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
ECONOMIC FREEDOM FUND

(b) Address (number and street) ☐ check if different than previously reported
455 CAPITOL MALL SUITE 801

(c) City, State and ZIP Code
SACRAMENTO CA 95814

(d) Name of Employer or Principal Place of Business

(e) Occupation

2. FEC Identification Number
C C30000541

3. Is This Statement ☐ New or ☒ Amended

4. Covering Period 09 14 2006 through 09 16 2006

5. (a) Date of Public Distribution(s) 09 16 2006 **(b) Communication Title** See Schedule 9B for details

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
Charles H. Bell, Jr.

(b) Address (number and street)
455 Capitol Mall, Suite 801

(c) City, State and ZIP Code
Sacramento CA 95814

(d) Name of Employer or Principal Place of Business
Bell, McAndrews & Hiltachk, LLP

(e) Occupation
Attorney

9. Total Donations This Statement .00

10. Total Disbursements/Obligations This Statement 123551.87

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 Charles H. Bell, Jr.

SIGNATURE _____ DATE 10/19/2006

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 : F91.000001

Charles H. Bell, Jr.

(b) Address (number and street)

455 Capitol Mall, Suite 801

(c) City, State and Zip Code

Sacramento	CA	95814

(d) Name of Employer or Principal Place of Business	(e) Occupation
Bell, McAndrews & Hiltachk, LLP	Attorney

SCHEDULE 9-B
Disbursement(s) Made or Obligations

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

Mailing Address of Payee
925 University Avenue

City: Sacramento | State: CA | Zip Code: 95814

Name of Employer | Occupation

Date of Disbursement or Obligation: 09 16 2006

Amount: 112014.00

Communication Date: 09 16 2006

Transaction ID : SBF93.000001

Purpose of Disbursement (including title(s) of communication(s))
Television Buy - Forehead

Name of Federal Candidate: John Barrow
Office Sought: X House / Senate / President
State: GA
District: 12
Disbursement/Obligation For: 2006
Primary / X General / Other (specify)

F94.000001

Name of Federal Candidate
Office Sought: House / Senate / President
State:
District:
Disbursement/Obligation For:
Primary / General / Other (specify)

Name of Federal Candidate
Office Sought: House / Senate / President
State:
District:
Disbursement/Obligation For:
Primary / General / Other (specify)

B. Full Name (Last, First, Middle Initial) of Payee
Meridian Pacific, Inc.

Mailing Address of Payee
925 University Avenue

City: Sacramento | State: CA | Zip Code: 95814

Name of Employer | Occupation

Date of Disbursement or Obligation: 09 16 2006

Amount: 11537.87

Communication Date: 09 16 2006

Transaction ID : SBF93.000002

Purpose of Disbursement (including title(s) of communication(s))
Television Production - Forehead

Name of Federal Candidate: John Barrow
Office Sought: X House / Senate / President
State: GA
District: 12
Disbursement/Obligation For: 2006
Primary / X General / Other (specify)

F94.000002

Name of Federal Candidate
Office Sought: House / Senate / President
State:
District:
Disbursement/Obligation For:
Primary / General / Other (specify)

Name of Federal Candidate
Office Sought: House / Senate / President
State:
District:
Disbursement/Obligation For:
Primary / General / Other (specify)

SUBTOTAL of Disbursement/Obligation This Page (optional) 123551.87

TOTAL This Period (last page this line number only) 123551.87
(carry total from last page to line 10)