

**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