input type="checkbox"/> House</td> <td style="width:10%;">State: _____</td> <td style="width:30%;">Disbursement/Obligation For:</td> </tr> <tr> <td></td> <td></td> <td><input type="checkbox"/> Senate</td> <td>District: _____</td> <td><input type="checkbox"/> Primary <input type="checkbox"/> General</td> </tr> <tr> <td></td> <td></td> <td><input type="checkbox"/> President</td> <td></td> <td><input type="checkbox"/> Other (specify) _____</td> </tr> </table>	Name of Federal Candidate	Office Sought:	<input type="checkbox"/> House	State: _____	Disbursement/Obligation For:			<input type="checkbox"/> Senate	District: _____	<input type="checkbox"/> Primary <input type="checkbox"/> General			<input type="checkbox"/> President		<input type="checkbox"/> Other (specify) _____	
Name of Federal Candidate	Office Sought:	<input type="checkbox"/> House	State: _____	Disbursement/Obligation For:												
		<input type="checkbox"/> Senate	District: _____	<input type="checkbox"/> Primary <input type="checkbox"/> General												
		<input type="checkbox"/> President		<input type="checkbox"/> Other (specify) _____												
<table style="width:100%; border: none;"> <tr> <td style="width:30%;">Name of Federal Candidate</td> <td style="width:15%;">Office Sought:</td> <td style="width:15%;"><input type="checkbox"/> House</td> <td style="width:10%;">State: _____</td> <td style="width:30%;">Disbursement/Obligation For:</td> </tr> <tr> <td></td> <td></td> <td><input type="checkbox"/> Senate</td> <td>District: _____</td> <td><input type="checkbox"/> Primary <input type="checkbox"/> General</td> </tr> <tr> <td></td> <td></td> <td><input type="checkbox"/> President</td> <td></td> <td><input type="checkbox"/> Other (specify) _____</td> </tr> </table>	Name of Federal Candidate	Office Sought:	<input type="checkbox"/> House	State: _____	Disbursement/Obligation For:			<input type="checkbox"/> Senate	District: _____	<input type="checkbox"/> Primary <input type="checkbox"/> General			<input type="checkbox"/> President		<input type="checkbox"/> Other (specify) _____	
Name of Federal Candidate	Office Sought:	<input type="checkbox"/> House	State: _____	Disbursement/Obligation For:												
		<input type="checkbox"/> Senate	District: _____	<input type="checkbox"/> Primary <input type="checkbox"/> General												
		<input type="checkbox"/> President		<input type="checkbox"/> Other (specify) _____												
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Name of Federal Candidate	Office Sought:	<input type="checkbox"/> House	State: _____	Disbursement/Obligation For:												
		<input type="checkbox"/> Senate	District: _____	<input type="checkbox"/> Primary <input type="checkbox"/> General												
		<input type="checkbox"/> President		<input type="checkbox"/> Other (specify) _____												
<p>B. Full Name (Last, First, Middle Initial) of Payee See Change Media, LLC</p> <hr/> <p>Mailing Address of Payee 8609 West Knoll Drive #D</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>West Hollywood</td> <td>CA</td> <td>90069</td> </tr> </table> <hr/> <table style="width:100%; border: none;"> <tr> <td style="width:60%;">Name of Employer</td> <td>Occupation</td> </tr> </table>	City	State	Zip Code	West Hollywood	CA	90069	Name of Employer	Occupation	<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 / 1 7 / 2 0 0 8</td> </tr> </table> </p> <p>Amount <table style="width:100%; border: none;"> <tr> <td style="text-align: right;">9264.00</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 / 1 7 / 2 0 0 8</td> </tr> </table> </p> <p>Transaction ID : F93.000006</p>	M M / D D / Y Y Y Y	1 0 / 1 7 / 2 0 0 8	9264.00	M M / D D / Y Y Y Y	1 0 / 1 7 / 2 0 0 8		
City	State	Zip Code														
West Hollywood	CA	90069														
Name of Employer	Occupation															
M M / D D / Y Y Y Y																
1 0 / 1 7 / 2 0 0 8																
9264.00																
M M / D D / Y Y Y Y																
1 0 / 1 7 / 2 0 0 8																
<p>Purpose of Disbursement (including title(s) of communication(s)) Media Production</p>																
<table style="width:100%; border: none;"> <tr> <td style="width:30%;">Name of Federal Candidate</td> <td style="width:15%;">Office Sought:</td> <td style="width:15%;"><input type="checkbox"/> House</td> <td style="width:10%;">State: NC</td> <td style="width:30%;">Disbursement/Obligation For: 2008</td> </tr> <tr> <td>Elizabeth Dole</td> <td></td> <td><input checked="" type="checkbox"/> Senate</td> <td>District: _____</td> <td><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General</td> </tr> <tr> <td></td> <td></td> <td><input type="checkbox"/> President</td> <td></td> <td><input type="checkbox"/> Other (specify) _____</td> </tr> </table>	Name of Federal Candidate	Office Sought:	<input type="checkbox"/> House	State: NC	Disbursement/Obligation For: 2008	Elizabeth Dole		<input checked="" type="checkbox"/> Senate	District: _____	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General			<input type="checkbox"/> President		<input type="checkbox"/> Other (specify) _____	
Name of Federal Candidate	Office Sought:	<input type="checkbox"/> House	State: NC	Disbursement/Obligation For: 2008												
Elizabeth Dole		<input checked="" type="checkbox"/> Senate	District: _____	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General												
		<input type="checkbox"/> President		<input type="checkbox"/> Other (specify) _____												
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Name of Federal Candidate	Office Sought:	<input type="checkbox"/> House	State: _____	Disbursement/Obligation For:												
		<input type="checkbox"/> Senate	District: _____	<input type="checkbox"/> Primary <input type="checkbox"/> General												
		<input type="checkbox"/> President		<input type="checkbox"/> Other (specify) _____												
<table style="width:100%; border: none;"> <tr> <td style="width:30%;">Name of Federal Candidate</td> <td style="width:15%;">Office Sought:</td> <td style="width:15%;"><input type="checkbox"/> House</td> <td style="width:10%;">State: _____</td> <td style="width:30%;">Disbursement/Obligation For:</td> </tr> <tr> <td></td> <td></td> <td><input type="checkbox"/> Senate</td> <td>District: _____</td> <td><input type="checkbox"/> Primary <input type="checkbox"/> General</td> </tr> <tr> <td></td> <td></td> <td><input type="checkbox"/> President</td> <td></td> <td><input type="checkbox"/> Other (specify) _____</td> </tr> </table>	Name of Federal Candidate	Office Sought:	<input type="checkbox"/> House	State: _____	Disbursement/Obligation For:			<input type="checkbox"/> Senate	District: _____	<input type="checkbox"/> Primary <input type="checkbox"/> General			<input type="checkbox"/> President		<input type="checkbox"/> Other (specify) _____	
Name of Federal Candidate	Office Sought:	<input type="checkbox"/> House	State: _____	Disbursement/Obligation For:												
		<input type="checkbox"/> Senate	District: _____	<input type="checkbox"/> Primary <input type="checkbox"/> General												
		<input type="checkbox"/> President		<input type="checkbox"/> Other (specify) _____												
<table style="width:100%; border: none;"> <tr> <td style="width:60%;">SUBTOTAL of Disbursement/Obligation This Page (optional)</td> <td style="width:40%; text-align: right;">18264.00</td> </tr> </table>		SUBTOTAL of Disbursement/Obligation This Page (optional)	18264.00													
SUBTOTAL of Disbursement/Obligation This Page (optional)	18264.00															
<table style="width:100%; border: none;"> <tr> <td style="width:60%;">TOTAL This Period (last page this line number only)</td> <td style="width:40%;"></td> </tr> </table> <p>(carry total from last page to line 10)</p>		TOTAL This Period (last page this line number only)														
TOTAL This Period (last page this line number only)																

SCHEDULE 9-B

Disbursement(s) Made or Obligations

A. Full Name (Last, First, Middle Initial) of Payee Hamilton Campaigns	Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> M M / D D / Y Y Y Y </div> <div style="display: flex; justify-content: space-around;"> 1 0 / 0 3 / 2 0 0 8 </div>						
Mailing Address of Payee 4201 Connecticut Ave, NW Suite 610	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">41950.00</div>						
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">City</td> <td style="width:33%;">State</td> <td style="width:33%;">Zip Code</td> </tr> <tr> <td>Washington</td> <td>DC</td> <td>20008</td> </tr> </table>	City	State	Zip Code	Washington	DC	20008	Communication Date <div style="display: flex; justify-content: space-around;"> M M / D D / Y Y Y Y </div>
City	State	Zip Code					
Washington	DC	20008					
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:60%;">Name of Employer</td> <td style="width:40%;">Occupation</td> </tr> </table>	Name of Employer	Occupation	Transaction ID : F93.000007				
Name of Employer	Occupation						

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

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) _____
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) _____
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)	<div style="border: 1px solid black; padding: 2px; text-align: right;">41950.00</div>
TOTAL This Period (last page this line number only) (carry total from last page to line 10)	<div style="border: 1px solid black; padding: 2px; text-align: right;">490214.00</div>