

Walden & Associates

FACSIMILE COVER SHEET

DATE: 11-7-06

PAGES: 5

(includes this cover page)

TO: FEC

COMPANY: _____

PHONE: _____

FAX: 202-219-0174

FROM: Gene Walden

PHONE: 713/861-1117

FAX: 713/861-4602

COMMENT:

55 Waugh, Suite 515, Houston, Texas 77007
Phone 713/861-1117 Fax 713/861-4602

26039270830

Americans For Honesty On Issues
107 S West St, #569
Alexandria, VA 22314
Committee ID#: C30000616

Federal Election Commission
999 E St NW
Washington, D.C. 20463
Fax No.: (202) 219-0174

November 7, 2006

Re: Form 9, Electioneering Communication Distributed on 10/31/06

Dear Sir or Madam,

Attached please find an Amended Form 9 for Electioneering Communications that were first distributed on 10/31/06. The initial filing included the vendor's best estimate of the cost of production at the time of filing and this amendment reflects the actual cost of production.

If you have any questions, please contact me at (713) 861-1117.

Sincerely,



Sue Walden
President
Americans For Honesty On Issues

26039270851

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
Americans For Honesty On Issues

(b) Address (number and street) check if different than previously reported
107 S. West St, #569

(c) City, State and ZIP Code
Alexandria, VA 22314

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

(e) Occupation
N/A

2. FEC Identification Number

C 30000616

3. Is This Statement
 New
or
 Amended

4. Covering Period

10 / 29 / 2006
through
10 / 31 / 2006

5. (a) Date of Public Distribution(s) 10 / 31 / 2006 (b) Communication Title "Don't Fence Me In"

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
Sue Walden

(b) Address (number and street)
107 S. West St, #569

(c) City, State and ZIP Code
Alexandria, VA 22314

(d) Name of Employer or Principal Place of Business
Walden & Associates (Houston, TX)

(e) Occupation
Political Consultant

9. Total Donations This Statement \$0.00

10. Total Disbursements/Obligations This Statement \$565,620.00

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 Sue Walden

SIGNATURE 

DATE 11/07/06

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

26039270832

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

11. Person(s) Sharing/Exercising Control

A. (a) Name Sue Walden	
(b) Address (number and street) 107 S. West St, #569	
(c) City, State and ZIP Code Alexandria, VA 22314	
(d) Name of Employer or Principal Place of Business Walden & Associates (Houston, TX)	(e) Occupation Political Consultant
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-B

Disbursement(s) Made or Obligation(s)

A. Full Name (Last, First, Middle Initial) of Payee The Strategy Group For Media		Date of Disbursement or Obligation 10 / 29 / 2006	
Mailing Address of Payee 3944 N Hampton Dr		Amount \$15,600.00	
City Powell, OH	State OH	Zip Code 43065	Communication Date 10 / 31 / 2006
Name of Employer N/A	Occupation N/A		
Purpose of Disbursement (Including title(s) of communication(s)) Ad Production - "Don't Fence Me In"			
Name of Federal Candidate Claire McCaskill	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: MO District: 00	Disbursement/Obligation For: 2006 <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 Pathfinder Marketing		Date of Disbursement or Obligation 10 / 30 / 2006	
Mailing Address of Payee 6164 Blackburn Ct		Amount \$550,020.00	
City League City, TX	State TX	Zip Code 77573	Communication Date 10 / 31 / 2006
Name of Employer N/A	Occupation N/A		
Purpose of Disbursement (Including title(s) of communication(s)) Broadcast/Cable Television Media Buy - "Don't Fence Me In"			
Name of Federal Candidate Claire McCaskill	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: MO District: 00	Disbursement/Obligation For: 2006 <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) ▶
SUBTOTAL of Disbursements/Obligations This Page (optional)		\$565,620.00	
TOTAL This Period (last page this line number only) (carry total from last page to Line 10)		\$565,620.00	

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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.

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> USPS First Class Mail	Postmarked
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<input type="checkbox"/> USPS Express Mail	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<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 (5/2004)	N/A DATE PREPARED

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