

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 Lantern Project

(b) Address (number and street) check if different than previously reported
1735 Market Street Suite A425

(c) City, State and ZIP Code Philadelphia PA 19103

(d) Name of Employer or Principal Place of Business N/A

(e) Occupation N/A

2. FEC Identification Number C

3. Is This Statement New or Amended

4. Covering Period 10 11 2006 through 10 17 2006

5. (a) Date of Public Distribution(s) 10 17 2006 (b) Communication Title Capital + DC

6. Is the Filer a Qualified Nonprofit Corporation under 11 CFR 114.10? Yes No

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 Alicia Alexon

(b) Address (number and street) 1735 Market Street, Suite A425

(c) City, State and ZIP Code Philadelphia PA 19103

(d) Name of Employer or Principal Place of Business Self Employed

(e) Occupation Consultant

9. Total Donations This Statement 0

10. Total Disbursements/Obligations This Statement 3000000

Under penalty of perjury, I certify that this statement is true, correct and complete. In addition, if the electioneering communications 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 Alicia Alexon

SIGNATURE Alicia Alexon DATE 10/17/2006

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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List of Person(s) Sharing/Exercising Control
(use additional pages as necessary)

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11. Person(s) Sharing/Exercising Control

A. (a) Name <i>Alicia Alexia</i>	
(b) Address (number and street) <i>1735 Market Street, Suite A425</i>	
(c) City, State and ZIP Code <i>Philadelphia PA 19103</i>	
(d) Name of Employer or Principal Place of Business <i>Self Employed</i>	(e) Occupation <i>Consultant</i>
B. (a) Name	
(b) Address (number and street)	
(c) City, State and ZIP Code	
(d) Name of Employer or Principal Place of Business	(e) Occupation
C. (a) Name	
(b) Address (number and street)	
(c) City, State and ZIP Code	
(d) Name of Employer or Principal Place of Business	(e) Occupation
D. (a) Name	
(b) Address (number and street)	
(c) City, State and ZIP Code	
(d) Name of Employer or Principal Place of Business	(e) Occupation
E. (a) Name	
(b) Address (number and street)	
(c) City, State and ZIP Code	
(d) Name of Employer or Principal Place of Business	(e) Occupation

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SCHEDULE 9-A
Donation(s) Received

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26039230748

A. Full Name of Donor Mailing Address of Donor City State Zip	Date of Receipt Amount
B. Full Name of Donor Mailing Address of Donor City State Zip	Date of Receipt Amount
C. Full Name of Donor Mailing Address of Donor City State Zip	Date of Receipt Amount
D. Full Name of Donor Mailing Address of Donor City State Zip	Date of Receipt Amount
E. Full Name of Donor Mailing Address of Donor City State Zip	Date of Receipt Amount
SUBTOTAL of Donations This Page (optional) ▶ TOTAL This Period (last page this line number only) ▶ (carry total from last page to Line 9)	

SCHEDULE 9-B

Disbursement(s) Made or Obligation(s)

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A. Full Name (Last, First, Middle Initial) of Payee The Campaign Group		Date of Disbursement or Obligation 10 17 2006	
Mailing Address of Payee 1600 Locust Street		Amount 30,000.00	
City Philadelphia	State PA	Zip Code 19103	Communication Date 10 17 2006
Name of Employer N/A	Occupation N/A		
Purpose of Disbursement (including title(s) of communication(s)) Media Buy ("Capital and DC")			
Name of Federal Candidate Rick Santorum	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: _____	Disbursement/Obligation For: <input type="checkbox"/> Primary <input checked="" 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) ▶
B. Full Name (Last, First, Middle Initial) of Payee _____		Date of Disbursement or Obligation _____	
Mailing Address of Payee _____		Amount _____	
City _____	State _____	Zip Code _____	Communication Date _____
Name of Employer _____	Occupation _____		
Purpose of Disbursement (including title(s) of communication(s)) _____			
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 Disbursements/Obligations This Page (optional)		_____	
TOTAL This Period (last page this line number only) (carry total from last page to Line 10)		30,000.00	

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Federal Election Commission
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