

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 PowerPac.org | | 2. FEC Identification Number C C30000822 |
| (b) Address (number and street) <input type="checkbox"/> check if different than previously reported 201 Spear Street Suite 1650 | (c) City, State and ZIP Code San Francisco CA 94105 | |
| (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 | | | | | |
| | <table border="0"> <tr> <td>M M / D D / Y Y Y Y</td> <td>through</td> <td>M M / D D / Y Y Y Y</td> </tr> <tr> <td>0 1 / 2 9 / 2 0 0 8</td> <td></td> <td>0 1 / 2 9 / 2 0 0 8</td> </tr> </table> | M M / D D / Y Y Y Y | through | M M / D D / Y Y Y Y | 0 1 / 2 9 / 2 0 0 8 | |
| M M / D D / Y Y Y Y | through | M M / D D / Y Y Y Y | | | | |
| 0 1 / 2 9 / 2 0 0 8 | | 0 1 / 2 9 / 2 0 0 8 | | | | |

5. (a) Date of Public Distribution(s) M M / D D / Y Y Y Y **(b) Communication Title** Radio Ads in California

0 1 / 2 9 / 2 0 0 8

6. Is the Filer a Qualified Nonprofit Corporation under 11 CFR 114.10(c)? 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
Lisa V Le

(b) Address (number and street)
201 Spear St Suite 1650

(c) City, State and ZIP Code
San Francisco CA 94105

(d) Name of Employer or Principal Place of Business
Self-employed

(e) Occupation
CPA

9. Total Donations This Statement 0.00

10. Total Disbursements/Obligations This Statement 45300.00

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 Lisa V Le

SIGNATURE _____ DATE 01/30/2008

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

List of Person(s) Sharing/Exercising Control

(use additional pages as necessary)

11. Person(s) Sharing/Exercising Control

| | | | |
|---|--|----------------------------------|-------|
| A. (a) Name | | Transaction ID : F91.4099 | |
| Andrew Wong | | | |
| (b) Address (number and street) | | | |
| 201 Spear St Suite 1650 | | | |
| (c) City, State and Zip Code | | | |
| San Francisco | | CA | 94105 |
| (d) Name of Employer or Principal Place of Business | | (e) Occupation | |
| AJWI | | President | |

SCHEDULE 9-B
Disbursement(s) Made or Obligations

| | | | | | | | | | | | | |
|--|---|--|----------|---------------|----|-------|---|---------------------|---------------------|----------|---------------------|---------------------|
| <p>A. Full Name (Last, First, Middle Initial) of Payee 93.5 KDAY / Magic Broadcasting</p> <hr/> <p>Mailing Address of Payee 5055 Wilshire Blvd. Suite 720</p> <hr/> <table style="width:100%; border: none;"> <tr> <td style="width:33%;">City</td> <td style="width:33%;">State</td> <td style="width:33%;">Zip Code</td> </tr> <tr> <td>Los Angeles</td> <td>CA</td> <td>90036</td> </tr> </table> <hr/> <p>Name of Employer _____ Occupation _____</p> | City | State | Zip Code | Los Angeles | CA | 90036 | <p>Date of Disbursement or Obligation <table style="width:100%; border: none;"> <tr> <td style="text-align:center;">M M / D D / Y Y Y Y</td> </tr> <tr> <td style="text-align:center;">0 1 / 2 9 / 2 0 0 8</td> </tr> </table> </p> <p>Amount <table style="width:100%; border: none;"> <tr> <td style="text-align:right;">10000.00</td> </tr> </table> </p> <p>Communication Date <table style="width:100%; border: none;"> <tr> <td style="text-align:center;">M M / D D / Y Y Y Y</td> </tr> <tr> <td style="text-align:center;">0 1 / 2 9 / 2 0 0 8</td> </tr> </table> </p> <p>Transaction ID : F93.4128</p> | M M / D D / Y Y Y Y | 0 1 / 2 9 / 2 0 0 8 | 10000.00 | M M / D D / Y Y Y Y | 0 1 / 2 9 / 2 0 0 8 |
| City | State | Zip Code | | | | | | | | | | |
| Los Angeles | CA | 90036 | | | | | | | | | | |
| M M / D D / Y Y Y Y | | | | | | | | | | | | |
| 0 1 / 2 9 / 2 0 0 8 | | | | | | | | | | | | |
| 10000.00 | | | | | | | | | | | | |
| M M / D D / Y Y Y Y | | | | | | | | | | | | |
| 0 1 / 2 9 / 2 0 0 8 | | | | | | | | | | | | |
| <p>Purpose of Disbursement (including title(s) of communication(s)) Radio advertising time</p> | | | | | | | | | | | | |
| <p>Name of Federal Candidate Barack Obama</p> <p>F94.4105</p> | <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President</p> <p>State: CA District: _____</p> | <p>Disbursement/Obligation For: 2008</p> <p><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General</p> <p><input type="checkbox"/> Other (specify) _____</p> | | | | | | | | | | |
| <p>Name of Federal Candidate</p> | <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: _____ District: _____</p> | <p>Disbursement/Obligation For:</p> <p><input type="checkbox"/> Primary <input type="checkbox"/> General</p> <p><input type="checkbox"/> Other (specify) _____</p> | | | | | | | | | | |
| <p>Name of Federal Candidate</p> | <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: _____ District: _____</p> | <p>Disbursement/Obligation For:</p> <p><input type="checkbox"/> Primary <input type="checkbox"/> General</p> <p><input type="checkbox"/> Other (specify) _____</p> | | | | | | | | | | |
| <p>B. Full Name (Last, First, Middle Initial) of Payee Clear Channel Broadcasting</p> <hr/> <p>Mailing Address of Payee 340 Townsend St.</p> <hr/> <table style="width:100%; border: none;"> <tr> <td style="width:33%;">City</td> <td style="width:33%;">State</td> <td style="width:33%;">Zip Code</td> </tr> <tr> <td>San Francisco</td> <td>CA</td> <td>94107</td> </tr> </table> <hr/> <p>Name of Employer _____ Occupation _____</p> | City | State | Zip Code | San Francisco | CA | 94107 | <p>Date of Disbursement or Obligation <table style="width:100%; border: none;"> <tr> <td style="text-align:center;">M M / D D / Y Y Y Y</td> </tr> <tr> <td style="text-align:center;">0 1 / 2 9 / 2 0 0 8</td> </tr> </table> </p> <p>Amount <table style="width:100%; border: none;"> <tr> <td style="text-align:right;">15000.00</td> </tr> </table> </p> <p>Communication Date <table style="width:100%; border: none;"> <tr> <td style="text-align:center;">M M / D D / Y Y Y Y</td> </tr> <tr> <td style="text-align:center;">0 1 / 2 9 / 2 0 0 8</td> </tr> </table> </p> <p>Transaction ID : F93.4129</p> | M M / D D / Y Y Y Y | 0 1 / 2 9 / 2 0 0 8 | 15000.00 | M M / D D / Y Y Y Y | 0 1 / 2 9 / 2 0 0 8 |
| City | State | Zip Code | | | | | | | | | | |
| San Francisco | CA | 94107 | | | | | | | | | | |
| M M / D D / Y Y Y Y | | | | | | | | | | | | |
| 0 1 / 2 9 / 2 0 0 8 | | | | | | | | | | | | |
| 15000.00 | | | | | | | | | | | | |
| M M / D D / Y Y Y Y | | | | | | | | | | | | |
| 0 1 / 2 9 / 2 0 0 8 | | | | | | | | | | | | |
| <p>Purpose of Disbursement (including title(s) of communication(s)) Radio advertising time</p> | | | | | | | | | | | | |
| <p>Name of Federal Candidate Barack Obama</p> <p>F94.4105</p> | <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President</p> <p>State: CA District: _____</p> | <p>Disbursement/Obligation For: 2008</p> <p><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General</p> <p><input type="checkbox"/> Other (specify) _____</p> | | | | | | | | | | |
| <p>Name of Federal Candidate</p> | <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: _____ District: _____</p> | <p>Disbursement/Obligation For:</p> <p><input type="checkbox"/> Primary <input type="checkbox"/> General</p> <p><input type="checkbox"/> Other (specify) _____</p> | | | | | | | | | | |
| <p>Name of Federal Candidate</p> | <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: _____ District: _____</p> | <p>Disbursement/Obligation For:</p> <p><input type="checkbox"/> Primary <input type="checkbox"/> General</p> <p><input type="checkbox"/> Other (specify) _____</p> | | | | | | | | | | |
| <p>SUBTOTAL of Disbursement/Obligation This Page (optional)</p> | | <table style="width:100%; border: none;"> <tr> <td style="text-align:right;">25000.00</td> </tr> </table> | 25000.00 | | | | | | | | | |
| 25000.00 | | | | | | | | | | | | |
| <p>TOTAL This Period (last page this line number only) (carry total from last page to line 10)</p> | | <table style="width:100%; border: none;"> <tr> <td style="text-align:right;"> </td> </tr> </table> | | | | | | | | | | |
| | | | | | | | | | | | | |

SCHEDULE 9-B

Disbursement(s) Made or Obligations

| | | | | | | | | | | | | | | | | |
|--|------------|----------|----------|---------|----|-------|------------------|------------|--|--|---|---------------------|---------------------|----------|---------------------|---------------------|
| A. Full Name (Last, First, Middle Initial) of Payee KPWR/Emmis Communications <hr/> Mailing Address of Payee 2600 West Olive Ave. 8th Floor <hr/> <table style="width:100%; border: none;"> <tr> <td style="width:33%;">City</td> <td style="width:33%;">State</td> <td style="width:33%;">Zip Code</td> </tr> <tr> <td>Burbank</td> <td>CA</td> <td>91505</td> </tr> </table> <hr/> <table style="width:100%; border: none;"> <tr> <td style="width:60%;">Name of Employer</td> <td style="width:40%;">Occupation</td> </tr> <tr> <td> </td> <td> </td> </tr> </table> | City | State | Zip Code | Burbank | CA | 91505 | Name of Employer | Occupation | | | Date of Disbursement or Obligation <table style="width:100%; border: none;"> <tr> <td style="text-align: center;">M M / D D / Y Y Y Y</td> </tr> <tr> <td style="text-align: center;">0 1 / 2 9 / 2 0 0 8</td> </tr> </table> <hr/> Amount <table style="width:100%; border: none;"> <tr> <td style="text-align: right;">15000.00</td> </tr> </table> <hr/> Communication Date <table style="width:100%; border: none;"> <tr> <td style="text-align: center;">M M / D D / Y Y Y Y</td> </tr> <tr> <td style="text-align: center;">0 1 / 2 9 / 2 0 0 8</td> </tr> </table> <hr/> Transaction ID : F93.4130 | M M / D D / Y Y Y Y | 0 1 / 2 9 / 2 0 0 8 | 15000.00 | M M / D D / Y Y Y Y | 0 1 / 2 9 / 2 0 0 8 |
| City | State | Zip Code | | | | | | | | | | | | | | |
| Burbank | CA | 91505 | | | | | | | | | | | | | | |
| Name of Employer | Occupation | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | |
| M M / D D / Y Y Y Y | | | | | | | | | | | | | | | | |
| 0 1 / 2 9 / 2 0 0 8 | | | | | | | | | | | | | | | | |
| 15000.00 | | | | | | | | | | | | | | | | |
| M M / D D / Y Y Y Y | | | | | | | | | | | | | | | | |
| 0 1 / 2 9 / 2 0 0 8 | | | | | | | | | | | | | | | | |

| | | | |
|--|----------------|--|---|
| Purpose of Disbursement (including title(s) of communication(s)) Radio advertising time | | | |
| Name of Federal Candidate Barack Obama | Office Sought: | <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President | State: CA District: _____ Disbursement/Obligation For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____ |
| F94.4105 | | | |
| 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 John Mazyck <hr/> Mailing Address of Payee 2201 Carroll St #5 <hr/> <table style="width:100%; border: none;"> <tr> <td style="width:33%;">City</td> <td style="width:33%;">State</td> <td style="width:33%;">Zip Code</td> </tr> <tr> <td>Oakland</td> <td>CA</td> <td>94606</td> </tr> </table> <hr/> <table style="width:100%; border: none;"> <tr> <td style="width:60%;">Name of Employer</td> <td style="width:40%;">Occupation</td> </tr> <tr> <td>Self-employed</td> <td>Video producer</td> </tr> </table> | City | State | Zip Code | Oakland | CA | 94606 | Name of Employer | Occupation | Self-employed | Video producer | Date of Disbursement or Obligation <table style="width:100%; border: none;"> <tr> <td style="text-align: center;">M M / D D / Y Y Y Y</td> </tr> <tr> <td style="text-align: center;">0 1 / 2 9 / 2 0 0 8</td> </tr> </table> <hr/> Amount <table style="width:100%; border: none;"> <tr> <td style="text-align: right;">4500.00</td> </tr> </table> <hr/> Communication Date <table style="width:100%; border: none;"> <tr> <td style="text-align: center;">M M / D D / Y Y Y Y</td> </tr> <tr> <td style="text-align: center;">0 1 / 2 9 / 2 0 0 8</td> </tr> </table> <hr/> Transaction ID : F93.4131 | M M / D D / Y Y Y Y | 0 1 / 2 9 / 2 0 0 8 | 4500.00 | M M / D D / Y Y Y Y | 0 1 / 2 9 / 2 0 0 8 |
| City | State | Zip Code | | | | | | | | | | | | | | |
| Oakland | CA | 94606 | | | | | | | | | | | | | | |
| Name of Employer | Occupation | | | | | | | | | | | | | | | |
| Self-employed | Video producer | | | | | | | | | | | | | | | |
| M M / D D / Y Y Y Y | | | | | | | | | | | | | | | | |
| 0 1 / 2 9 / 2 0 0 8 | | | | | | | | | | | | | | | | |
| 4500.00 | | | | | | | | | | | | | | | | |
| M M / D D / Y Y Y Y | | | | | | | | | | | | | | | | |
| 0 1 / 2 9 / 2 0 0 8 | | | | | | | | | | | | | | | | |

| | | | |
|---|----------------|--|---|
| Purpose of Disbursement (including title(s) of communication(s)) Addl cost for TV ad in Bay Area | | | |
| Name of Federal Candidate Barack Obama | Office Sought: | <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President | State: CA District: _____ Disbursement/Obligation For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____ |
| F94.4105 | | | |
| 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 Disbursement/Obligation This Page (optional) | 19500.00 |
| TOTAL This Period (last page this line number only) (carry total from last page to line 10) | |

SCHEDULE 9-B

Disbursement(s) Made or Obligations

A. Full Name (Last, First, Middle Initial) of Payee

Nubian Sisters Productions

Mailing Address of Payee

2911 South West Blvd

City State Zip Code
Los Angeles CA 90016

Name of Employer Occupation

Date of Disbursement or Obligation

M M / D D / Y Y Y Y
0 1 / 2 9 / 2 0 0 8

Amount

800.00

Communication Date

M M / D D / Y Y Y Y
0 1 / 2 9 / 2 0 0 8

Transaction ID : F93.4124

Purpose of Disbursement (including title(s) of communication(s))

Production for radio ad

Name of Federal Candidate
Barack Obama

Office Sought: House State: CA
 Senate District: _____
 President

Disbursement/Obligation For: 2008
 Primary General
 Other (specify) _____

F94.4105

Name of Federal Candidate

Office Sought: House State: _____
 Senate District: _____
 President

Disbursement/Obligation For:
 Primary General
 Other (specify) _____

Name of Federal Candidate

Office Sought: House State: _____
 Senate District: _____
 President

Disbursement/Obligation For:
 Primary General
 Other (specify) _____

SUBTOTAL of Disbursement/Obligation This Page (optional)

800.00

TOTAL This Period (last page this line number only)
(carry total from last page to line 10)

45300.00