

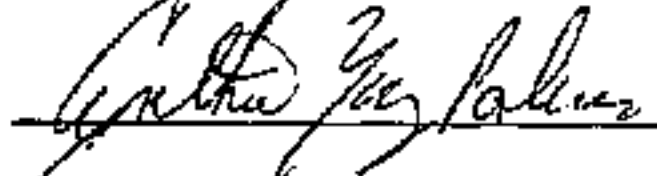
FEC FORM 9

24 HOUR NOTICE OF DISBURSEMENTS/OBLIGATIONS FOR ELECTIONEERING COMMUNICATIONS

1. Individual, Organization or Qualified Nonprofit Corporation Making the Disbursement/Obligations	
(a) Name Softer Voices	
(b) Address (number and street) <input type="checkbox"/> check if different than previously reported P.O. Box 3588	2. FEC Identification Number C
(c) City, State and ZIP Code Washington, DC 20007	
(d) Name of Employer or Principal Place of Business	(e) Occupation
3. Is This Statement <input checked="" type="checkbox"/> New or <input type="checkbox"/> Amended	4. Covering Period 01 01 2006 through 09 20 2006
5. (a) Date of Public Distribution(a) 09 20 2006	(b) Communication Title "Who I Am Today" "Family"
6. Is the Filer a Qualified Nonprofit Corporation under 11 CFR 114.10?	Yes No <input checked="" type="checkbox"/>
7. Were the disbursements for the electioneering communication made exclusively from donations to a segregated bank account?	Yes No <input checked="" type="checkbox"/>
8. Custodian of Records	
(a) Name Cynthia Young Palmer	
(b) Address (number and street) P.O. Box 3588	
(c) City, State and ZIP Code Washington, DC 20007	
(d) Name of Employer or Principal Place of Business	(e) Occupation
9. Total Donations This Statement	, 6 5 0, 0 0 0 . 0 0
10. Total Disbursements/Obligations This Statement	, 7 0 3, 1 4 . 9 1 2

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 Cynthia Young Palmer

SIGNATURE  DATE 9/20/06

NOTE: Submission of false, erroneous or incomplete information may subject the person signing this statement to the penalties of 2 U.S.C. 5437g

20039194768

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

PAGE 2 OF 5

11. Person(s) Sharing/Exercising Control

A. (a) Name	
Heather Higgins	
(b) Address (number and street)	
P.O. Box 3588	
(c) City, State and ZIP Code	
Washington, DC 20007	
(d) Name of Employer or Principal Place of Business	(e) Occupation
The Randolph Foundation	President
B. (a) Name	
Midge Deckter	
(b) Address (number and street)	
P.O. Box 3588	
(c) City, State and ZIP Code	
Washington, DC 20007	
(d) Name of Employer or Principal Place of Business	(e) Occupation
Self	Free Lance Writer
C. (a) Name	
Lisa Schiffren Mann	
(b) Address (number and street)	
P.O. Box 3588	
(c) City, State and ZIP Code	
Washington, DC 20007	
(d) Name of Employer or Principal Place of Business	(e) Occupation
Self	Writer/speechwriter
D. (a) Name	
Nina Rosenwald	
(b) Address (number and street)	
P.O. Box 3588	
(c) City, State and ZIP Code	
Washington, DC 20007	
(d) Name of Employer or Principal Place of Business	(e) Occupation
American Securities, LP	Principal
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

SCHEDULE 9-A
Donation(s) Received

A. Full Name of Donor Dr. John M. Templeton, Jr.	Date of Receipt 09 18 2006
Mailing Address of Donor 601 Pembroke Road	Amount 400,000.00
City Bryn Mawr State PA Zip 19010	

B. Full Name of Donor Foster Friess	Date of Receipt 09 18 2006
Mailing Address of Donor P.O. Box 9790	Amount 250,000.00
City Jackson Hole State WY Zip 83002	

C. Full Name of Donor	Date of Receipt
Mailing Address of Donor	Amount
City State Zip	

D. Full Name of Donor	Date of Receipt
Mailing Address of Donor	Amount
City State Zip	

E. Full Name of Donor	Date of Receipt
Mailing Address of Donor	Amount
City State Zip	

SUBTOTAL of Donations This Page (optional) ▶	650,000.00
TOTAL This Period (last page this line number only) ▶ (carry total from last page to Line 9)	650,000.00

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SCHEDULE 9-B

Disbursement(s) Made or Obligation(s)

A. Full Name (Last, First, Middle Initial) of Payee Mentzer Media Services		Date of Disbursement or Obligation 09 19 2006	
Mailing Address of Payee 600 Fairmount Avenue, #306		Amount 650,000.00	
City Towson	State MD	Zip Code 21286	Communication Date 09 20 2006
Name of Employer _____		Occupation _____	
Purpose of Disbursement (including title(s) of communication(s)) TV Ads (purchase airtime) "Family" "Who I Am Today"			
Name of Federal Candidate Rick Santorum	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: <u>PA</u> District: _____	Disbursement/Obligation For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶
Name of Federal Candidate Bob Casey, Jr.	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: <u>PA</u> 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) ▶
B. Full Name (Last, First, Middle Initial) of Payee Alfano, Leonardo		Date of Disbursement or Obligation 09 20 2006	
Mailing Address of Payee 1090 Vermont Avenue		Amount 35,874.12	
City Washington	State DC	Zip Code 20005	Communication Date 09 20 2006
Name of Employer _____		Occupation _____	
Purpose of Disbursement (including title(s) of communication(s)) Media Production - TV Spots "Family" "Who I Am Today"			
Name of Federal Candidate Rick Santorum	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: <u>PA</u> District: _____	Disbursement/Obligation For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶
Name of Federal Candidate Bob Casey, Jr.	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: <u>PA</u> 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) ▶
SUBTOTAL of Disbursements/Obligations This Page (optional)		685,874.12	
TOTAL This Period (last page this line number only) (carry total from last page to Line 10)		,	

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SCHEDULE 9-B

Disbursement(s) Made or Obligation(s)

A. Full Name (Last, First, Middle Initial) of Payee <u>The Polling Company</u>		Date of Disbursement or Obligation 09 12 2006	
Mailing Address of Payee 1220 Connecticut Avenue		Amount 1,627,500	
City Washington	State DC	Zip Code 20036	Communication Date 09 20 2006
Name of Employer The Polling Company		Occupation	
Purpose of Disbursement (including title(s) of communication(s)) Online Focus Groups			
Name of Federal Candidate Rick Santorum	Office Sought: <input checked="" 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:	State:	Disbursement/Obligation For:
Name of Federal Candidate	Office Sought:	State:	Disbursement/Obligation For:
B. Full Name (Last, First, Middle Initial) of Payee InterCollegiate Studies Institute		Date of Disbursement or Obligation 09 19 2006	
Mailing Address of Payee 3901 Centerville Road		Amount 1,000,000	
City Wilmington	State DE	Zip Code 19807	Communication Date 09 20 2006
Name of Employer		Occupation	
Purpose of Disbursement (including title(s) of communication(s)) Purchase Right(s) to Excerpts "It Takes A Family"			
Name of Federal Candidate Rick Santorum	Office Sought: <input checked="" 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:	State:	Disbursement/Obligation For:
Name of Federal Candidate	Office Sought:	State:	Disbursement/Obligation For:
SUBTOTAL of Disbursements/Obligations This Page (optional)		1,727,500	
TOTAL This Period (last page this line number only) (carry total from last page to Line 10)		2,031,492	

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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.

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<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
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<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input checked="" type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked

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N/A
 PREPARER

N/A
 DATE PREPARED

26039184773