

**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

(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

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

4. Covering Period  
M M / D D / Y Y Y Y  
10 / 14 / 2008  
through  
M M / D D / Y Y Y Y  
10 / 24 / 2008

5. (a) Date of Public Distribution(s) M M / D D / Y Y Y Y (b) Communication Title Secure Future

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

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

(d) Name of Employer or Principal Place of Business (e) Occupation  
Natl Federation of Ind Business Compliance Director

9. Total Donations This Statement .00

10. Total Disbursements/Obligations This Statement 638065.00

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 10/15/2008

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

28039864750

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

28039864751

<b>A. Full Name (Last, First, Middle Initial) of Payee</b> Jamestown Associates					<b>Date of Disbursement or Obligation</b> M M / D D / Y Y Y Y 10 / 14 / 2008							
<b>Mailing Address of Payee</b> 706 7th Street SE					<b>Amount</b> 399757.00							
<b>City</b> Washington		<b>State</b> DC		<b>Zip Code</b> 20003		<b>Communication Date</b> M M / D D / Y Y Y Y 10 / 14 / 2008						
<b>Name of Employer</b>					<b>Occupation</b>							
<b>Purpose of Disbursement (including title(s) of communication(s))</b> Issue Advocacy (Secure Future)												
<b>Name of Federal Candidate</b> John Porter			<b>Office Sought:</b> X		House Senate President		<b>State:</b> NV <b>District:</b> 03		<b>Disbursement/Obligation For:</b> 2008 Primary X General Other (specify) _____			
F94.000002			<b>Name of Federal Candidate</b> Robin Hayes		<b>Office Sought:</b> X		House Senate President		<b>State:</b> NC <b>District:</b> 08			
F94.000003			<b>Name of Federal Candidate</b> Dave Reichert		<b>Office Sought:</b> X		House Senate President		<b>State:</b> WA <b>District:</b> 08			
F94.000004												
<b>B. Full Name (Last, First, Middle Initial) of Payee</b> Jamestown Associates					<b>Date of Disbursement or Obligation</b> M M / D D / Y Y Y Y 10 / 14 / 2008							
<b>Mailing Address of Payee</b> 706 7th Street					<b>Amount</b> 60458.00							
<b>City</b> Washington		<b>State</b> DC		<b>Zip Code</b> 20003		<b>Communication Date</b> M M / D D / Y Y Y Y 10 / 14 / 2008						
<b>Name of Employer</b>					<b>Occupation</b>							
<b>Purpose of Disbursement (including title(s) of communication(s))</b> Issue Advocacy (Fiscal Leader)												
<b>Name of Federal Candidate</b> John Porter			<b>Office Sought:</b> X		House Senate President		<b>State:</b> NV <b>District:</b> 03		<b>Disbursement/Obligation For:</b> 2008 Primary X General Other (specify) _____			
F94.000006			<b>Name of Federal Candidate</b> Robin Hayes		<b>Office Sought:</b> X		House Senate President		<b>State:</b> NC <b>District:</b> 08			
F94.000007			<b>Name of Federal Candidate</b> Dave Reichert		<b>Office Sought:</b> X		House Senate President		<b>State:</b> WA <b>District:</b> 08			
F94.000008												
<b>SUBTOTAL</b> of Disbursement/Obligation This Page (optional) .....					460215.00							
<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**

28039864752

<b>A.</b> Full Name (Last, First, Middle Initial) of Payee Jamestown Associates					Date of Disbursement or Obligation M M / D D / Y Y Y Y 10 / 14 / 2008						
Mailing Address of Payee 706 7th Street SE					Amount  146350.00						
City	State	Zip Code									
Washington	DC	20003									
Name of Employer					Occupation						
Purpose of Disbursement (including title(s) of communication(s))					Transaction ID : F93.000003						
Issue Advocacy (It's Wrong)											
Name of Federal Candidate	Office Sought:	<input checked="" type="checkbox"/>	House	State:	OH	Disbursement/Obligation For: 2008					
Mary Jo Kilroy			Senate		District: 15	Primary <input checked="" type="checkbox"/> General					
F94.000010			President			Other (specify) _____					
Name of Federal Candidate	Office Sought:		House	State:		Disbursement/Obligation For:					
			Senate			Primary            General					
			President			Other (specify) _____					
Name of Federal Candidate	Office Sought:		House	State:		Disbursement/Obligation For:					
			Senate			Primary            General					
			President			Other (specify) _____					
<b>B.</b> Full Name (Last, First, Middle Initial) of Payee					Date of Disbursement or Obligation						
Jamestown Associates					M M / D D / Y Y Y Y						
Mailing Address of Payee					10 / 14 / 2008						
706 7th Street SE					Amount						
City					31500.00						
Washington	DC	20003									
Name of Employer					Occupation						
Purpose of Disbursement (including title(s) of communication(s))					Transaction ID : F93.000004						
Issue Advocacy (Hurts Workers)											
Name of Federal Candidate	Office Sought:	<input checked="" type="checkbox"/>	House	State:	OH	Disbursement/Obligation For: 2008					
Mary Jo Kilroy			Senate		District: 15	Primary <input checked="" type="checkbox"/> General					
F94.000012			President			Other (specify) _____					
Name of Federal Candidate	Office Sought:		House	State:		Disbursement/Obligation For:					
			Senate			Primary            General					
			President			Other (specify) _____					
Name of Federal Candidate	Office Sought:		House	State:		Disbursement/Obligation For:					
			Senate			Primary            General					
			President			Other (specify) _____					
<b>SUBTOTAL</b> of Disbursement/Obligation This Page (optional) .....					177850.00						
<b>TOTAL</b> This Period (last page this line number only) .....					638065.00						
(carry total from last page to line 10)											

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 # 305* Date of Receipt or Postmarked  
*10/15/08*

*JSP*  
PREPARER

*10/16/08*  
DATE PREPARED

28039864753