

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines

Government Is Not God

ADDRESS (number and street) P. O. Box 77237

Check if different than previously reported. (ACC) Washington DC 20013

2. FEC IDENTIFICATION NUMBER CITY STATE ZIP CODE

C00297531

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

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: (b) Monthly Report Due On:

- April 15 Quarterly Report(Q1)
July 15 Quarterly Report(Q2)
October 15 Quarterly Report(Q3)
January 31 Quarterly Report(YE)
July 31 Mid-Year Report(Non-election Year Only) (MY)
Termination Report (TER)

- Feb 20 (M2)
Mar 20 (M3)
Apr 20 (M4)
May 20 (M5)
Jun 20 (M6)
Jul 20 (M7)
Aug 20 (M8)
Sep 20 (M9)
Oct 20 (M10)
Nov 20 (M11) (Non-Election Year Only)
Dec 20 (M12) (Non-Election Year Only)
Jan 31 (YE)

- 12-Day PRE-Election Report for the: Primary (12P) General (12G) Runoff (12R)
Convention (12C) Special (12G)

Election on in the State of

- 30-Day Post -Election Report for the: General (30G) Runoff (30R) Special (30S)

Election on in the State of

5. Covering Period 01 01 2008 through 03 31 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 Nancy Murray

Signature of Treasurer Electronically Filed by Nancy Murray Date 04 14 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.

Table with 7 columns and 1 row for Office Use Only.

FEC FORM 3X (Rev. 12/2004)

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name
Government Is Not God

Report Covering the Period: From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
0	3

D	D
3	1

Y	Y	Y	Y
2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	Y	Y	Y	Y	2	0	0	8		18873.81
Y	Y	Y	Y							
2	0	0	8							
(b) Cash on Hand at Beginning of Reporting Period	18873.81									
(c) Total Receipts (from Line 19)	48741.00	48741.00								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	67614.81	67614.81								
7. Total Disbursements (from Line 31)	65691.37	65691.37								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	1923.44	1923.44								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00									

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

**DETAILED SUMMARY PAGE
OF RECEIPTS**

Write or Type Committee Name
Government Is Not God

Report Covering the Period: From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
0	3

D	D
3	1

Y	Y	Y	Y
2	0	0	8

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	36402.00	36402.00
(i) Itemized (use Schedule A)	12339.00	12339.00
(ii) Unitemized	48741.00	48741.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	48741.00	48741.00
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	48741.00	48741.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	48741.00	48741.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	8387.35	8387.35
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	8387.35	8387.35
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	2850.00	2850.00
24. Independent Expenditure (use Schedule E)	54454.02	54454.02
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	65691.37	65691.37
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	65691.37	65691.37

DETAILED SUMMARY PAGE
of Disbursements

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)	48741.00	48741.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	48741.00	48741.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	8387.35	8387.35
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	8387.35	8387.35

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 6 / 21
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<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)
Government Is Not God

A.	Full Name (Last, First, Middle Initial) Mrs. Nanci Alcorn	Date of Receipt MM / DD / YYYY 01 / 22 / 2008
	Mailing Address 5430 SE Chase Rd	Transaction ID: SA11AI.6683
	City State Zip Code Gresham OR 97080	Amount of Each Receipt this Period 5000.00
	FEC ID number of contributing federal political committee. C	contribution
	Name of Employer: Eternal Perspective Ministries Occupation: part time employment, also homemaker Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 5000.00	

B.	Full Name (Last, First, Middle Initial) Mr. Randy Alcorn	Date of Receipt MM / DD / YYYY 01 / 22 / 2008
	Mailing Address 5430 SE Chase Rd	Transaction ID: SA11AI.6682
	City State Zip Code Gresham OR 97080	Amount of Each Receipt this Period 5000.00
	FEC ID number of contributing federal political committee. C	contribution
	Name of Employer: Eternal Perspective Ministries Occupation: director, writer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 5000.00	

C.	Full Name (Last, First, Middle Initial) Mr. Arthur Ally	Date of Receipt MM / DD / YYYY 01 / 08 / 2008
	Mailing Address 1055 Maitland Cnter Commons, # 110	Transaction ID: SA11AI.6718
	City State Zip Code Maitland FL 32751	Amount of Each Receipt this Period 3000.00
	FEC ID number of contributing federal political committee. C	contribution
	Name of Employer: Timothy Partners, Ltd. Occupation: partner Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 3000.00	

SUBTOTAL of Receipts This Page (optional)	13000.00
TOTAL This Period (last page this line number only)	

**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 7 / 21
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Government Is Not God

A.	Full Name (Last, First, Middle Initial) Mr. James Draper, Jr.	Date of Receipt MM / DD / YYYY 01 / 23 / 2008
	Mailing Address 7300 John Mc Cain Rd	Transaction ID: SA11AI.6689
	City State Zip Code Colleyville TX 76034	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	contribution
Name of Employer N/A	Occupation retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

B.	Full Name (Last, First, Middle Initial) Mr. Jerry B. Jenkins	Date of Receipt MM / DD / YYYY 01 / 23 / 2008
	Mailing Address 8070 Glenside Dr	Transaction ID: SA11AI.6695
	City State Zip Code Colorado Springs CO 80908	Amount of Each Receipt this Period 3000.00
	FEC ID number of contributing federal political committee. C	contribution
Name of Employer Christian Writers Guild	Occupation author	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3000.00	

C.	Full Name (Last, First, Middle Initial) Ms. Lisa J. Nigro	Date of Receipt MM / DD / YYYY 01 / 30 / 2008
	Mailing Address 314 Osborne Road	Transaction ID: SA11AI.6728
	City State Zip Code Loudonville NY 12211	Amount of Each Receipt this Period 150.00
	FEC ID number of contributing federal political committee. C	contribution
Name of Employer Nigro Companies	Occupation attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)	4150.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 / 21
 (check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Government Is Not God

A. Full Name (Last, First, Middle Initial)
Mr. Ron Norquist

Mailing Address 27611 SE Betty Rd

City State Zip Code
Eagle Creek OR 97022

FEC ID number of contributing federal political committee. **C**

Name of Employer State Farm Insurance Occupation manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 1 / 2 5 / 2 0 0 8

Transaction ID: SA11AI.6684

Amount of Each Receipt this Period
 5000.00

contribution

B. Full Name (Last, First, Middle Initial)
Mr. Lawrence Rippere

Mailing Address 2459 Benjamin Drive

City State Zip Code
Mountain View CA 94043

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A Occupation retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1002.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 3 / 0 4 / 2 0 0 8

Transaction ID: SA11AI.6688

Amount of Each Receipt this Period
 1002.00

contribution

C. Full Name (Last, First, Middle Initial)
Mr. Henry Scholten

Mailing Address 716 Wiser Shore Lane

City State Zip Code
Lynden WA 98264

FEC ID number of contributing federal political committee. **C**

Name of Employer self employed Occupation consruction

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 1 / 2 3 / 2 0 0 8

Transaction ID: SA11AI.6691

Amount of Each Receipt this Period
 500.00

contribution

SUBTOTAL of Receipts This Page (optional) ► **6502.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 / 21

(check only one)

<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

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NAME OF COMMITTEE (In Full)
Government Is Not God

A.

Full Name (Last, First, Middle Initial)
Mr. Henry Scholten

Mailing Address 716 Wisner Shore Lane

City Lynden State WA Zip Code 98264

FEC ID number of contributing federal political committee. C

Name of Employer self employed Occupation construction

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt MM / DD / YYYY
01 / 31 / 2008

Transaction ID: SA11AI.6692

Amount of Each Receipt this Period 1000.00

contribution

B.

Full Name (Last, First, Middle Initial)
Mr. Henry Scholten

Mailing Address 716 Wisner Shore Lane

City Lynden State WA Zip Code 98264

FEC ID number of contributing federal political committee. C

Name of Employer self employed Occupation construction

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1700.00

Date of Receipt MM / DD / YYYY
03 / 04 / 2008

Transaction ID: SA11AI.6693

Amount of Each Receipt this Period 200.00

contribution

C.

Full Name (Last, First, Middle Initial)
Ms Sheryl A. Sodaro

Mailing Address P O Box 368

City Scott Depot State WV Zip Code 25560

FEC ID number of contributing federal political committee. C

Name of Employer not known Occupation not known

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt MM / DD / YYYY
03 / 31 / 2008

Transaction ID: SA11AI.6713

Amount of Each Receipt this Period 250.00

contribution

SUBTOTAL of Receipts This Page (optional) 1450.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 10 / 21
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Government Is Not God

A. Full Name (Last, First, Middle Initial)
Mathew Staver

Mailing Address 116 Hamlin T. Lane

City State Zip Code
Altamonte Springs FL 32714

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Liberty Counsel attorney

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 1 / 2 3 / 2 0 0 8

Transaction ID: SA11AI.6725

Amount of Each Receipt this Period
1000.00

contribution

B. Full Name (Last, First, Middle Initial)
Mr. John Valerius

Mailing Address 1909 Canterbury St.

City State Zip Code
Irving TX 75062

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
self employed attorney

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 3 / 1 4 / 2 0 0 8

Transaction ID: SA11AI.6694

Amount of Each Receipt this Period
300.00

contribution

C. Full Name (Last, First, Middle Initial)
Mrs. Linda Weber

Mailing Address 229 East burnside # 212

City State Zip Code
Gresham OR 97030

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SellQuest broker

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 5000.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 1 / 2 5 / 2 0 0 8

Transaction ID: SA11AI.6685

Amount of Each Receipt this Period
5000.00

contribution

SUBTOTAL of Receipts This Page (optional) ► 6300.00

TOTAL This Period (last page this line number only) ►

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 11 / 21	
	(check only one)			
	<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

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NAME OF COMMITTEE (In Full)
Government Is Not God

A.	Full Name (Last, First, Middle Initial) Mr. Stu Weber		Date of Receipt																					
	Mailing Address 2229 East Burnside # 212		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>2</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	1		2	5		2	0	0	8
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	1		2	5		2	0	0	8														
	City	State	Zip Code		Transaction ID: SA11AI.6686																			
	gresham	OR	97030																					
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>		Amount of Each Receipt this Period																				
Name of Employer Good Shepherd Community Church		Occupation pastor		<input type="text" value="5000.00"/>																				
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		<input type="text" value="5000.00"/>																				

contribution

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="5000.00"/>
TOTAL This Period (last page this line number only)	<input type="text" value="36402.00"/>

**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 12 / 21

<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)
Government Is Not God

A. Full Name (Last, First, Middle Initial) Citibank Business Card Mailing Address P. O. Box 10327 City Boston State MA Zip Code 01259 Purpose of Disbursement travel expenses Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.6666 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 2 / 2 0 0 8
	Amount of Each Disbursement this Period 725.77

B. Full Name (Last, First, Middle Initial) Citibank Business Card Mailing Address P. O. Box 10327 City Boston State MA Zip Code 01259 Purpose of Disbursement office supplies Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.6705 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 6 / 2 0 0 8
	Amount of Each Disbursement this Period 343.95

C. Full Name (Last, First, Middle Initial) Marmak Designs Mailing Address 2081 Hutton Dr. #301 City Carrollton State TX Zip Code 75006 Purpose of Disbursement printing informational material Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.6663 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 5 / 2 0 0 8
	Amount of Each Disbursement this Period 697.83

SUBTOTAL of Disbursements This Page (optional) ▶	1767.55
TOTAL This Period (last page this line number only) ▶	(Empty box)

**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 13 / 21

<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)
Government Is Not God

A. Full Name (Last, First, Middle Initial) Marmak Designs Mailing Address 2081 Hutton Dr. #301 City Carrollton State TX Zip Code 75006 Purpose of Disbursement postage and mail preparation Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.6664 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 5 / 2 0 0 8
	Amount of Each Disbursement this Period 580.55

B. Full Name (Last, First, Middle Initial) Marmak Designs Mailing Address 2081 Hutton Dr. #301 City Carrollton State TX Zip Code 75006 Purpose of Disbursement printing informational materials Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.6696 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 7 / 2 0 0 8
	Amount of Each Disbursement this Period 769.05

C. Full Name (Last, First, Middle Initial) Marmak Designs Mailing Address 2081 Hutton Dr. #301 City Carrollton State TX Zip Code 75006 Purpose of Disbursement postage and mail preparation Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.6697 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 8 / 2 0 0 8
	Amount of Each Disbursement this Period 540.62

SUBTOTAL of Disbursements This Page (optional) ▶	1890.22
TOTAL This Period (last page this line number only) ▶	(Empty box)

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)

<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

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)
Government Is Not God

A. Full Name (Last, First, Middle Initial) Marmak Designs Mailing Address 2081 Hutton Dr. #301 City Carrollton State TX Zip Code 75006 Purpose of Disbursement printing informational materials Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.6698 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 4 / 2 0 0 8
	Category/Type Amount of Each Disbursement this Period 739.39	

B. Full Name (Last, First, Middle Initial) Marmak Designs Mailing Address 2081 Hutton Dr. #301 City Carrollton State TX Zip Code 75006 Purpose of Disbursement postage and mail preparation Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.6699 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 5 / 2 0 0 8
	Category/Type Amount of Each Disbursement this Period 643.17	

C. Full Name (Last, First, Middle Initial) Nancy Murray Mailing Address P. O. Box 7416 City Fredericksburg State VA Zip Code 22404 Purpose of Disbursement reimburse travel expenses Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.6667 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 2 / 2 0 0 8
	Category/Type Amount of Each Disbursement this Period 591.00	

SUBTOTAL of Disbursements This Page (optional) ▶	1973.56
TOTAL This Period (last page this line number only) ▶	(Empty box)

**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 15 / 21

<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)
Government Is Not God

A.	Full Name (Last, First, Middle Initial) United States Post Office	Transaction ID: SB21B.6706 Date of Disbursement
	Mailing Address 115 Massachusetts Ave.	<input type="text" value="03"/> / <input type="text" value="13"/> / <input type="text" value="2008"/>
	City Washington State DC Zip Code 20013	Amount of Each Disbursement this Period
	Purpose of Disbursement postage	<input type="text" value="236.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Webmaster Development	Transaction ID: SB21B.6660 Date of Disbursement
	Mailing Address 323 Cedar Bluff	<input type="text" value="01"/> / <input type="text" value="28"/> / <input type="text" value="2008"/>
	City Knoxville State TN Zip Code 37923	Amount of Each Disbursement this Period
	Purpose of Disbursement website development	<input type="text" value="2178.32"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="2414.32"/>
TOTAL This Period (last page this line number only)	<input type="text" value="8045.65"/>

**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 16 / 21

<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)
Government Is Not God

A.	Full Name (Last, First, Middle Initial) MIKE HUCKABEE	Transaction ID: SB23.6662
	Mailing Address 1134 Silverwood Trail	Date of Disbursement 01 / 31 / 2008
	City North Little Rock State AR Zip Code 72116	Amount of Each Disbursement this Period 1500.00
	Purpose of Disbursement political contribution Candidate Name MIKE HUCKABEE Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: District: 00	011 Category/ Type
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) Jenkins Louis (Woody)	Transaction ID: SB23.6702
	Mailing Address 910 NORTH FOSTER DRIVE	Date of Disbursement 02 / 20 / 2008
	City BATON ROUGE State LA Zip Code 70806	Amount of Each Disbursement this Period 500.00
	Purpose of Disbursement political contribution Candidate Name Jenkins Louis (Woody) Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: LA District: 06	
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) SUSAN B. ANTHONY LIST INC. CANDIDATE FUND	Transaction ID: SB23.6710
	Mailing Address 1800 North Kent Street Suite 1070	Date of Disbursement 03 / 26 / 2008
	City Arlington State VA Zip Code 22209	Amount of Each Disbursement this Period 100.00
	Purpose of Disbursement contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	011 Category/ Type
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)	2100.00
TOTAL This Period (last page this line number only)	

**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 17 / 21

<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)
Government Is Not God

A.	Full Name (Last, First, Middle Initial) ROBERT J. WITTMAN	Transaction ID: SB23.6661 Date of Disbursement
	Mailing Address PO BOX 999	<input type="text" value="01"/> / <input type="text" value="29"/> / <input type="text" value="2008"/>
	City MONTROSS State VA Zip Code 22520	Amount of Each Disbursement this Period
	Purpose of Disbursement political contribution	<input type="text" value="500.00"/>
	Candidate Name ROBERT J. WITTMAN	<input type="text" value="011"/> Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: VA District: 01	Disbursement For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-General

B.	Full Name (Last, First, Middle Initial) ROBERT J. WITTMAN	Transaction ID: SB23.6670 Date of Disbursement
	Mailing Address PO BOX 999	<input type="text" value="02"/> / <input type="text" value="26"/> / <input type="text" value="2008"/>
	City MONTROSS State VA Zip Code 22520	Amount of Each Disbursement this Period
	Purpose of Disbursement political contribution	<input type="text" value="250.00"/>
	Candidate Name ROBERT J. WITTMAN	<input type="text"/> Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: VA District: 01	Disbursement For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-General

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="750.00"/>
TOTAL This Period (last page this line number only)	<input type="text" value="2850.00"/>

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Government Is Not God	FEC IDENTIFICATION NUMBER C C00297531
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Calling Post Communications

Date
M M / D D / Y Y Y Y
0 2 / 0 4 / 2 0 0 8

Mailing Address
531 Blackburn Dr

Amount
5498.01

City State Zip Code
Augusta GA 30907

Transaction ID: SE.6654

Purpose of Expenditure
automated calls

Category/Type

Office Sought: House State: _____
 Senate District: 00
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
MIKE HUCKABEE

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 10996.02

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

Full Name (Last, First, Middle, Initial) of Payee
Citibank Business Card

Date
M M / D D / Y Y Y Y
0 1 / 2 4 / 2 0 0 8

Mailing Address
P. O. Box 10327

Amount
4000.00

City State Zip Code
Boston MA 01259

Transaction ID: SE.6659

Purpose of Expenditure
automated phone calls

Category/Type

Office Sought: House State: _____
 Senate District: 00
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
MIKE HUCKABEE

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 4000.00

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

(a) SUBTOTAL of Itemized Independent Expenditures	9498.01
(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.

Nancy Murray
Signature

Date M M / D D / Y Y Y Y
0 4 / 1 4 / 2 0 0 8

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Government Is Not God	FEC IDENTIFICATION NUMBER C C00297531
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Design4 Advertising

Mailing Address
2020 W. Brandon Blvd Ste 202

City Brandon	State FL	Zip Code 33511
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Purpose of Expenditure radio ads	Category/ Type 004
-------------------------------------	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
MIKE HUCKABEE

Calendar Year-To-Date Per Election for Office Sought	14000.00
---	----------

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

Amount
2750.00

Transaction ID: SE.6643

Office Sought: House State: _____
 Senate District: 00
 Presidential

Check One: Support Oppose

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

Full Name (Last, First, Middle, Initial) of Payee
Dialing Services, LLC

Mailing Address
5149 Cotton Road

City Roswell	State NM	Zip Code 88201
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Purpose of Expenditure automated calls	Category/ Type 004
---	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
MIKE HUCKABEE

Calendar Year-To-Date Per Election for Office Sought	11250.00
---	----------

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

Amount
11250.00

Transaction ID: SE.6642

Office Sought: House State: _____
 Senate District: 00
 Presidential

Check One: Support Oppose

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

(a) SUBTOTAL of Itemized Independent Expenditures	14000.00
(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.

Nancy Murray
Signature

Date M M / D D / Y Y Y Y
0 4 / 1 4 / 2 0 0 8

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Government Is Not God	FEC IDENTIFICATION NUMBER C C00297531
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Dialing Services, LLC

Mailing Address
5149 Cotton Road

City Roswell	State NM	Zip Code 88201
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Purpose of Expenditure Dialing Services, LLC automated calls	Category/ Type 004
--	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
MIKE HUCKABEE

Calendar Year-To-Date Per Election for Office Sought	16000.00
---	----------

Date
M M / D D / Y Y Y Y
0 1 / 2 6 / 2 0 0 8

Amount
16000.00

Transaction ID: SE.6639

Office Sought: House State: _____
 Senate District: 00
 Presidential

Check One: Support Oppose

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

Full Name (Last, First, Middle, Initial) of Payee
Dialing Services, LLC

Mailing Address
5149 Cotton Road

City Roswell	State NM	Zip Code 88201
-----------------	-------------	-------------------

Purpose of Expenditure automated calls	Category/ Type 004
---	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
MIKE HUCKABEE

Calendar Year-To-Date Per Election for Office Sought	25458.00
---	----------

Date
M M / D D / Y Y Y Y
0 1 / 2 6 / 2 0 0 8

Amount
9458.00

Transaction ID: SE.6646

Office Sought: House State: _____
 Senate District: 00
 Presidential

Check One: Support Oppose

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

(a) SUBTOTAL of Itemized Independent Expenditures	25458.00
(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.

Nancy Murray
Signature

Date M M / D D / Y Y Y Y
0 4 / 1 4 / 2 0 0 8

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

NAME OF COMMITTEE (In Full) Government Is Not God		FEC IDENTIFICATION NUMBER C C00297531	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice		Date M M / D D / Y Y Y Y 0 2 / 0 4 / 2 0 0 8	
Full Name (Last, First, Middle, Initial) of Payee Georgia Right to Life		Amount 5498.01	
Mailing Address 283 W Crogan St		Transaction ID: SE.6653	
City Lawrenceville	State GA	Zip Code 30045	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: 00 <input checked="" type="checkbox"/> Presidential
Purpose of Expenditure name list rental		Category/ Type	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate supported or Opposed by expenditure: MIKE HUCKABEE		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____ 2008	
Calendar Year-To-Date Per Election for Office Sought		5498.01	

(a) SUBTOTAL of Itemized Independent Expenditures	5498.01
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	54454.02
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.	
Nancy Murray Signature	Date M M / D D / Y Y Y Y 0 4 / 1 4 / 2 0 0 8