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: Win Back Respect

(b) Address (number and street) ☐ check if different than previously reported: 4601 Connecticut Avenue NW #221

(c) City, State and ZIP Code: Washington DC 20008

(d) Name of Employer or Principal Place of Business: —

(e) Occupation: —

2. FEC Identification Number: C 7 0 0 0 0 2 8 5

3. Is This Statement X New or Amended

4. Covering Period: 10 28 2004 through 10 30 2004

5. (a) Date of Public Distribution(s): 10 30 2004 (b) Communication Title: "What Is His Plan?"

6. Is the Filer a Qualified Nonprofit Corporation under 11 CFR 114.10? Yes No X

7. Were the disbursements for the electioneering communication made exclusively from donations to a segregated bank account? Yes No X

8. Custodian of Records

(a) Name: Matthew F. Wood

(b) Address (number and street): 4601 Connecticut Avenue NW #221

(c) City, State and ZIP Code: Washington DC 20008

(d) Name of Employer or Principal Place of Business: Win Back Respect

(e) Occupation: Secretary / Director

9. Total Donations This Statement: 370000

10. Total Disbursements/Obligations This Statement: 2349765

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: Matthew F. Wood

SIGNATURE: M F Wood DATE: 10/31/2004

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

FEC-FORM 9 (REV. 02/2003)

FEC-FORM 9.PDF

List of Person(s) Sharing/Exercising Control
(use additional pages as necessary)

PAGE 1 OF 1

11. Person(s) Sharing/Exercising Control

A. (a) Name
James Patrick Coy
(b) Address (number and street)
653 Galtier Street #209
(c) City, State and ZIP Code
St Paul MN 55103
(d) Name of Employer or Principal Place of Business
Win Back Respect
(e) Occupation
President

B. (a) Name
Brian Vogt
(b) Address (number and street)
2828 Connecticut Avenue NW #711
(c) City, State and ZIP Code
Washington DC 20008
(d) Name of Employer or Principal Place of Business
Win Back Respect
(e) Occupation
Treasurer

C. (a) Name
Matthew F. Wood
(b) Address (number and street)
4601 Connecticut Avenue NW #221
(c) City, State and ZIP Code
Washington, DC 20008
(d) Name of Employer or Principal Place of Business
Win Back Respect
(e) Occupation
Secretary

D. (a) Name
(b) Address (number and street)
(c) City, State and ZIP Code
(d) Name of Employer or Principal Place of Business
(e) Occupation

E. (a) Name
(b) Address (number and street)
(c) City, State and ZIP Code
(d) Name of Employer or Principal Place of Business
(e) Occupation

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FEC FORM 6 (REV. 03/2003)

SCHEDULE 9-A

Donation(s) Received

A. Full Name of Donor: Justine Haselow Mailing Address of Donor: 6408 Interlachen Blvd City: Edina State: MN Zip: 55436	Date of Receipt: 10 29 2004 Amount: 2700.00
B. Full Name of Donor: Edward Goodwin Mailing Address of Donor: 1 Campbell Avenue #65 City: West Haven State: CT Zip: 06516	Date of Receipt: 10 29 2004 Amount: 1000.00
C. Full Name of Donor: Mailing Address of Donor: City: State: Zip:	Date of Receipt: Amount:
D. Full Name of Donor: Mailing Address of Donor: City: State: Zip:	Date of Receipt: Amount:
E. Full Name of Donor: Mailing Address of Donor: City: State: Zip:	Date of Receipt: Amount:

SUBTOTAL of Donations This Page (optional) ..... ▶ 3700.00

TOTAL This Period (last page this line number only) ..... ▶ 3700.00
(carry total from last page to Line 9)

FEC/FORM 9 REV 02/2002

FEC/MR/PDF

SCHEDULE 9-B

Disbursement(s) Made or Obligation(s)

A. Full Name (Last, First, Middle Initial) of Payee: Media Strategies & Research

Mailing Address of Payee: 1580 Lincoln Street #510

City: Denver State: Co Zip Code: 80203

Name of Employer: — Occupation: —

Date of Disbursement or Obligation: 10 30 2004

Amount: 20,000.00

Communication Date: 10 30 2004

Purpose of Disbursement (including title(s) of communication(s)): TV airtime and brokerage fees for national cable buy of "What Is His Plan?"

Name of Federal Candidate: George W. Bush — Office Sought: House / Senate / President [X] — State: — District: — Disbursement/Obligation For: Primary / [X] General / Other (specify)

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: Bionic Media LLC

Mailing Address of Payee: 1375 Broadway 7th Floor

City: New York State: NY Zip Code: 10018

Name of Employer: — Occupation: —

Date of Disbursement or Obligation: 10 30 2004

Amount: 2,297.90

Communication Date: 10 30 2004

Purpose of Disbursement (including title(s) of communication(s)): Production and editing of "What Is His Plan?"

Name of Federal Candidate: George W. Bush — Office Sought: House / Senate / President [X] — State: — District: — Disbursement/Obligation For: Primary / [X] General / Other (specify)

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 Disbursements/Obligations This Page (optional) ▶ 22,297.90

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

FEC FORM 3 (REV 02/03)

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SCHEDULE 9-B

Disbursement(s) Made or Obligation(s)

A. Full Name (Last, First, Middle Initial) of Payee: 5th Video

Mailing Address of Payee: 630 9th Avenue

City: New York | State: NY | Zip Code: 10036

Name of Employer: — | Occupation: —

Date of Disbursement or Obligation: 10 30 2004

Amount: 64875

Communication Date: 10 30 2004

Purpose of Disbursement (including title(s) of communication(s)): Videotape duplication for "What Is His Plan?"

Name of Federal Candidate: George W. Bush | Office Sought: House / Senate / X President | State: | District: | Disbursement/Obligation For: Primary / X General / Other (specify)

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: Lowders, Jane

Mailing Address of Payee: 2016 Mt. Vernon Avenue

City: Alexandria | State: VA | Zip Code: 22301

Name of Employer: Self | Occupation: Voiceover Professional

Date of Disbursement or Obligation: 10 30 2004

Amount: 55100

Communication Date: 10 30 2004

Purpose of Disbursement (including title(s) of communication(s)): Voiceover Announcement for "What Is His Plan?"

Name of Federal Candidate: George W. Bush | Office Sought: House / Senate / X President | State: | District: | Disbursement/Obligation For: Primary / X General / Other (specify)

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 Disbursements/Obligations This Page (optional) ▶ 114975

TOTAL This Period (last page this line number only) ▶ 23497.65
(carry total from last page to Line 10)

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FEC FORM 9 (REV. 4/2003)

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.

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☐ No Postmark	
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N/A PREPARER	N/A DATE PREPARED

(5/2004)