# 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

**2. FEC Identification Number**: C

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

(e) Occupation: N/A

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

**4. Covering Period** 09 / 19 / 2006 through 09 / 22 / 2006

**5.** (a) Date of Public Distribution(s) 09 / 22 / 2006 (b) Communication Title: Capitol

**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 Alexion

(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** 1,602,000.00

**10. Total Disbursements/Obligations This Statement** 112,500.00

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** Alicia Alexion

**SIGNATURE** [signature] **DATE** 9/27/06

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

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FEC FORM 9 (REV. 02/2003)