1. Person Making the Disb	ursements/Obligations		
(a) Name	namber of Commerce		
(b) Address (number and stree	at) Check if different than previously reported	2. FI	C Identification Number
(c) City, State and ZIP Code	It street N.W	c	30001101
(d) Name of Employer or Princ	chington OL 20062	(e) Occupation	
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		090	\$ 2010
5. (a) Date of Public Distribution	n(s) 0 9 0 3 2 0 1 0 (b) Communication Title	Lockstep
(e) Other, specify: 7. If the filer is an Individu	Organization or Qualified Nonprofit Corporat al, unincorporated organization or qua s made exclusively from donations to	lified nonprofit corpor	ation, Yee No
B. Custodian of Records			
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List of Person(s) Sharing/Exercising Control (use additional pages as necessary)

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FEC FORM 9 (REV. 12/2007)

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	Obligation(s)		PAGE 3 OF 3
Fuli Name (Last, First, Middle II	ntial) of Payee		bursement or Obligation
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City		and the second	
Washington Name of Employer	DC 20 Occupation	003 Communic	
		09	03 2010
Purpose of Disbursement (Inclu	ding the(s) of communication(s))		
Name of Federal Candidate	Diffee Sought House	Dichuraema	TVObligation For:
	Senate	State: <u>PA</u> Disburaemer	
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Name of Federal Candidate	Office Sought: House		VObligation For:
	Senate		
	President		(spacify)
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		Amount	
City	State Zlp Code		6
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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 v	vas received.
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