

**FEC
FORM 3X**

**REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

RECEIVED
FEC MAIL CENTER
2008 DEC 18 PM 12:07

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. 12FE4M5

ALASKANS FOR REFORM

ADDRESS (number and street) 2951 E BOGARD RD

Check if different than previously reported. (ACC) WASILLA AK 99654-

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

C00455428

3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE)

July 31 Mid-Year Report (Non-election Year Only) (MY)

Termination Report (TER)

(b) Monthly Report Due On:

Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)

Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)

Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)

(c) 12-Day PRE-Election Report for the:

Primary (12P) General (12G) Runoff (12R)

Convention (12C) Special (12S)

Election on MM / DD / YYYY in the State of XX

(d) 30-Day POST-Election Report for the:

General (30G) Runoff (30R) Special (30S)

Election on MM / DD / YYYY in the State of AK

5. Covering Period 10 / 16 / 2008 through 12 / 02 / 2008

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Mary Havens

Signature of Treasurer Mary G. Havens Date 12 / 02 / 2008

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

Office Use Only **FEC FORM 3X**
Rev. 12/2004

28039943944

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Alaskans for Reform

Report Covering the Period:

From:

10 ' 16 ' 2008

To:

11 ' 24 ' 2008

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1,		
(b) Cash on Hand at Beginning of Reporting Period.....	8,313.51	
(c) Total Receipts (from Line 19).....	66,386.1	
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	149,521.2	
7. Total Disbursements (from Line 31).....	149,521.2	
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	0	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....		
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....		



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

28039943945

**DETAILED SUMMARY PAGE
of Receipts**

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

Alaskans for Reform

Report Covering the Period: From:

10 / *16* / *2008*

To:

12 / *03* / *2008*

I. Receipts

**COLUMN A
Total This Period**

**COLUMN B
Calendar Year-to-Date**

11. Contributions (other than loans) From:

- (a) Individuals/Persons Other Than Political Committees
 - (i) Itemized (use Schedule A).....
 - (ii) Unitemized.....
 - (iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶

25,136.1

4,125.00

- (b) Political Party Committees.....
- (c) Other Political Committees (such as PACs).....
- (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5).....▶

66,386.1

12. Transfers From Affiliated/Other Party Committees.....

13. All Loans Received.....

14. Loan Repayments Received.....

15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....

16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....

17. Other Federal Receipts (Dividends, Interest, etc.).....

18. Transfers from Non-Federal and Levin Funds

- (a) Non-Federal Account (from Schedule H3).....
- (b) Levin Funds (from Schedule H5).....
- (c) Total Transfers (add 18(a) and 18(b))..

19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶

66,386.1

20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶

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DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

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II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share		
(ii) Non-Federal Share.....		
(b) Other Federal Operating Expenditures	60281	
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	60281	
22. Transfers to Affiliated/Other Party Committees.....		
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	1294836	
24. Independent Expenditures (use Schedule E)	140095	
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....		
26. Loan Repayments Made.....		
27. Loans Made.....		
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees		
(b) Political Party Committees		
(c) Other Political Committees (such as PACs).....		
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....		
29. Other Disbursements		
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share		
(ii) "Levin" Share.....		
(b) Federal Election Activity Paid Entirely With Federal Funds		
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....		
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	1495212	
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....		

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	663861	
34. Total Contribution Refunds (from Line 28(d))		
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)		
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	60281	
37. Offsets to Operating Expenditures (from Line 15, page 3)		
38. Net Operating Expenditures (subtract Line 37 from Line 36)	60281	

28039943948

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 1 OF 3	
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Alaskans for Reform

A. John Kilpatrick

Full Name (Last, First, Middle Initial)

Mailing Address: **2951 Earl Dr.**

City: **Wasilla** State: **AK** Zip Code: **99654**

Date of Receipt: **10/31/2008**

FEC ID number of contributing federal political committee: **0**

Amount of Each Receipt this Period: **25000**

Name of Employer: _____ Occupation: **Radio Station Owner**

Receipt For: Primary General Other (specify) _____

Aggregate Year-to-Date: **25000**

B. Jerry Holbrook

Full Name (Last, First, Middle Initial)

Mailing Address: **2900 Lavers Lane**

City: **Wasilla** State: **AK** Zip Code: **99654**

Date of Receipt: **10/23/2008**

FEC ID number of contributing federal political committee: **0**

Amount of Each Receipt this Period: **1000.00**

Name of Employer: _____ Occupation: **Small Business Owner**

Receipt For: Primary General Other (specify) _____

Aggregate Year-to-Date: **1000.00**

C. Ron D. Richards

Full Name (Last, First, Middle Initial)

Mailing Address: **385 S. Valley Way**

City: **Palmer** State: **AK** Zip Code: **99645**

Date of Receipt: **10/20/2008**

FEC ID number of contributing federal political committee: **0**

Amount of Each Receipt this Period: **210.00**

Name of Employer: _____ Occupation: **Sm. Business Owner**

Receipt For: Primary General Other (specify) _____

Aggregate Year-to-Date: **210.00**

SUBTOTAL of Receipts This Page (optional) **146000**

TOTAL This Period (last page this line number only) **257361**

28039943949

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2 OF 3
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Alaskans for Reform

A. Full Name (Last, First, Middle Initial)
Amy Carter
 Mailing Address
251 E Danna Str.
 City **Wasilla** State **AK** Zip Code **99654**
 FEC ID number of contributing federal political committee. **C**
 Name of Employer _____ Occupation **Home maker**
 Receipt For:
 Primary General
 Other (specify) _____
 Aggregate Year-to-Date ▼
250.00

Date of Receipt
10 16 2008
 Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Thomas Bjorkland
 Mailing Address
1430 E. Sherwood Dr.
 City **Grand Junction** State **CO** Zip Code **81501**
 FEC ID number of contributing federal political committee. **C**
 Name of Employer _____ Occupation **retired**
 Receipt For:
 Primary General
 Other (specify) _____
 Aggregate Year-to-Date ▼
200.80

Date of Receipt
10 20 2008
 Amount of Each Receipt this Period
200.80

C. Full Name (Last, First, Middle Initial)
The Carpet man
 Mailing Address
2951 E Bogard Rd
 City **Wasilla** State **AK** Zip Code **99654**
 FEC ID number of contributing federal political committee. **C**
 Name of Employer _____ Occupation **Sm. Business Owner**
 Receipt For:
 Primary General
 Other (specify) _____
 Aggregate Year-to-Date ▼
300.00

Date of Receipt
10-29-2008
 Amount of Each Receipt this Period
300.00
(in kind)

SUBTOTAL of Receipts This Page (optional)..... ▶ **750.80**
 TOTAL This Period (last page this line number only)..... ▶

28039943950

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 3 OF 3	
	<input checked="" type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15	<input type="checkbox"/> 12 16

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NAME OF COMMITTEE (In Full)
Alaskans for Reform

A. Full Name (Last, First, Middle Initial) Lavantha Lambert		Date of Receipt 10 19 2008
Mailing Address 3250 N. Banner Way		Amount of Each Receipt this Period 302.81
City Wasilla	State AK	
FEC ID number of contributing federal political committee. C		in kind donation
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

B. Full Name (Last, First, Middle Initial)		Date of Receipt
Mailing Address		Amount of Each Receipt this Period
City	State Zip Code	
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	

C. Full Name (Last, First, Middle Initial)		Date of Receipt
Mailing Address		Amount of Each Receipt this Period
City	State Zip Code	
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	

SUBTOTAL of Receipts This Page (optional).....▶	302.81
TOTAL This Period (last page this line number only).....▶	2513.61

28039943951

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) Alaskans for Reform	FEC IDENTIFICATION NUMBER 000455428
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle Initial) of Payee Adrian Lane		
Mailing Address P.O. Box 875096		
City Wasilla	State AK	Zip Code 99684

Date 10' 20' 2008
Amount 22146

Purpose of Expenditure Posters	Category/Type
Name of Federal Candidate Supported or Opposed by Expenditure: McCain/Palin	
Calendar Year-To-Date Per Election for Office Sought 22146	

Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Check One: <input type="checkbox"/> Support <input type="checkbox"/> Oppose	
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Prime Signs		
Mailing Address 925 University Ave		
City Sacramento	State CA	Zip Code 95825

Date 10' 22' 2008
Amount 35000

Purpose of Expenditure Campaign Buttons	Category/Type
Name of Federal Candidate Supported or Opposed by Expenditure: McCain/Palin	
Calendar Year-To-Date Per Election for Office Sought 35000	

Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Check One: <input type="checkbox"/> Support <input type="checkbox"/> Oppose	
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	107096
(b) SUBTOTAL of Unitemized Independent Expenditures.....	32999
(c) TOTAL Independent Expenditures.....	140095

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary A. Havens
Signature

Date **12' 02' 2008**

28039943952

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <i>Alaskans for Reform</i>	FEC IDENTIFICATION NUMBER <i>000455428</i>
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle Initial) of Payee <i>Frontiersman</i>	Date <i>11 / 19 / 2008</i>
Mailing Address <i>5751 E. Mayflower Ct.</i>	Amount <i>499.50</i>
City <i>Wasilla</i> State <i>AK</i> Zip Code <i>99684</i>	

Purpose of Expenditure <i>Ad in paper</i>	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: District:
Name of Federal Candidate Supported or Opposed by Expenditure: <i>McCain/Palin</i>		Check One: <input type="checkbox"/> Support <input type="checkbox"/> Oppose	

Calendar Year-To-Date Per Election for Office Sought <i>499.50</i>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
---	--

Full Name (Last, First, Middle Initial) of Payee	Date
Mailing Address	Amount
City State Zip Code	

Purpose of Expenditure	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:
Name of Federal Candidate Supported or Opposed by Expenditure:		Check One: <input type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	▶
(b) SUBTOTAL of Unitemized Independent Expenditures.....	▶
(c) TOTAL Independent Expenditures.....	▶

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary A. Havens
Signature

Date *12 / 02 / 2008*

28039943953

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)						PAGE	OF
	<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26		
	<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b		

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NAME OF COMMITTEE (In Full)
Alaskans for Reform

A. Full Name (Last, First, Middle Initial) **The Carpetman**

Mailing Address **2951 E. Bogard Rd.**

City **Wasilla** State **AK** Zip Code **99654**

Purpose of Disbursement **In kind - office space**

Candidate Name **McCain/Palin** Category/Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) **AK** District

Date of Disbursement **10/20/2008**

Amount of Each Disbursement this Period **300.00**

B. Full Name (Last, First, Middle Initial) **Lavanha Lankford**

Mailing Address **3250 N. Banner Way**

City **Wasilla** State **AK** Zip Code **99654**

Purpose of Disbursement **In kind - campaign buttons**

Candidate Name **McCain/Palin** Category/Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) **AK** District

Date of Disbursement **10/19/2008**

Amount of Each Disbursement this Period **502.21**

C. Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name Category/Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

Date of Disbursement

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional) **602.81**

TOTAL This Period (last page this line number only) **602.81**

28039943954

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE | OF |

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Alaskans for Reform

Full Name (Last, First, Middle Initial)

A. <u>Victory 2008</u>		Date of Disbursement
Mailing Address: <u>P.O. Box 7805</u>		<u>10</u> / <u>29</u> / <u>2008</u>
City: <u>Merrifield</u> State: <u>VA</u> Zip Code: <u>22116</u>	Purpose of Disbursement: <u>Contribution</u>	Amount of Each Disbursement this Period
Candidate Name: <u>McCain/Palin</u>	Category/Type: <input type="checkbox"/>	<u>1,000.00</u>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: <u>AK</u> District: <input type="checkbox"/>		

B. <u>Victory 2008</u>		Date of Disbursement
Mailing Address: <u>P.O. Box 7805</u>		<u>12</u> / <u>01</u> / <u>2008</u>
City: <u>Merrifield</u> State: <u>VA</u> Zip Code: <u>22116</u>	Purpose of Disbursement: <u>Contribution</u>	Amount of Each Disbursement this Period
Candidate Name: <u>McCain/Palin</u>	Category/Type: <input type="checkbox"/>	<u>2948.36</u>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: <u>AK</u> District: <input type="checkbox"/>		

C.		Date of Disbursement
Mailing Address		<input type="checkbox"/> / <input type="checkbox"/> / <input type="checkbox"/>
City	State	Zip Code
Purpose of Disbursement	Category/Type: <input type="checkbox"/>	Amount of Each Disbursement this Period
Candidate Name	Category/Type	<input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: <input type="checkbox"/>	District: <input type="checkbox"/>	

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

1,294,836
1,294,836

28039943955

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
<input checked="" type="checkbox"/> USPS Registered/Certified	Postmarked (R/C) <i>12/3/08</i>
<input type="checkbox"/> USPS Priority Mail Delivery Confirmation™ or Signature Confirmation™ Label <input type="checkbox"/>	Postmarked
<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
	Next Business Day Delivery <input type="checkbox"/>
<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 type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked

JAD
 PREPARER

12/8/08
 DATE PREPARED

28039943956