

FEC FORM 9

24 HOUR NOTICE OF DISBURSEMENTS/OBLIGATIONS FOR ELECTIONEERING COMMUNICATIONS

RECEIVED CENTER
SEP 10 2 12

1. Individual, Organization or Qualified Nonprofit Corporation Making the Disbursement/Obligations

(a) Name: Swift Boat Veterans for Truth

(b) Address (number and street) check if different than previously reported: P.O. Box 26184

(c) City, State and ZIP Code: Alexandria VA 22313

(d) Name of Employer or Principal Place of Business: _____ (e) Occupation: _____

2. FEC Identification Number: C

3. Is This Statement New or Amended

4. Covering Period: 04 23 2004 through 09 09 2004

5. (a) Date of Public Distribution(s): 09 10 2004 (b) Communication Title: Medals

6. Is the Filer a Qualified Nonprofit Corporation under 11 CFR 114.10? 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: Keymouth D. Symmes

(b) Address (number and street): P.O. Box 26184

(c) City, State and ZIP Code: Alexandria VA 22313

(d) Name of Employer or Principal Place of Business: Retired (e) Occupation: Retired

9. Total Donations This Statement: 1 9 0 7 7 8 5 0 0

10. Total Disbursements/Obligations This Statement: 7 0 2 3 1 2 0 0

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: Keymouth D. Symmes

SIGNATURE: *Keymouth D. Symmes* DATE: 9/10/2004

NOTE: Submission of false, erroneous or incomplete information may subject the person signing this statement to the penalties of 18 U.S.C. §437a

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

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11. Person(s) Sharing/Exercising Control

A.	
(a) Name	Rear Admiral Roy Huffman, USN (Ret.)
(b) Address (number and street)	P.O. Box 26184
(c) City, State and ZIP Code	Alexandria, VA 22313
(d) Name of Employer or Principal Place of Business	Retired
(e) Occupation	Retired
B.	
(a) Name	John O'Neill
(b) Address (number and street)	P.O. Box 26184
(c) City, State and ZIP Code	Alexandria, VA 22313
(d) Name of Employer or Principal Place of Business	Clements O'Neill Pierce
(e) Occupation	Attorney
C.	
(a) Name	Arvin A. Horne
(b) Address (number and street)	P.O. Box 26184
(c) City, State and ZIP Code	Alexandria, VA 22313
(d) Name of Employer or Principal Place of Business	Self Employed
(e) Occupation	Attorney
D.	
(a) Name	Weymouth D. Symmes
(b) Address (number and street)	P.O. Box 26184
(c) City, State and ZIP Code	Alexandria, VA 22313
(d) Name of Employer or Principal Place of Business	Retired
(e) Occupation	Retired
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	

SCHEDULE 9-A
Donation(s) Received

PAGE 3 OF 145

A. Full Name of Donor jared abruzzo			Date of Receipt 08 24 2004	
Mailing Address of Donor 59 old niskayuna rd.			Amount 2,500.00	
City loudonville	State NY	Zip 12211		
B. Full Name of Donor Roger Ackerman			Date of Receipt 08 21 2004	
Mailing Address of Donor 10501 North Road			Amount 1,000.00	
City Corning	State NY	Zip 14830		
C. Full Name of Donor Henry L. Adams			Date of Receipt 08 31 2004	
Mailing Address of Donor 1222 18th St. PO Box 085866			Amount 500.00	
City Racine	State WI	Zip 53408		
D. Full Name of Donor Henry L. Adams			Date of Receipt 08 26 2004	
Mailing Address of Donor 1222-18th St			Amount 1,000.00	
City Racine	State WI	Zip 53408		
E. Full Name of Donor Weston Adams			Date of Receipt 08 07 2004	
Mailing Address of Donor 303 Saluda Avenue			Amount 2,000.00	
City Colubbia	State SC	Zip 29205		
SUBTOTAL of Donations This Page (optional)			7,000.00	
TOTAL This Period (last page this line number only) (carry total from last page to Line 9)			7,000.00	

SCHEDULE 9-A
Donation(s) Received

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A. Full Name of Donor Travis K. Anderson			Date of Receipt 0 9 / 0 7 / 2 0 0 4		
Mailing Address of Donor Sand Spring Ln			Amount 3,000.00		
City Morristown	State NJ	Zip 07960			
B. Full Name of Donor Travis K. Anderson			Date of Receipt 0 9 / 0 7 / 2 0 0 4		
Mailing Address of Donor Sand Spring Ln			Amount 3,000.00		
City Morristown	State NJ	Zip 07960			
C. Full Name of Donor SUE ANDREWS			Date of Receipt 0 8 / 2 4 / 2 0 0 4		
Mailing Address of Donor 2213 ROSEMEAD BLVD			Amount 2,500.00		
City SOUTH ELMONTE	State CA	Zip 91733			
D. Full Name of Donor Al Augustini			Date of Receipt 0 8 / 2 6 / 2 0 0 4		
Mailing Address of Donor 523 W. 6th St, Ste. 300			Amount 2,600.00		
City Los Angeles	State CA	Zip 90014			
E. Full Name of Donor Brian Avery			Date of Receipt 0 8 / 2 0 / 2 0 0 4		
Mailing Address of Donor 130 East Dana Street			Amount 1,000.00		
City Mountain View	State CA	Zip 94041			
SUBTOTAL of Donations This Page (optional)			12,000.00		
TOTAL This Period (last page this line number only) (carry total from last page to Line 9)			25,500.00		

SCHEDULE 9-A
Donation(s) Received

<p>A. Full Name of Donor Bruce A. Bachman</p> <p>Mailing Address of Donor 17 Pheasants Rdg. S.</p> <p>City State Zip Wilmington DE 19807</p>	<p>Date of Receipt 08 27 2004</p> <p>Amount 1,000.00</p>
<p>B. Full Name of Donor WILLIAM BACHSCHMIDT</p> <p>Mailing Address of Donor PO BOX 1396</p> <p>City State Zip INGLIS FL 34449</p>	<p>Date of Receipt 08 02 2004</p> <p>Amount 2,500.00</p>
<p>C. Full Name of Donor John W. Ballantyne</p> <p>Mailing Address of Donor 825 N. Elmwood Drive</p> <p>City State Zip Santa Ana CA 92703</p>	<p>Date of Receipt 08 20 2004</p> <p>Amount 1,000.00</p>
<p>D. Full Name of Donor Gary Bang</p> <p>Mailing Address of Donor 875-A Island Drive, #370</p> <p>City State Zip Alameda CA 94502</p>	<p>Date of Receipt 09 01 2004</p> <p>Amount 2,500.00</p>
<p>E. Full Name of Donor Rotchy Barker</p> <p>Mailing Address of Donor 40 Coutry Rd 2AC; P.O. 2080</p> <p>City State Zip Cody WY 82414</p>	<p>Date of Receipt 08 20 2004</p> <p>Amount 2,500.00</p>
<p>SUBTOTAL of Donations This Page (optional) ▶</p>	<p>9,500.00</p>
<p>TOTAL This Period (last page 11 is line number only) ▶ (carry total from last page to line 9)</p>	<p>35,000.00</p>

SCHEDULE 9-A
Donation(s) Received

<p>A. Full Name of Donor Lynne Barney</p> <p>Mailing Address of Donor 4528 Red Oak Lane</p> <p>City State Zip Long Grove IL 60047</p>	<p>Date of Receipt 08 25 2004</p> <p>Amount 1,000.00</p>
<p>B. Full Name of Donor Stephen Barney</p> <p>Mailing Address of Donor 4528 Red Oak Lane</p> <p>City State Zip Long Grove IL 60047</p>	<p>Date of Receipt 08 25 2004</p> <p>Amount 1,000.00</p>
<p>C. Full Name of Donor Terrence Barnich</p> <p>Mailing Address of Donor 12 S. Michigan Ave</p> <p>City State Zip Chicago IL 60603</p>	<p>Date of Receipt 08 23 2004</p> <p>Amount 1,000.00</p>
<p>D. Full Name of Donor Terrence Barnich</p> <p>Mailing Address of Donor 12 S. Michigan Ave</p> <p>City State Zip Chicago IL 60603</p>	<p>Date of Receipt 08 23 2004</p> <p>Amount 2,500.00</p>
<p>E. Full Name of Donor LEE A. BEAMAN</p> <p>Mailing Address of Donor 1525 BROADWAY</p> <p>City State Zip NASHVILLE TN 37203</p>	<p>Date of Receipt 09 04 2004</p> <p>Amount 2,500.00</p>
<p>SUBTOTAL of Donations This Page (confirm) ▶ 7,100.00</p>	
<p>TOTAL This Period (last page this line number only) ▶ 4,210.00 (carry over from last page to Line 2)</p>	

SCHEDULE 9-A
Donation(s) Received

PAGE 8 OF 145

A. Full Name of Donor Denise Bear <hr/> Mailing Address of Donor 130 Potato Road <hr/> City State Zip Carlisle PA 17013	Date of Receipt 0 9 / 0 2 / 2 0 0 4 Amount 1 0 0 0 . 0 0
B. Full Name of Donor Robert Behar <hr/> Mailing Address of Donor 5406 American Beauty Ct <hr/> City State Zip Houston TX 77041	Date of Receipt 0 8 / 2 5 / 2 0 0 4 Amount 1 0 0 0 . 0 0
C. Full Name of Donor frank benevento <hr/> Mailing Address of Donor 101 n.clematis ste 507 <hr/> City State Zip west palm beach FL 33401	Date of Receipt 0 8 / 2 0 / 2 0 0 4 Amount 2 5 0 0 . 0 0
D. Full Name of Donor Marc Benitez <hr/> Mailing Address of Donor 44450 Ocotillo Drive <hr/> City State Zip La Quinta CA 92253	Date of Receipt 0 8 / 2 0 / 2 0 0 4 Amount 1 0 0 0 . 0 0
E. Full Name of Donor Marc Benitez <hr/> Mailing Address of Donor 44450 Ocotillo Drive <hr/> City State Zip La Quinta CA 92253	Date of Receipt 0 8 / 2 7 / 2 0 0 4 Amount 1 0 0 0 . 0 0
SUBTOTAL of Donations This Page (optional) ▶	6 5 0 0 . 0 0
TOTAL This Period (last page this line number only) ▶ <small>(carry total from last page to Line 9)</small>	4 8 6 0 0 . 0 0

SCHEDULE B-A
Donation(s) Received

<p>A. Full Name of Donor Marc Benitez</p> <p>Mailing Address of Donor 44450 Ocotillo Drive</p> <p>City State Zip La Quinta CA 92253</p>	<p>Date of Receipt 08 08 2004</p> <p>Amount 1,000.00</p>
<p>B. Full Name of Donor Donald E. Berkert</p> <p>Mailing Address of Donor 1234 Blair AVENUE</p> <p>City State Zip South Pasadena CA 91030</p>	<p>Date of Receipt 08 07 2004</p> <p>Amount 1,000.00</p>
<p>C. Full Name of Donor David Bennett</p> <p>Mailing Address of Donor 29759 Gleneagles Rd</p> <p>City State Zip Perrysburg OH 43551</p>	<p>Date of Receipt 08 28 2004</p> <p>Amount 1,000.00</p>
<p>D. Full Name of Donor Richard Bennett</p> <p>Mailing Address of Donor 1009 Kakagi CT</p> <p>City State Zip Lexington KY 40515</p>	<p>Date of Receipt 08 03 2004</p> <p>Amount 1,000.00</p>
<p>E. Full Name of Donor Richard Bennett</p> <p>Mailing Address of Donor 1009 Kakagi Ct</p> <p>City State Zip Lexington KY 40515</p>	<p>Date of Receipt 08 21 2004</p> <p>Amount 1,000.00</p>
<p>SUBTOTAL of Donations This Page (optional) 4,100.00</p>	
<p>TOTAL This Form (last page this line number only) 5,270.00 (carry total from last page to Line 9)</p>	

SCHEDULE 9-A
Donation(s) Received

<p>A. Full Name of Donor Blake Berteau</p> <hr/> <p>Mailing Address of Donor 262 Morning Canyon Road</p> <hr/> <p>City State Zip Corona del Mar CA 92625</p>	<p>Date of Receipt 08 20 2004</p> <p>Amount 1,000.00</p>
<p>B. Full Name of Donor R.C. Billips</p> <hr/> <p>Mailing Address of Donor P.O.Box 2666</p> <hr/> <p>City State Zip Pikeville KY 41502</p>	<p>Date of Receipt 08 07 2004</p> <p>Amount 1,000.00</p>
<p>C. Full Name of Donor Norman Blake</p> <hr/> <p>Mailing Address of Donor 11179 Estancia Way</p> <hr/> <p>City State Zip Carmel IN 46032</p>	<p>Date of Receipt 08 26 2004</p> <p>Amount 500.00</p>
<p>D. Full Name of Donor Norman Blake</p> <hr/> <p>Mailing Address of Donor 11179 Estancia Way</p> <hr/> <p>City State Zip Carmel IN 46032</p>	<p>Date of Receipt 08 09 2004</p> <p>Amount 500.00</p>
<p>E. Full Name of Donor Pierce Bloom</p> <hr/> <p>Mailing Address of Donor 3505 Mill Springs Rd</p> <hr/> <p>City State Zip Birmingham AL 35223</p>	<p>Date of Receipt 08 10 2004</p> <p>Amount 500.00</p>
<p>SUBTOTAL of Donations This Page (optional)</p>	<p>3,500.00</p>
<p>TOTAL This Period (last page this line reprints only)</p> <p>(carry total from last page to Line 9)</p>	<p>5,620.00</p>

SCHEDULE 9-A

Donation(s) Received

<p>A. Full Name of Donor Pierce Bloom</p> <hr/> <p>Mailing Address of Donor 3505 Mill Springs Rd</p> <hr/> <p>City State Zip Birmingham AL 35223</p>	<p>Date of Receipt 08 25 2004</p> <p>Amount 1,000.00</p>
<p>B. Full Name of Donor William Bode</p> <hr/> <p>Mailing Address of Donor 1601 N. Randolph Street</p> <hr/> <p>City State Zip Arlington VA 22207</p>	<p>Date of Receipt 08 21 2004</p> <p>Amount 1,000.00</p>
<p>C. Full Name of Donor judi boisson</p> <hr/> <p>Mailing Address of Donor god bless you all and thank you for your</p> <hr/> <p>City State Zip southampton NY 11968</p>	<p>Date of Receipt 08 20 2004</p> <p>Amount 1,000.00</p>
<p>D. Full Name of Donor William Borders</p> <hr/> <p>Mailing Address of Donor 235 Sotir St NW</p> <hr/> <p>City State Zip Ft Walton Beach FL 32548</p>	<p>Date of Receipt 08 20 2004</p> <p>Amount 500.00</p>
<p>E. Full Name of Donor William Borders</p> <hr/> <p>Mailing Address of Donor 235 Sotir St NW</p> <hr/> <p>City State Zip Ft Walton Beach FL 32548</p>	<p>Date of Receipt 08 08 2004</p> <p>Amount 500.00</p>
<p>SUBTOTAL of Donations This Page (optional)</p> <hr/> <p>TOTAL This Period (last page this line number only)</p> <p>(carry total from last page to Line 9)</p>	<p>4,000.00</p> <hr/> <p>6,020.00</p>

SCHEDULE 9-A
Donation(s) Received

<p>A. Full Name of Donor Steve Boyle</p> <p>Mailing Address of Donor po box 225</p> <p>City State Zip Broken Arrow OK 74013</p>	<p>Date of Receipt 0 5 / 2 4 / 2 0 0 4</p> <p>Amount 1,000.00</p>
<p>B. Full Name of Donor Michael Bozic</p> <p>Mailing Address of Donor 1 Trimont Ln 1000A</p> <p>City State Zip Pittsburgh PA 15211</p>	<p>Date of Receipt 0 2 / 0 2 / 2 0 0 4</p> <p>Amount 1,000.00</p>
<p>C. Full Name of Donor Glenda Bracken Williams</p> <p>Mailing Address of Donor 4212 San Carlos</p> <p>City State Zip Dallas TX 75205</p>	<p>Date of Receipt 0 9 / 0 2 / 2 0 0 4</p> <p>Amount 1,000.00</p>
<p>D. Full Name of Donor david Brackenridge</p> <p>Mailing Address of Donor 5232 halls ferry dr.</p> <p>City State Zip baton rouge LA 70817</p>	<p>Date of Receipt 0 8 / 1 0 / 2 0 0 4</p> <p>Amount 1,000.00</p>
<p>E. Full Name of Donor mark brenfleck</p> <p>Mailing Address of Donor 6 christopher drive</p> <p>City State Zip phila PA 19115</p>	<p>Date of Receipt 0 8 / 0 9 / 2 0 0 4</p> <p>Amount 1,000.00</p>
<p>SUBTOTAL of Donations This Page (optional)</p>	<p>5,000.00</p>
<p>TOTAL This Period (last page till this number only)</p> <p>(carry total from last page to Line 8)</p>	<p>6,520.00</p>

SCHEDULE 9-A**Donation(s) Received**

A. Full Name of Donor Gary R. Brennan Mailing Address of Donor 3495 Pueblo Way City State Zip Las Vegas NV 89109	Date of Receipt 0 9 / 0 7 / 2 0 0 4 Amount 1 0 0 0 . 0 0
B. Full Name of Donor James Brenzel Mailing Address of Donor 105 Garland Dr. City State Zip Menlo Park CA 94025	Date of Receipt 0 8 / 2 7 / 2 0 0 4 Amount 1 0 0 0 . 0 0
C. Full Name of Donor Gene Brett Mailing Address of Donor 24325 Perdido Beach Blvd City State Zip Orange Beach AL 36561	Date of Receipt 0 8 / 2 4 / 2 0 0 4 Amount 1 0 0 0 . 0 0
D. Full Name of Donor William Brinkerhoff Mailing Address of Donor P. O. Box 637 City State Zip Sedalia CO 80135	Date of Receipt 0 8 / 0 8 / 2 0 0 4 Amount 1 0 0 0 . 0 0
E. Full Name of Donor Andrew Brooks Mailing Address of Donor 14159 Beresford Rd City State Zip Beverly Hills CA 90210	Date of Receipt 0 8 / 2 9 / 2 0 0 4 Amount 2 5 0 0 . 0 0
SUBTOTAL of Donations This Page (optional)	6 5 0 0 . 0 0
TOTAL This Period (last page this line number only) (carry total from last page to Line 9)	7 1 7 0 0 . 0 0

SCHEDULE 9-A
Donation(s) Received

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A. Full Name of Donor Billy Brown			Date of Receipt 0 9 - 0 3 - 2 0 0 4	
Mailing Address of Donor 317 County Road. 61			Amount 1 0 0 0 0 0	
City Ozark	State AL	Zip 36360		
B. Full Name of Donor GEORGE BROWN			Date of Receipt 0 8 - 2 3 - 2 0 0 4	
Mailing Address of Donor 510 WHITHORN COURT			Amount 1 0 0 0 0 0	
City TIMONIUM	State MD	Zip 21093		
C. Full Name of Donor Greg Brown			Date of Receipt 0 8 - 0 5 - 2 0 0 4	
Mailing Address of Donor 11921 Grandview			Amount 1 0 0 0 0 0	
City Columbus	State IN	Zip 47201		
D. Full Name of Donor Greg Brown			Date of Receipt 0 9 - 0 4 - 2 0 0 4	
Mailing Address of Donor 11921 Grandview			Amount 5 0 0 0 0 0	
City Columbus	State IN	Zip 47201		
E. Full Name of Donor Greg Brown			Date of Receipt 0 9 - 0 8 - 2 0 0 4	
Mailing Address of Donor 11921 Grandview			Amount 5 0 0 0 0 0	
City Columbus	State IN	Zip 47201		
SUBTOTAL of Donations This Page (optional)			3 1 0 0 0 0	
TOTAL This Period (last page this line number only) (carry total from last page to Line 9)			7 4 8 0 0 0 0	

SCHEDULE 9-A

Donation(s) Received

<p>A. Full Name of Donor Richard Brown</p> <p>Mailing Address of Donor: 6054 E. Highway 27</p> <p>City State Zip Czark AL 36360</p>	<p>Date of Receipt 09 02 2004</p> <p>Amount 1,000.00</p>
<p>B. Full Name of Donor Richard D. Brown</p> <p>Mailing Address of Donor: 106 Wood Trail</p> <p>City State Zip Austin TX 78746</p>	<p>Date of Receipt 08 21 2004</p> <p>Amount 1,000.00</p>
<p>C. Full Name of Donor Carl Buck</p> <p>Mailing Address of Donor: 15260 Ventura Blvd #1120</p> <p>City State Zip Sherman Oaks CA 91403</p>	<p>Date of Receipt 08 01 2004</p> <p>Amount 2,500.00</p>
<p>D. Full Name of Donor Walter W. Buckley</p> <p>Mailing Address of Donor: 1635 Country Rd</p> <p>City State Zip Bethlehem PA 18015</p>	<p>Date of Receipt 09 03 2004</p> <p>Amount 1,000.00</p>
<p>E. Full Name of Donor Walter W. Buckley, Jr</p> <p>Mailing Address of Donor: 1635 Country Rd</p> <p>City State Zip Bethlehem Pa 18015</p>	<p>Date of Receipt 09 07 2004</p> <p>Amount 1,000.00</p>
<p>SUBTOTAL of Donations This Page (optional) ▶ 6,500.00</p>	
<p>TOTAL This Period (last page this line number only) ▶ 6,130.00 (carry total from last page to Line 9)</p>	

SCHEDULE 9-A
Donation(s) Received

<p>A. Full Name of Donor Bill Burchenal</p> <p>Mailing Address of Donor 10533 Big Canoe</p> <p>City State Zip Big Canoe GA 30143</p>	<p>Date of Receipt 08 20 2004</p> <p>Amount 1,000.00</p>
<p>B. Full Name of Donor DONALD BURNS</p> <p>Mailing Address of Donor 450 ROYAL PALM WAY</p> <p>City State Zip PALM BEACH FL 33480</p>	<p>Date of Receipt 08 31 2004</p> <p>Amount 1,000.00</p>
<p>C. Full Name of Donor Paul Butterfield</p> <p>Mailing Address of Donor 13798 Lakeside Dr.</p> <p>City State Zip Clarksville MD 21029</p>	<p>Date of Receipt 08 12 2004</p> <p>Amount 1,000.00</p>
<p>D. Full Name of Donor robert button</p> <p>Mailing Address of Donor 8034 schroeder rd</p> <p>City State Zip dixon CA 95620</p>	<p>Date of Receipt 08 24 2004</p> <p>Amount 1,000.00</p>
<p>E. Full Name of Donor Robert Byers</p> <p>Mailing Address of Donor 276 Bristol Rd.</p> <p>City State Zip Chalfont PA 18914</p>	<p>Date of Receipt 09 20 2004</p> <p>Amount 2,500.00</p>
<p>SUBTOTAL of Donations This Page (optional) ▶ 6,500.00</p>	
<p>TOTAL This Period (last page this line number only) ▶ 8,780.00 (carry total from last page to line 9)</p>	

SCHEDULE 8-A
Donation(s) Received

<p>A. Full Name of Donor Patrick Byrne</p> <hr/> <p>Mailing Address of Donor 700 Bitner Road</p> <hr/> <p>City State Zip Park City UT 84098</p>	<p>Date of Receipt M D Y Y 0 5 2 0 2 0 0 4</p> <p>Amount 2,500.00</p>
<p>B. Full Name of Donor bill campbell</p> <hr/> <p>Mailing Address of Donor 2443 fillmore st #368</p> <hr/> <p>City State Zip san francisco CA 94115</p>	<p>Date of Receipt M D Y Y 0 8 2 7 2 0 0 4</p> <p>Amount 2,500.00</p>
<p>C. Full Name of Donor Peggy Cannon</p> <hr/> <p>Mailing Address of Donor 151 Atlanta Country Club Dr.</p> <hr/> <p>City State Zip Marietta GA 30067</p>	<p>Date of Receipt M D Y Y 0 3 0 8 2 0 0 4</p> <p>Amount 1,000.00</p>
<p>D. Full Name of Donor David Canter</p> <hr/> <p>Mailing Address of Donor 4071 Alonzo Av</p> <hr/> <p>City State Zip Encino CA 91316</p>	<p>Date of Receipt M D Y Y 0 8 2 4 2 0 0 4</p> <p>Amount 500.00</p>
<p>E. Full Name of Donor david canter</p> <hr/> <p>Mailing Address of Donor 4071 Alonzo Av</p> <hr/> <p>City State Zip Encino CA 91316</p>	<p>Date of Receipt M D Y Y 0 8 0 2 2 0 0 4</p> <p>Amount 500.00</p>
<p>SUBTOTAL of Donations This Page (optional) ▶</p>	
<p style="text-align: right;">7,000.00</p>	
<p>TOTAL This Period (last page this line number only) ▶</p>	
<p style="text-align: right;">9,480.00 (carry total from last page to line 8)</p>	

SCHEDULE 9-A
Donation(s) Received

<p>A. Full Name of Donor Larry Capista</p> <p>Mailing Address of Donor 24655 Manor Dr.</p> <p>City State Zip Shorewood IL 60431</p>	<p>Date of Receipt 08 31 2004</p> <p>Amount 1 0 0 0 0 0</p>
<p>B. Full Name of Donor Donald Carlson</p> <p>Mailing Address of Donor 3071 Pennant Way</p> <p>City State Zip San Diego CA 92122</p>	<p>Date of Receipt 08 31 2004</p> <p>Amount 1 0 0 0 0 0</p>
<p>C. Full Name of Donor Donald Carlson</p> <p>Mailing Address of Donor 3071 Pennant Way</p> <p>City State Zip San Diego CA 92122</p>	<p>Date of Receipt 08 31 2004</p> <p>Amount 1 0 0 0 0 0</p>
<p>D. Full Name of Donor Donald Carlson</p> <p>Mailing Address of Donor 3071 Pennant Way</p> <p>City State Zip San Diego ab 92122</p>	<p>Date of Receipt 08 31 2004</p> <p>Amount 1 0 0 0 0 0</p>
<p>E. Full Name of Donor terry carlson</p> <p>Mailing Address of Donor 9116 E. Sprague Ave #302</p> <p>City State Zip spokane WA 99206</p>	<p>Date of Receipt 08 01 2004</p> <p>Amount 1 0 0 0 0 0</p>
<p>SUBTOTAL of Donations This Page (optional) ▶ 4 1 0 0 0 0</p>	
<p>TOTAL This Period (last page this line number only) ▶ 9 8 9 0 0 0 0 (carry total from last page to Line 9)</p>	

SCHEDULE 9-A
Donation(s) Received

<p>A. Full Name of Donor Richard carter</p> <p>Mailing Address of Donor 512 Mt Vernon Dr</p> <p>City State Zip Fostoria OH 44830</p>	<p>Date of Receipt 09 04 2004</p> <p>Amount 500.00</p>
<p>B. Full Name of Donor Richard Carter</p> <p>Mailing Address of Donor 512 Mt Vernon Dr</p> <p>City State Zip Fostoria OH 44830</p>	<p>Date of Receipt 09 09 2004</p> <p>Amount 500.00</p>
<p>C. Full Name of Donor Jim Cattnach</p> <p>Mailing Address of Donor 711 N. Northlake Drive</p> <p>City State Zip Hollywood FL 33019</p>	<p>Date of Receipt 08 26 2004</p> <p>Amount 1000.00</p>
<p>D. Full Name of Donor Craig chang</p> <p>Mailing Address of Donor 2700 Citizens Plaza, ste 401</p> <p>City State Zip Victoria TX 77901</p>	<p>Date of Receipt 09 06 2004</p> <p>Amount 1000.00</p>
<p>E. Full Name of Donor Brian Chapman</p> <p>Mailing Address of Donor 8786 Malone Road</p> <p>City State Zip Olive Branch MS 38654</p>	<p>Date of Receipt 09 02 2004</p> <p>Amount 1000.00</p>
<p>SUBTOTAL of Donations This Page (optional) 4,000.00</p>	
<p>TOTAL This Period (last page this line number only) 10,290.00 (copy total from last page to Line 9)</p>	

SCHEDULE 9-A
Donation(s) Received

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A. Full Name of Donor Paul Charnetzki Mailing Address of Donor 327 Oak Circle City State Zip Wilmette IL 60091	Date of Receipt 0 8 - 2 0 - 2 0 0 4 Amount 1 0 0 0 0 0
B. Full Name of Donor R Christensen Mailing Address of Donor 1339 Summit Lake Shore Road City State Zip Olympia WA 98502	Date of Receipt 0 8 - 2 2 - 2 0 0 4 Amount 1 0 0 0 0 0
C. Full Name of Donor Ashley Classen Mailing Address of Donor PO Box 9290 City State Zip Fort Worth TX 76147	Date of Receipt 0 8 - 2 7 - 2 0 0 4 Amount 5 0 0 0 0 0
D. Full Name of Donor Ashley Classen Mailing Address of Donor PO Box 9290 City State Zip Fort Worth TX 76147	Date of Receipt 0 9 - 0 8 - 2 0 0 4 Amount 5 0 0 0 0 0
E. Full Name of Donor Bruce Cleveland Mailing Address of Donor P.O. Box 61 City State Zip Waterford VA 20197	Date of Receipt 0 8 - 2 4 - 2 0 0 4 Amount 2 5 0 0 0 0

SUBTOTAL of Donations This Page (optional)	5 5 0 0 0 0
TOTAL This Period (last page this line number only) (carry total from last page to Line 9)	1 0 8 4 0 0 0 0

SCHEDULE 9-A
Donation(s) Received

<p>A. Full Name of Donor Eric Clow</p> <hr/> <p>Mailing Address of Donor 27660 Central Drive</p> <hr/> <p>City State Zip Los Altos Hills CA 94022</p>	<p>Date of Receipt 08 05 2004</p> <p>Amount 5,000.00</p>
<p>B. Full Name of Donor Eric Clow</p> <hr/> <p>Mailing Address of Donor 27660 Central Drive</p> <hr/> <p>City State Zip Los Altos Hills CA 94022</p>	<p>Date of Receipt 08 29 2004</p> <p>Amount 5,000.00</p>
<p>C. Full Name of Donor Kirby Cochran</p> <hr/> <p>Mailing Address of Donor 692 East 1780 North</p> <hr/> <p>City State Zip Orem UT 84097</p>	<p>Date of Receipt 03 08 2004</p> <p>Amount 1,000.00</p>
<p>D. Full Name of Donor Kirby Cochran</p> <hr/> <p>Mailing Address of Donor 692 East 1780 North</p> <hr/> <p>City State Zip Orem UT 84097</p>	<p>Date of Receipt 08 08 2004</p> <p>Amount 1,000.00</p>
<p>E. Full Name of Donor Harvey Cody</p> <hr/> <p>Mailing Address of Donor 207 Paul Revere Drive</p> <hr/> <p>City State Zip Houston TX 77024</p>	<p>Date of Receipt 09 09 2004</p> <p>Amount 5,000.00</p>
<p>SUBTOTAL of Donations This Page (optional) ▶</p>	<p>2,600.00</p>
<p>TOTAL This Period (last page this line number only) ▶ (carry total from last page to Line 9)</p>	<p>11,100.00</p>

SCHEDULE 9-A

Donation(s) Received

<p>A. Full Name of Donor Harvey Cody</p> <p>Mailing Address of Donor 207 Paul Revere Drive</p> <p>City State Zip Houston TX 77024</p>	<p>Date of Receipt 08 20 2004</p> <p>Amount 1,000.00</p>
<p>B. Full Name of Donor Howard Cohen</p> <p>Mailing Address of Donor 10405 Sandringham Court</p> <p>City State Zip Potomac MD 20854</p>	<p>Date of Receipt 09 04 2004</p> <p>Amount 1,000.00</p>
<p>C. Full Name of Donor A. Atwell Coleman</p> <p>Mailing Address of Donor 4314 Chicora St</p> <p>City State Zip Columbia SC 29206</p>	<p>Date of Receipt 08 26 2004</p> <p>Amount 1,000.00</p>
<p>D. Full Name of Donor John Connolly</p> <p>Mailing Address of Donor 700 Front St.</p> <p>City State Zip San Diego CA 92101</p>	<p>Date of Receipt 08 12 2004</p> <p>Amount 1,000.00</p>
<p>E. Full Name of Donor william cooley</p> <p>Mailing Address of Donor 8 windsor court</p> <p>City State Zip palm beach FL 33480</p>	<p>Date of Receipt 08 27 2004</p> <p>Amount 500.00</p>
<p>SUBTOTAL of Donations This Page (optional) ▶</p>	<p>4,500.00</p>
<p>TOTAL This Period (last page this line number only) ▶ (carry total from last page to Line 9)</p>	<p>11,550.00</p>

SCHEDULE 9-A
Donation(s) Received

<p>A. Full Name of Donor william cooley</p> <p>Mailing Address of Donor 8 windsor court</p> <p>City State Zip paim beach FL 33480</p>	<p>Date of Receipt 09 23 2004</p> <p>Amount 2,500.00</p>
<p>B. Full Name of Donor William Cooley</p> <p>Mailing Address of Donor 8 Windsor Ct.</p> <p>City State Zip Palm Beach FL 33480</p>	<p>Date of Receipt 08 31 2004</p> <p>Amount 2,000.00</p>
<p>C. Full Name of Donor Tim Cooney</p> <p>Mailing Address of Donor 434 main street</p> <p>City State Zip wareham MA 02571</p>	<p>Date of Receipt 08 25 2004</p> <p>Amount 500.00</p>
<p>D. Full Name of Donor Tim Cooney</p> <p>Mailing Address of Donor 434 main street</p> <p>City State Zip wareham MA 02571</p>	<p>Date of Receipt 09 08 2004</p> <p>Amount 500.00</p>
<p>E. Full Name of Donor Lammot Copeland</p> <p>Mailing Address of Donor 100 Rogers Rd</p> <p>City State Zip Wilmington DE 19801</p>	<p>Date of Receipt 09 02 2004</p> <p>Amount 1,000.00</p>
<p>SUBTOTAL of Donations This Page (optional)</p>	<p>6,500.00</p>
<p>TOTAL This Period (add page this line number only)</p> <p>(carry total from last page to Line 9)</p>	<p>12,200.00</p>

SCHEDULE 9-A
Donation(s) Received

<p>A. Full Name of Donor Don Cose</p> <p>Mailing Address of Donor 17 E. Sixth St.</p> <p>City State Zip Tracy CA 95378</p>	<p>Date of Receipt 08 02 2004</p> <p>Amount 2,500.00</p>
<p>B. Full Name of Donor James Cowden</p> <p>Mailing Address of Donor 200 Patterson Avenue, Number 410</p> <p>City State Zip San Antonio TX 78209</p>	<p>Date of Receipt 08 19 2004</p> <p>Amount 5,000.00</p>
<p>C. Full Name of Donor James Cowden</p> <p>Mailing Address of Donor 200 Patterson Avenue, #410</p> <p>City State Zip San Antonio TX 78209</p>	<p>Date of Receipt 08 09 2004</p> <p>Amount 5,000.00</p>
<p>D. Full Name of Donor Thomas Cox</p> <p>Mailing Address of Donor 183 Stanmore Road</p> <p>City State Zip Baltimore MD 21212</p>	<p>Date of Receipt 08 10 2004</p> <p>Amount 5,000.00</p>
<p>E. Full Name of Donor Thomas Cox</p> <p>Mailing Address of Donor 183 Stanmore Road</p> <p>City State Zip Baltimore MD 21212</p>	<p>Date of Receipt 08 09 2004</p> <p>Amount 5,000.00</p>
<p>SUBTOTAL of Donations This Page (optional) ▶</p>	<p>4,500.00</p>
<p>TOTAL Tax Exempt (last page this line number only) ▶ (carry total from last page to Line B)</p>	<p>4,265.00</p>

SCHEDULE 9-A

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Donation(s) Received

A. Full Name of Donor Alex Cranberg			Date of Receipt 09 25 2004	
Mailing Address of Donor 511 16th St. #400			Amount 2,500.00	
City Denver	State CO	Zip 80202		
B. Full Name of Donor Doctor Crants			Date of Receipt 08 24 2004	
Mailing Address of Donor 102 Woodmont Blvd., Suite 800			Amount 5,000.00	
City Nashville	State TN	Zip 37205		
C. Full Name of Donor Doctor Crants			Date of Receipt 09 09 2004	
Mailing Address of Donor 102 Woodmont Blvd., Suite 800			Amount 5,000.00	
City Nashville	State TN	Zip 37205		
D. Full Name of Donor L. Gordan Croft			Date of Receipt 08 25 2004	
Mailing Address of Donor 7503 Club Rd			Amount 2,000.00	
City Towson	State MD	Zip 21204		
E. Full Name of Donor James Crooks			Date of Receipt 08 07 2004	
Mailing Address of Donor 4181 Riverview Run Ct.			Amount 500.00	
City Suwanee	State GA	Zip 30024		
SUBTOTAL of Donations This Page (optional)			5,550.00	
TOTAL This Page (last page has line number only)			13,205.00	
(carry total from last page to Line 9)				

SCHEDULE 9-A
Donation(s) Received

<p>A. Full Name of Donor James Crooks</p> <p>Mailing Address of Donor 4181 Riverview Run Ct.</p> <p>City State Zip Suwanee GA 30024</p>	<p>Date of Receipt 08 14 2004</p> <p>Amount 5 000 00</p>
<p>B. Full Name of Donor James Crooks</p> <p>Mailing Address of Donor 4181 Riverview Run Ct.</p> <p>City State Zip Suwanee GA 30024</p>	<p>Date of Receipt 08 20 2004</p> <p>Amount 5 000 00</p>
<p>C. Full Name of Donor Nancy Cross</p> <p>Mailing Address of Donor 2 Laurel Pkace</p> <p>City State Zip San Antonio TX 78209</p>	<p>Date of Receipt 08 27 2004</p> <p>Amount 1 000 00</p>
<p>D. Full Name of Donor Paul Crow</p> <p>Mailing Address of Donor 2731 Timberleaf Drive</p> <p>City State Zip Carrollton TX 75006</p>	<p>Date of Receipt 08 27 2004</p> <p>Amount 1 000 00</p>
<p>E. Full Name of Donor Bob Cummins</p> <p>Mailing Address of Donor 18850 Northome Blvd.</p> <p>City State Zip Deephaven MN 55391</p>	<p>Date of Receipt 08 04 2004</p> <p>Amount 1 000 00</p>
<p>SUBTOTAL of Donations This Page (optional) ▶ 4 000 00</p>	
<p>TOTAL This Period (last page this line number only) ▶ 13 605 00 (carry total from last page to Line 5)</p>	

SCHEDULE 9-A

Donation(s) Received

A. Full Name of Donor Edward V. K. Cunningham			Date of Receipt 09 02 2004		
Mailing Address of Donor 40 Garden St			Amount 1,000.00		
City	State	Zip			
Poughkeepsie	NY	12601			
B. Full Name of Donor Jerome Czenwinski			Date of Receipt 08 24 2004		
Mailing Address of Donor 1000 N. Station Street, #614			Amount 1,000.00		
City	State	Zip			
Port Aransas	TX	78373			
C. Full Name of Donor gregory czura			Date of Receipt 08 21 2004		
Mailing Address of Donor 559 cafferty road			Amount 1,000.00		
City	State	Zip			
upper black eddy	PA	18972			
D. Full Name of Donor Ronald Dahlberg			Date of Receipt 08 20 2004		
Mailing Address of Donor 3121 72nd Avenue			Amount 1,000.00		
City	State	Zip			
Kenosha	WI	53144			
E. Full Name of Donor Harry Dahlstrom			Date of Receipt 08 31 2004		
Mailing Address of Donor 155 Willson Street			Amount 1,000.00		
City	State	Zip			
Holliston	MA	01746			
SUBTOTAL of Donations This Page (optional)			5,000.00		
TOTAL This Period (see page five line number only) (carry total from last page to line 9)			14,105.00		

SCHEDULE 9-A
Donation(s) Received

PAGE 29 OF 145

A. Full Name of Donor Bob Davidson			Date of Receipt 0 8 1 9 2 0 0 4	
Mailing Address of Donor P.O. Box 6761			Amount 2 5 0 0 0 0	
City Incline Village	State NV	Zip 89450		
B. Full Name of Donor James B. Davis			Date of Receipt 0 8 0 8 2 0 0 4	
Mailing Address of Donor 4727 Wilshire Boulevard #300			Amount 1 0 0 0 0 0	
City Los Angeles	State CA	Zip 90010		
C. Full Name of Donor James B. Davis			Date of Receipt 0 8 1 2 2 0 0 4	
Mailing Address of Donor 710 North Sierra Drive			Amount 1 0 0 0 0 0	
City Beverly Hills	State CA	Zip 90010		
D. Full Name of Donor Leon Davis			Date of Receipt 0 8 0 3 2 0 0 4	
Mailing Address of Donor 502 Thamer Lane			Amount 1 0 0 0 0 0	
City Houston	State TX	Zip 77024		
E. Full Name of Donor Ross Davis			Date of Receipt 0 8 0 3 2 0 0 4	
Mailing Address of Donor 3771 Elmora			Amount 1 0 0 0 0 0	
City Houston	State TX	Zip 77005		
SUBTOTAL of Donations This Page (optional)			6 5 0 0 0 0	
TOTAL This Period (last page this line number only) (carry total from last page to Line 8)			1 5 6 5 5 0 0 0	

SCHEDULE 9-A
Donation(s) Received

A. Full Name of Donor Sam Davis			Date of Receipt 08 07 2004	
Mailing Address of Donor 531 Boca Ciega Pt. So.			Amount 1,000.00	
City	State	Zip		
St. Petersburg	FL	33708		
B. Full Name of Donor David Defnet			Date of Receipt 08 05 2004	
Mailing Address of Donor 199 Lakeside Dr			Amount 1,000.00	
City	State	Zip		
Montgomery	TX	77356		
C. Full Name of Donor David deForrest			Date of Receipt 08 05 2004	
Mailing Address of Donor 1870 Cleveland Road			Amount 1,000.00	
City	State	Zip		
Miami Beach	FL	33141		
D. Full Name of Donor David deForrest			Date of Receipt 08 05 2004	
Mailing Address of Donor 1870 Cleveland Road			Amount 2,500.00	
City	State	Zip		
Miami Beach	FL	33141		
E. Full Name of Donor David deForrest			Date of Receipt 08 20 2004	
Mailing Address of Donor 1870 Cleveland Road			Amount 2,500.00	
City	State	Zip		
Miami Beach	FL	33141		

SUBTOTAL of Donations This Page (column 1)	2,600.00
TOTAL This Period (exit page this line NUMBER only)	15,915.00
(carry total from real page to Line 9)	

SCHEDULE 9-A
Donation(s) Received

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A. Full Name of Donor David deForrest			Date of Receipt 08 27 2004	
Mailing Address of Donor 1870 Cleveland Road			Amount 50000	
City Miami Beach	State FL	Zip 33141		
B. Full Name of Donor Stephen Dent			Date of Receipt 09 04 2004	
Mailing Address of Donor 32 Twin Lakes Lane			Amount 100000	
City Riverside	State CT	Zip 06878		
C. Full Name of Donor Anthony Di Lapi			Date of Receipt 08 07 2004	
Mailing Address of Donor 82 Stanwick Ct			Amount 100000	
City Somerset	State NJ	Zip 08873		
D. Full Name of Donor Anthony Di Lapi			Date of Receipt 08 25 2004	
Mailing Address of Donor 82 Stanwick Ct			Amount 100000	
City Somerset	State NJ	Zip 08873		
E. Full Name of Donor Edward L. Diefenthal			Date of Receipt 08 31 2004	
Mailing Address of Donor 4801 Florida Ave.			Amount 200000	
City New Orleans	State LA	Zip 70117		
SUBTOTAL of Donations This Page (optional)			550000	
TOTAL This Period (last page this line number only) (carry total from last page to line 9)			18465000	

SCHEDULE 9-A

Donation(s) Received

<p>A. Full Name of Donor Steven Diehl</p> <p>Mailing Address of Donor 20311 Parkwood Court</p> <p>City State Zip Hagerstown MD 21742</p>	<p>Date of Receipt 08 04 2004</p> <p>Amount 500.00</p>
<p>B. Full Name of Donor Steven Diehl</p> <p>Mailing Address of Donor 20311 Parkwood Court</p> <p>City State Zip Hagerstown MD 21742</p>	<p>Date of Receipt 08 20 2004</p> <p>Amount 500.00</p>
<p>C. Full Name of Donor Steven Diehl</p> <p>Mailing Address of Donor 20311 Parkwood Court</p> <p>City State Zip Hagerstown MD 21742</p>	<p>Date of Receipt 08 22 2004</p> <p>Amount 500.00</p>
<p>D. Full Name of Donor Steven Diehl</p> <p>Mailing Address of Donor 20311 Parkwood Court</p> <p>City State Zip Hagerstown MD 21742</p>	<p>Date of Receipt 08 26 2004</p> <p>Amount 500.00</p>
<p>E. Full Name of Donor michael dillon</p> <p>Mailing Address of Donor 10019 E Foothill Drive</p> <p>City State Zip Scottsdale AZ 85255</p>	<p>Date of Receipt 08 25 2004</p> <p>Amount 1000.00</p>
<p>SUBTOTAL of Donations This Page (optional)</p>	<p>3000.00</p>
<p>TOTAL This Period (last page this line number only)</p> <p>(carry total from last page to Line 9)</p>	<p>167650.00</p>

SCHEDULE 9-A
Donation(s) Received

<p>A. Full Name of Donor Cliff DiLorenzo</p> <p>Mailing Address of Donor 540 Woodview Road</p> <p>City State Zip Lake Barrington IL 60010</p>	<p>Date of Receipt 08 09 2004</p> <p>Amount 25000</p>
<p>B. Full Name of Donor CLIFF DILORENZO</p> <p>Mailing Address of Donor 540 Woodview Road</p> <p>City State Zip Lake Barrington IL 60010</p>	<p>Date of Receipt 08 24 2004</p> <p>Amount 10000</p>
<p>C. Full Name of Donor robert d dingeman</p> <p>Mailing Address of Donor 664 aspen hts drive</p> <p>City State Zip fairbanks AK 99712</p>	<p>Date of Receipt 08 28 2004</p> <p>Amount 10000</p>
<p>D. Full Name of Donor robert d dingeman</p> <p>Mailing Address of Donor 664 aspen hts drive</p> <p>City State Zip fairbanks AK 99712</p>	<p>Date of Receipt 08 05 2004</p> <p>Amount 25000</p>
<p>E. Full Name of Donor robert d dingeman</p> <p>Mailing Address of Donor 664 aspen hts dr</p> <p>City State Zip fairbanks AK 99712</p>	<p>Date of Receipt 08 20 2004</p> <p>Amount 25000</p>
<p>SUBTOTAL of Donations This Page (optional) ▶ 185000</p>	
<p>TOTAL This Period (last page this line number only) ▶ 16950000 (carry total from last page to Line 5)</p>	

SCHEDULE 9-A

Donation(s) Received

A. Full Name of Donor robert d dingeman			Date of Receipt 0 8 / 0 1 / 2 0 0 4	
Mailing Address of Donor 664 aspen hts drive			Amount 1 0 0 . 0 0	
City fairbanks	State AK	Zip 99712		
B. Full Name of Donor robert d dingeman			Date of Receipt 0 8 / 0 1 / 2 0 0 4	
Mailing Address of Donor 664 aspen hts drive			Amount 2 5 0 . 0 0	
City fairbanks	State AK	Zip 99712		
C. Full Name of Donor robert d dingeman			Date of Receipt 0 8 / 0 3 / 2 0 0 4	
Mailing Address of Donor 664 aspen hts drive			Amount 5 0 . 0 0	
City aspen hts dr	State AK	Zip 99712		
D. Full Name of Donor William Dobbins			Date of Receipt 0 8 / 0 9 / 2 0 0 4	
Mailing Address of Donor 10630 Queen Avenue			Amount 1 0 0 0 . 0 0	
City La Mesa	State CA	Zip 91941		
E. Full Name of Donor William Dobbins			Date of Receipt 0 8 / 2 0 / 2 0 0 4	
Mailing Address of Donor 10630 Queen Avenue			Amount 5 0 0 . 0 0	
City La Mesa	State CA	Zip 91941		
SUBTOTAL of Donations This Page (optional)			1 9 0 0 . 0 0	
TOTAL This Period (last page this line number only) (carry total from last page to Line 9)			1 7 1 4 0 0 . 0 0	

SCHEDULE 9-A

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Donation(s) Received

A. Full Name of Donor Harry L. Dolan			Date of Receipt 0 9 / 0 3 / 2 0 0 4	
Mailing Address of Donor 36 Cumberland Dr			Amount 1 0 0 0 . 0 0	
City Lincolnshire	State IL	Zip 60069		
B. Full Name of Donor John Donovan			Date of Receipt 0 8 / 2 5 / 2 0 0 4	
Mailing Address of Donor 5135 Trumbull Court			Amount 1 0 0 0 . 0 0	
City Dunwoody	State GA	Zip 30338		
C. Full Name of Donor James Dorrian			Date of Receipt 0 8 / 2 3 / 2 0 0 4	
Mailing Address of Donor 101 1st St PMB 748			Amount 1 0 0 0 . 0 0	
City Los Altos	State CA	Zip 94022		
D. Full Name of Donor James Douglass			Date of Receipt 0 8 / 2 5 / 2 0 0 4	
Mailing Address of Donor 315 Old Mill Road			Amount 5 0 0 0 . 0 0	
City Pittsburgh	State PA	Zip 15238		
E. Full Name of Donor James R. Douglass			Date of Receipt 0 9 / 0 2 / 2 0 0 4	
Mailing Address of Donor 315 Old Mill Rd			Amount 5 0 0 0 . 0 0	
City Pittsburgh	State PA	Zip 15238		
SUBTOTAL of Donations This Page (optional)			4 0 0 0 . 0 0	
TOTAL This Period (last page this line number only)			1 7 5 4 0 0 . 0 0	
(carry total from last page to Line 9)				

SCHEDULE 9-A

Donation(s) Received

<p>A. Full Name of Donor John Dowd</p> <p>Mailing Address of Donor 1529 Crowell Road</p> <p>City State Zip Vienna VA 22182</p>	<p>Date of Receipt 08 22 2004</p> <p>Amount 1,000.00</p>
<p>B. Full Name of Donor David Drinan</p> <p>Mailing Address of Donor 38 Frew Terrace</p> <p>City State Zip Enfield CT 06082</p>	<p>Date of Receipt 08 13 2004</p> <p>Amount 2,500.00</p>
<p>C. Full Name of Donor David Drinan</p> <p>Mailing Address of Donor 38 Frew Terrace</p> <p>City State Zip Enfield CT 06082</p>	<p>Date of Receipt 08 06 2004</p> <p>Amount 2,500.00</p>
<p>D. Full Name of Donor David Drinan</p> <p>Mailing Address of Donor 38 Frew Terrace</p> <p>City State Zip Enfield CT 06082</p>	<p>Date of Receipt 08 24 2004</p> <p>Amount 5,000.00</p>
<p>E. Full Name of Donor Caroline O. Dullmeyer</p> <p>Mailing Address of Donor 396 E Woodlander Ct</p> <p>City State Zip Eagle ID 83616</p>	<p>Date of Receipt 09 02 2004</p> <p>Amount 1,000.00</p>
<p>SUBTOTAL of Donations This Page (optional) ▶</p>	<p>3,000.00</p>
<p>TOTAL This Period (last page this line number only) ▶ (carry total from last page to Line 9)</p>	<p>17,840.00</p>

SCHEDULE 9-A

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Donation(s) Received

A. Full Name of Donor Michael Dunmire <hr/> Mailing Address of Donor 15610 NE 173RD STREET <hr/> City State Zip Woodinville WA 98072	Date of Receipt 0 8 / 2 4 / 2 0 0 4 <hr/> Amount 1 0 0 0 0 0
B. Full Name of Donor Michael Dunmire <hr/> Mailing Address of Donor 15610 NE 173rd Street <hr/> City State Zip Woodinville ab 96072	Date of Receipt 0 8 / 0 9 / 2 0 0 4 <hr/> Amount 1 0 0 0 0 0
C. Full Name of Donor Tom Dwell <hr/> Mailing Address of Donor 1420 Shadow Mountain Ct. <hr/> City State Zip Auburn CA 95602	Date of Receipt 0 8 / 2 4 / 2 0 0 4 <hr/> Amount 1 0 0 0 0 0
D. Full Name of Donor Dave Eaton <hr/> Mailing Address of Donor 20699 Linwood Road <hr/> City State Zip Deephaven MN 55331	Date of Receipt 0 8 / 2 6 / 2 0 0 4 <hr/> Amount 1 0 0 0 0 0
E. Full Name of Donor Charles N. Eckert <hr/> Mailing Address of Donor 1248 Continental Ave.- IRCC <hr/> City State Zip Melbourne FL 32940	Date of Receipt 0 8 / 0 7 / 2 0 0 4 <hr/> Amount 1 0 0 0 0 0
SUBTOTAL of Donations This Page (optional) ▶	5 0 0 0 0 0
TOTAL This Period (last page use line number only) ▶ <small>(carry total from last page to Line 9)</small>	1 8 3 4 0 0 0 0

SCHEDULE 9-A
Donation(s) Received

<p>A. Full Name of Donor Willard Edison</p> <p>Mailing Address of Donor 6043 Hatton Place</p> <p>City State Zip Ferndale WA 98248</p>	<p>Date of Receipt 08 08 2004</p> <p>Amount 250.00</p>
<p>B. Full Name of Donor Willard Edison</p> <p>Mailing Address of Donor 6043 Hatton Place</p> <p>City State Zip Ferndale WA 98248</p>	<p>Date of Receipt 08 20 2004</p> <p>Amount 500.00</p>
<p>C. Full Name of Donor Willard Edison</p> <p>Mailing Address of Donor 6043 Hatton Place</p> <p>City State Zip Ferndale WA 98248</p>	<p>Date of Receipt 08 08 2004</p> <p>Amount 250.00</p>
<p>D. Full Name of Donor William L Edwards</p> <p>Mailing Address of Donor 903 West 4th Street</p> <p>City State Zip Roswell NM 88201</p>	<p>Date of Receipt 08 08 2004</p> <p>Amount 250.00</p>
<p>E. Full Name of Donor William L. Edwards</p> <p>Mailing Address of Donor 903 West 4th Street</p> <p>City State Zip Roswell NM 88201</p>	<p>Date of Receipt 08 08 2004</p> <p>Amount 500.00</p>
<p>SUBTOTAL of Donations This Page (optional) ▶</p>	<p>1,750.00</p>
<p>TOTAL This Period (last page this line number only) ▶ (carry total from last page to L716 9)</p>	<p>18,515.00</p>

SCHEDULE 9-A
Donation(s) Received

<p>A. Full Name of Donor William L. Edwards</p> <p>Mailing Address of Donor 903 West 4th Street</p> <p>City State Zip Roswell NM 88201</p>	<p>Date of Receipt 08 03 2004</p> <p>Amount 250.00</p>
<p>B. Full Name of Donor James W. Eggers</p> <p>Mailing Address of Donor Rt. 4, Box 258E</p> <p>City State Zip Kilgore TX 75662</p>	<p>Date of Receipt 08 30 2004</p> <p>Amount 1000.00</p>
<p>C. Full Name of Donor James Elam</p> <p>Mailing Address of Donor 200 P Street Apt. A22</p> <p>City State Zip Sacramento CA 95814</p>	<p>Date of Receipt 08 03 2004</p> <p>Amount 3000.00</p>
<p>D. Full Name of Donor Donald Eller</p> <p>Mailing Address of Donor 3111 Bel Air Drive #18G</p> <p>City State Zip Las Vegas NV 89109</p>	<p>Date of Receipt 08 08 2004</p> <p>Amount 500.00</p>
<p>E. Full Name of Donor Donald Eller</p> <p>Mailing Address of Donor 3111 Bel Air Drive #18G</p> <p>City State Zip Las Vegas NV 89109</p>	<p>Date of Receipt 08 24 2004</p> <p>Amount 500.00</p>
<p>SUBTOTAL of Donations This Page (optional)</p>	<p>1425.00</p>
<p>TOTAL This Period (last page this line number only)</p> <p>(carry total from last page to Line 9)</p>	<p>1994.00</p>

SCHEDULE 9-A
Donation(s) Received

<p>A. Full Name of Donor Steven Ellis</p> <p>Mailing Address of Donor 544 North Church Street</p> <p>City State Zip Charlotte NC 28202</p>	<p>Date of Receipt 09 02 2004</p> <p>Amount 1,000.00</p>
<p>B. Full Name of Donor fred ender</p> <p>Mailing Address of Donor 12919 Bloomfield St, # 5</p> <p>City State Zip Studio City CA 91604</p>	<p>Date of Receipt 05 06 2004</p> <p>Amount 1,000.00</p>
<p>C. Full Name of Donor Denis Engel</p> <p>Mailing Address of Donor 6321 E Calle Bruvira</p> <p>City State Zip Paradise Valley AZ 85253</p>	<p>Date of Receipt 08 20 2004</p> <p>Amount 1,000.00</p>
<p>D. Full Name of Donor Terrence English</p> <p>Mailing Address of Donor 9 Runyon Mill Rd</p> <p>City State Zip Ringoes NJ 08551</p>	<p>Date of Receipt 08 20 2004</p> <p>Amount 1,000.00</p>
<p>E. Full Name of Donor Dave Erickson</p> <p>Mailing Address of Donor 2027 Narrows View Cr NW, E-141</p> <p>City State Zip Gig Harbor WA 98335</p>	<p>Date of Receipt 09 01 2004</p> <p>Amount 1,000.00</p>
<p>SUBTOTAL of Donations This Page (optional) ▶</p>	<p>5,000.00</p>
<p>TOTAL This Period (last page this line number only) ▶ (carry total from last page to Line 9)</p>	<p>20,440.00</p>

SCHEDULE 9-A
Donation(s) Received

<p>A. Full Name of Donor Ross Estep Sr</p> <p>Mailing Address of Donor 121 Interprk Blvd</p> <p>City State Zip San Antonio TX 78216</p>	<p>Date of Receipt 08 09 2004</p> <p>Amount 500.00</p>
<p>B. Full Name of Donor Ross Estep Sr</p> <p>Mailing Address of Donor 121 Interpark Blvd, Suite 208</p> <p>City State Zip San Antonio TX 78216</p>	<p>Date of Receipt 08 27 2004</p> <p>Amount 1000.00</p>
<p>C. Full Name of Donor Richard Evanson</p> <p>Mailing Address of Donor 10906 NE 39th St</p> <p>City State Zip Vancouver WA 98682</p>	<p>Date of Receipt 08 05 2004</p> <p>Amount 1000.00</p>
<p>D. Full Name of Donor marjorie exon</p> <p>Mailing Address of Donor 22 pintail</p> <p>City State Zip irvine CA 92604</p>	<p>Date of Receipt 08 05 2004</p> <p>Amount 1000.00</p>
<p>E. Full Name of Donor Theodore Fanelli</p> <p>Mailing Address of Donor 3092 Jodeco Dr.</p> <p>City State Zip Jonesboro GA 30236</p>	<p>Date of Receipt 08 15 2004</p> <p>Amount 1000.00</p>
<p>SUBTOTAL of Donations This Page (optional)</p>	<p>3,600.00</p>
<p>TOTAL This Period (last page lists line number only) (carry total from last page to line 9)</p>	<p>20,800.00</p>

SCHEDULE 9-A
Donation(s) Received

<p>A. Full Name of Donor Theodore Fanelli</p> <hr/> <p>Mailing Address of Donor 3092 Jodeco Dr.</p> <hr/> <p>City State Zip Jonesboro GA 30236</p>	<p>Date of Receipt 08 19 2004</p> <p>Amount 2,500.00</p>
<p>B. Full Name of Donor peter fasssas</p> <hr/> <p>Mailing Address of Donor 1555 n astor st</p> <hr/> <p>City State Zip chicago IL 60610</p>	<p>Date of Receipt 08 24 2004</p> <p>Amount 1,000.00</p>
<p>C. Full Name of Donor David Fawcett</p> <hr/> <p>Mailing Address of Donor 1175 W Baseline Rd</p> <hr/> <p>City State Zip Claremont CA 91711</p>	<p>Date of Receipt 08 17 2004</p> <p>Amount 1,000.00</p>
<p>D. Full Name of Donor John Scott Fechnay</p> <hr/> <p>Mailing Address of Donor 8841 Belmart Road</p> <hr/> <p>City State Zip Potomac MD 20854</p>	<p>Date of Receipt 09 07 2004</p> <p>Amount 1,000.00</p>
<p>E. Full Name of Donor Michael Fedak</p> <hr/> <p>Mailing Address of Donor 655 Park Avenue</p> <hr/> <p>City State Zip New York NY 10021</p>	<p>Date of Receipt 08 13 2004</p> <p>Amount 2,500.00</p>
<p>SUBTOTAL of Donations This Page (optional) ▶ 8,000.00</p>	
<p>TOTAL This Period (last page this line number only) ▶ 218,000.00 (carry info from last page to Line 9)</p>	

SCHEDULE 9-A

Donation(s) Received

A. Full Name of Donor Michael Fedak			Date of Receipt 08 27 2004	
Mailing Address of Donor 655 Park Avenue			Amount 2,500.00	
City New York	State NY	Zip 10021		
B. Full Name of Donor Pamala Ferron			Date of Receipt 08 22 2004	
Mailing Address of Donor 4725 Marlborough Way			Amount 500.00	
City Carmichael	State CA	Zip 95608		
C. Full Name of Donor Pamala Ferron			Date of Receipt 08 08 2004	
Mailing Address of Donor 4725 Marlborough Way			Amount 500.00	
City Carmichael	State CA	Zip 95608		
D. Full Name of Donor william fickling jr			Date of Receipt 08 23 2004	
Mailing Address of Donor p o box 1976			Amount 1,000.00	
City macon	State GA	Zip 31202		
E. Full Name of Donor Tom Finch			Date of Receipt 08 31 2004	
Mailing Address of Donor 885 Arapahoe Avenue			Amount 1,000.00	
City Boulder	State CO	Zip 80302		
SUBTOTAL of Donations This Page (optional)			5,500.00	
TOTAL This Period (last page this line number only) (carry total from last page to Line 9)			22,150.00	

SCHEDULE 9-A
Donation(s) Received

<p>A. Full Name of Donor Robert A. Finder</p> <p>Mailing Address of Donor 357 Applegarth Rd</p> <p>City State Zip Monroe Township NJ 08831</p>	<p>Date of Receipt 08 07 2004</p> <p>Amount 2,000.00</p>
<p>B. Full Name of Donor Robert A. Finder</p> <p>Mailing Address of Donor 357 Applegarth Rd</p> <p>City State Zip Monroe Township NJ 08831</p>	<p>Date of Receipt 08 26 2004</p> <p>Amount 2,000.00</p>
<p>C. Full Name of Donor Joseph J. Finnegan</p> <p>Mailing Address of Donor 2001 Dipinto Ave.</p> <p>City State Zip Henderson NV 89052</p>	<p>Date of Receipt 08 22 2004</p> <p>Amount 3,000.00</p>
<p>D. Full Name of Donor Len Fisch</p> <p>Mailing Address of Donor 922 Santee Street</p> <p>City State Zip Los Angeles CA 90015</p>	<p>Date of Receipt 08 24 2004</p> <p>Amount 2,500.00</p>
<p>E. Full Name of Donor E. Grant Fitts</p> <p>Mailing Address of Donor P. O. Box 670748</p> <p>City State Zip Dallas TX 75367</p>	<p>Date of Receipt 08 03 2004</p> <p>Amount 2,500.00</p>
<p>SUBTOTAL of Donations This Page (optional)</p>	<p>12,000.00</p>
<p>TOTAL This Period (last page the line number only) (carry total from last page to Line 5)</p>	<p>23,850.00</p>

SCHEDULE 9-A
Donation(s) Received

<p>A. Full Name of Donor James Flanders</p> <p>Mailing Address of Donor 155 Otis St</p> <p>City State Zip Northborough MA 01532</p>	<p>Date of Receipt 08 07 2004</p> <p>Amount 1,000.00</p>
<p>B. Full Name of Donor James Flanders</p> <p>Mailing Address of Donor 155 Otis St</p> <p>City State Zip Northborough MA 01532</p>	<p>Date of Receipt 08 25 2004</p> <p>Amount 1,000.00</p>
<p>C. Full Name of Donor Steve Flynn</p> <p>Mailing Address of Donor PO Box 642</p> <p>City State Zip Rancho Santa Fe CA 92067</p>	<p>Date of Receipt 08 28 2004</p> <p>Amount 1,000.00</p>
<p>D. Full Name of Donor Brian Follett</p> <p>Mailing Address of Donor 5600 Craggy Point</p> <p>City State Zip Austin TX 78731</p>	<p>Date of Receipt 08 18 2004</p> <p>Amount 2,500.00</p>
<p>E. Full Name of Donor thomas ford</p> <p>Mailing Address of Donor 4225 east third street</p> <p>City State Zip long beach CA 90814</p>	<p>Date of Receipt 08 26 2004</p> <p>Amount 1,000.00</p>
<p>SUBTOTAL of Donations This Page (optional)</p>	<p>6,500.00</p>
<p>TOTAL This Period (last page this line number only)</p> <p>(carry total from last page to Line 5)</p>	<p>240,000.00</p>

SCHEDULE 9-A
Donation(s) Received

PAGE 46 OF 145

A. Full Name of Donor Charles foster Mailing Address of Donor 11723 Elmscourt City State Zip San Antonio TX 78230	Date of Receipt 08 06 2004 Amount 2,500.00
B. Full Name of Donor Clark Frankel Mailing Address of Donor 65 West 13 St. City State Zip New York NY 10011	Date of Receipt 04 20 2004 Amount 500.00
C. Full Name of Donor Clark Frankel Mailing Address of Donor 65 West 13 St. City State Zip New York NY 10011	Date of Receipt 08 09 2004 Amount 500.00
D. Full Name of Donor Jerre Freeman Mailing Address of Donor 6485 Poplar Avenue City State Zip Memphis TN 38119	Date of Receipt 08 30 2004 Amount 1,000.00
E. Full Name of Donor Jeffery Franch Mailing Address of Donor 310 Harbor Drive City State Zip Columbia SC 29229	Date of Receipt 08 20 2004 Amount 2,500.00
SUBTOTAL of Donations This Page (optional)	7,000.00
TOTAL This Period (last page this line number only) (carry total from last page to Line 9)	24,700.00

SCHEDULE 9-A
Donation(s) Received

A. Full Name of Donor CHARLES FREYERMUTH			Date of Receipt 08 26 2004	
Mailing Address of Donor 3006 WAYNE AVE.			Amount 1 0 0 0 0 0	
City	State	Zip		
IOWA CITY	IA	52240		
B. Full Name of Donor Timothy Frid			Date of Receipt 08 14 2004	
Mailing Address of Donor 8351 129th St W			Amount 1 0 0 0 0 0	
City	State	Zip		
Apple Valley	MN	55124		
C. Full Name of Donor Nelson Frink			Date of Receipt 08 22 2004	
Mailing Address of Donor 1133 Ashwood Ct			Amount 1 0 0 0 0 0	
City	State	Zip		
Yuba City	CA	95991		
D. Full Name of Donor Chuck Froelicher			Date of Receipt 09 02 2004	
Mailing Address of Donor 822 Race Street			Amount 1 0 0 0 0 0	
City	State	Zip		
Denver	CO	80206		
E. Full Name of Donor Michael Futrell			Date of Receipt 08 03 2004	
Mailing Address of Donor 10875 Belle Cour Way			Amount 1 0 0 0 0 0	
City	State	Zip		
Shreveport	LA	71106		
SUBTOTAL of Donations This Page (optional)			5 0 0 0 0 0	
TOTAL This Period (see page this five digit number only) (carry total from last page to Line B)			2 5 2 0 0 0 0 0	

SCHEDULE 9-A

Donation(s) Received

<p>A. Full Name of Donor Ragnvald Gabrielsen</p> <p>Mailing Address of Donor 1100 Louisiana</p> <p>City State Zip Houston TX 77002</p>	<p>Date of Receipt 08 24 2004</p> <p>Amount 5 000 00</p>
<p>B. Full Name of Donor Ragnvald Gabrielsen</p> <p>Mailing Address of Donor 1100 Louisiana</p> <p>City State Zip Houston TX 77002</p>	<p>Date of Receipt 08 09 2004</p> <p>Amount 5 000 00</p>
<p>C. Full Name of Donor A Mark Gambee</p> <p>Mailing Address of Donor 900 Crescent Beach Road</p> <p>City State Zip Vero Beach FL 32963</p>	<p>Date of Receipt 08 20 2004</p> <p>Amount 2 500 00</p>
<p>D. Full Name of Donor Tom gammon</p> <p>Mailing Address of Donor 3100 McPherson Road</p> <p>City State Zip roswell ga. GA 30075</p>	<p>Date of Receipt 08 24 2004</p> <p>Amount 1 000 00</p>
<p>E. Full Name of Donor Michael Gardner</p> <p>Mailing Address of Donor 16067 State Route 12 East</p> <p>City State Zip Findlay OH 45840</p>	<p>Date of Receipt 08 06 2004</p> <p>Amount 2 500 00</p>
<p>SUBTOTAL of Donations This Page (optional)</p>	<p>7 000 00</p>
<p>TOTAL This Period (last page the line number only)</p> <p>(carry total from last page to Line 9)</p>	<p>259 000 00</p>

SCHEDULE 9-A

Donation(s) Received

<p>A. Full Name of Donor Michael Gardner</p> <p>Mailing Address of Donor 16067 State Route 12 East</p> <p>City State Zip Findlay OH 45840</p>	<p>Date of Receipt 08 08 2004</p> <p>Amount 2,500.00</p>
<p>B. Full Name of Donor lawrence gelman</p> <p>Mailing Address of Donor 3900 SUNDOWN DR</p> <p>City State Zip McAllen TX 78503</p>	<p>Date of Receipt 08 25 2004</p> <p>Amount 1,000.00</p>
<p>C. Full Name of Donor lawrence gelman</p> <p>Mailing Address of Donor 3900 sundown dr</p> <p>City State Zip mcallen TX 78503</p>	<p>Date of Receipt 08 25 2004</p> <p>Amount 1,000.00</p>
<p>D. Full Name of Donor lawrence gelman</p> <p>Mailing Address of Donor 3900 sundown dr</p> <p>City State Zip mcallen TX 78503</p>	<p>Date of Receipt 08 29 2004</p> <p>Amount 1,000.00</p>
<p>E. Full Name of Donor lawrence gelman</p> <p>Mailing Address of Donor 3900 sundown dr</p> <p>City State Zip mcallen TX 78503</p>	<p>Date of Receipt 08 02 2004</p> <p>Amount 1,000.00</p>
<p>SUBTOTAL of Donations This Page (optional)</p>	<p>6,500.00</p>
<p>TOTAL This Period (last page this line number only)</p> <p>(carry total from last page to line 5)</p>	<p>26,550.00</p>

SCHEDULE 9-A
Donation(s) Received

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A. Full Name of Donor Lawrence gelman <hr/> Mailing Address of Donor 3900 sundown dr <hr/> City State Zip mcailen TX 78503	Date of Receipt 0 9 0 8 2 0 0 4 <hr/> Amount 1,000.00
B. Full Name of Donor Lawrence gelman <hr/> Mailing Address of Donor P.O.B. 3449 <hr/> City State Zip mcailen TX 78502	Date of Receipt 0 2 1 1 2 0 0 4 <hr/> Amount 1,000.00
C. Full Name of Donor Chris Georgehead <hr/> Mailing Address of Donor 9009 Denington Drive <hr/> City State Zip Louisville KY 40222	Date of Receipt 0 9 0 7 2 0 0 4 <hr/> Amount 1,000.00
D. Full Name of Donor Mike Gerawan <hr/> Mailing Address of Donor 21249 E. Jefferson <hr/> City State Zip Reedley CA 93654	Date of Receipt 0 8 0 4 2 0 0 4 <hr/> Amount 1,000.00
E. Full Name of Donor Mike Gerawan <hr/> Mailing Address of Donor 21249 E. Jefferson <hr/> City State Zip Reedley CA 93654	Date of Receipt 0 8 2 1 2 0 0 4 <hr/> Amount 1,000.00
SUBTOTAL of Donations This Page (optional)	5,000.00
TOTAL This Period (last page this line number only) (carry total from last page to line 9)	27,050.00

SCHEDULE 9-A

Donation(s) Received

<p>A. Full Name of Donor James Gesler</p> <p>Mailing Address of Donor 6663 Lakeside Cir</p> <p>City: Worthington State: OH Zip: 43085</p>	<p>Date of Receipt 08 02 2004</p> <p>Amount 1,000.00</p>
<p>B. Full Name of Donor James L. Gesler</p> <p>Mailing Address of Donor 6663 Lakeside Cir E</p> <p>City: Worthington State: OH Zip: 43085</p>	<p>Date of Receipt 08 02 2004</p> <p>Amount 1,000.00</p>
<p>C. Full Name of Donor Camillo Ghiron</p> <p>Mailing Address of Donor 2130 North Lincoln Park West, Apt. 10 sou</p> <p>City: Chicago State: IL Zip: 60614</p>	<p>Date of Receipt 08 20 2004</p> <p>Amount 1,000.00</p>
<p>D. Full Name of Donor Ronald J. Gilles</p> <p>Mailing Address of Donor 908 Emerald Bay</p> <p>City: Laguna Beach State: CA Zip: 92651</p>	<p>Date of Receipt 08 31 2004</p> <p>Amount 1,000.00</p>
<p>E. Full Name of Donor George Gillespie</p> <p>Mailing Address of Donor 1016 So. Mccoll Rd.</p> <p>City: Mcallen State: TX Zip: 78501</p>	<p>Date of Receipt 08 07 2004</p> <p>Amount 1,000.00</p>
<p>SUBTOTAL of Donations This Page (optional)</p>	<p>5,000.00</p>
<p>TOTAL This Period (last page this line number only)</p> <p>(carry total from last page to Line 9)</p>	<p>27,550.00</p>

SCHEDULE 9-A

Donation(s) Received

<p>A. Full Name of Donor John Gioia</p> <p>Mailing Address of Donor 9524 Mount Vernon Landing</p> <p>City State Zip Alexandria VA 22309</p>	<p>Date of Receipt 08 20 04</p> <p>Amount 1,000.00</p>
<p>B. Full Name of Donor Doyle Glass</p> <p>Mailing Address of Donor 2008 Starmont Road</p> <p>City State Zip Louisville KY 40207</p>	<p>Date of Receipt 08 20 04</p> <p>Amount 1,000.00</p>
<p>C. Full Name of Donor Charles Goforth</p> <p>Mailing Address of Donor 1735 lake bluff</p> <p>City State Zip Reed Springs MO 65737</p>	<p>Date of Receipt 08 19 04</p> <p>Amount 2,500.00</p>
<p>D. Full Name of Donor jeffrey golding</p> <p>Mailing Address of Donor po box 78708</p> <p>City State Zip charlotte NC 28277</p>	<p>Date of Receipt 08 20 04</p> <p>Amount 500.00</p>
<p>E. Full Name of Donor jeffrey golding</p> <p>Mailing Address of Donor po box 78708</p> <p>City State Zip charlotte NC 28277</p>	<p>Date of Receipt 08 20 04</p> <p>Amount 500.00</p>
<p>SUBTOTAL of Donations This Page (optional)</p>	<p>5,500.00</p>
<p>TOTAL This Period (last page this line number only)</p> <p>(carry total from last page to Line B)</p>	<p>28,100.00</p>

SCHEDULE 9-A

Donation(s) Received

<p>A. Full Name of Donor Fred Goldman</p> <p>Mailing Address of Donor 6911 Westchester Circle</p> <p>City State Zip Bradenton FL 34202</p>	<p>Date of Receipt 08 29 2004</p> <p>Amount 1,000.00</p>
<p>B. Full Name of Donor neal goldman</p> <p>Mailing Address of Donor 220 east 42 st. 29 fl.</p> <p>City State Zip new york NY 10017</p>	<p>Date of Receipt 08 31 2004</p> <p>Amount 2,500.00</p>
<p>C. Full Name of Donor William Gommo</p> <p>Mailing Address of Donor 2700 N. Peninsula Ave. #332</p> <p>City State Zip New Smyrna Beach FL 32169</p>	<p>Date of Receipt 08 29 2004</p> <p>Amount 1,000.00</p>
<p>D. Full Name of Donor Timothy Gonzales</p> <p>Mailing Address of Donor 2 Hidden Lane</p> <p>City State Zip Orinda CA 94563</p>	<p>Date of Receipt 08 21 2004</p> <p>Amount 500.00</p>
<p>E. Full Name of Donor Timothy Gonzales</p> <p>Mailing Address of Donor 2 Hidden Lane</p> <p>City State Zip Orinda CA 94563</p>	<p>Date of Receipt 08 09 2004</p> <p>Amount 500.00</p>
<p>SUBTOTAL of Donations This Page (optional)</p>	<p>5,500.00</p>
<p>TOTAL This Period (last page this line number only)</p> <p>(carry total from last page to Line 4)</p>	<p>28,650.00</p>

SCHEDULE 9-A

Donation(s) Received

<p>A. Full Name of Donor CLAIRE GOOSEY</p> <p>Mailing Address of Donor 6545 Rutgers</p> <p>City State Zip Houston TX 77005</p>	<p>Date of Receipt 08 28 2004</p> <p>Amount 5 000 00</p>
<p>B. Full Name of Donor CLAIRE GOOSEY</p> <p>Mailing Address of Donor 6545 Rutgers</p> <p>City State Zip Houston TX 77005</p>	<p>Date of Receipt 08 02 2004</p> <p>Amount 5 000 00</p>
<p>C. Full Name of Donor CLAIRE GOOSEY</p> <p>Mailing Address of Donor 6545 Rutgers</p> <p>City State Zip Houston TX 77005</p>	<p>Date of Receipt 08 03 2004</p> <p>Amount 1 000 00</p>
<p>D. Full Name of Donor Oliver R Grace Jr</p> <p>Mailing Address of Donor 55 Brookville Road</p> <p>City State Zip Brookville NY 11545</p>	<p>Date of Receipt 08 05 2004</p> <p>Amount 5 000 00</p>
<p>E. Full Name of Donor Oliver R Grace Jr</p> <p>Mailing Address of Donor 55 Brookville Road</p> <p>City State Zip Brookville NY 11545</p>	<p>Date of Receipt 08 21 2004</p> <p>Amount 5 000 00</p>
<p>SUBTOTAL of Donations This Page (optional) ▶ 2 100 00</p>	
<p>TOTAL This Period (last page this line number only) ▶ 2 896 000 00 (carry total from last page in Line 8)</p>	

SCHEDULE 9-A
Donation(s) Received

<p>A. Full Name of Donor Billy Graham</p> <p>Mailing Address of Donor 1550 Bay Street #209</p> <p>City State Zip San Francisco CA 94123</p>	<p>Date of Receipt 08 21 2004</p> <p>Amount 1,000.00</p>
<p>B. Full Name of Donor JOHN GRAHAM</p> <p>Mailing Address of Donor 32 OAKLAWN DRIVE</p> <p>City State Zip COVINGTON LA 70433</p>	<p>Date of Receipt 08 20 2004</p> <p>Amount 1,000.00</p>
<p>C. Full Name of Donor SUZANNE GRAHAM</p> <p>Mailing Address of Donor 32OAKLAWN DRIVE</p> <p>City State Zip COVINGTON LA 70433</p>	<p>Date of Receipt 08 20 2004</p> <p>Amount 1,000.00</p>
<p>D. Full Name of Donor James Graves</p> <p>Mailing Address of Donor 3913 Centenary</p> <p>City State Zip Dallas TX 75225</p>	<p>Date of Receipt 08 18 2004</p> <p>Amount 500.00</p>
<p>E. Full Name of Donor James Graves</p> <p>Mailing Address of Donor 3913 Centenary</p> <p>City State Zip Dallas TX 75225</p>	<p>Date of Receipt 08 22 2004</p> <p>Amount 500.00</p>
<p>SUBTOTAL of Donations This Page (optional) ▶</p>	<p>4,000.00</p>
<p>TOTAL This Period (last page this line number only) ▶ (carry total from last page to Line 6)</p>	<p>29,260.00</p>

SCHEDULE 9-A
Donation(s) Received

<p>A. Full Name of Donor James Graves</p> <p>Mailing Address of Donor 3913 Centenary</p> <p>City State Zip Dallas TX 75225</p>	<p>Date of Receipt 09 08 2004</p> <p>Amount 1,000.00</p>
<p>B. Full Name of Donor John Grayson</p> <p>Mailing Address of Donor 158 Plymouth Dr</p> <p>City State Zip Palatine IL 60067</p>	<p>Date of Receipt 09 02 2004</p> <p>Amount 1,000.00</p>
<p>C. Full Name of Donor Janice Greer</p> <p>Mailing Address of Donor 1107 Key Plaza #262</p> <p>City State Zip Key West FL 33040</p>	<p>Date of Receipt 09 08 2004</p> <p>Amount 1,000.00</p>
<p>D. Full Name of Donor JANICE GREER</p> <p>Mailing Address of Donor 1107 KEY PLAZA # 262</p> <p>City State Zip KEY WEST FL 33040</p>	<p>Date of Receipt 09 24 2004</p> <p>Amount 1,000.00</p>
<p>E. Full Name of Donor Paul Griffin</p> <p>Mailing Address of Donor 24005 Ventura Blvd</p> <p>City State Zip Calabasas CA 91302</p>	<p>Date of Receipt 09 09 2004</p> <p>Amount 1,000.00</p>
<p>SUBTOTAL of Donations This Page (optional)</p>	<p>5,000.00</p>
<p>TOTAL This Period (last page this line number only)</p> <p>(carry total from last page to line 9)</p>	<p>28,780.00</p>

SCHEDULE 9-A

Donation(s) Received

A. Full Name of Donor Paul Griffin			Date of Receipt 05 23 2004	
Mailing Address of Donor 24005 Ventura Blvd			Amount 2,500.00	
City Calabasas	State CA	Zip 91302		
B. Full Name of Donor Paul Griffin			Date of Receipt 05 23 2004	
Mailing Address of Donor 24005 Ventura Blvd			Amount 2,500.00	
City Calabasas	State CA	Zip 91302		
C. Full Name of Donor Madison Grose			Date of Receipt 09 07 2004	
Mailing Address of Donor 94 Dingtletown Road			Amount 2,500.00	
City Greenwich	State CT	Zip 06830		
D. Full Name of Donor Bill Gross			Date of Receipt 08 13 2004	
Mailing Address of Donor 125 Mansion Road			Amount 500.00	
City Elverson	State PA	Zip 19520		
E. Full Name of Donor Bill Gross			Date of Receipt 09 02 2004	
Mailing Address of Donor 125 Mansion Road			Amount 500.00	
City Elverson	State PA	Zip 19520		
SUBTOTAL of Donations This Page (optional)			8,500.00	
TOTAL This Period (last page this line number only) (carry total from last page to Line 9)			306,100.00	

SCHEDULE 9-A
Donation(s) Received

<p>A. Full Name of Donor Robert Guess</p> <p>Mailing Address of Donor 6 Treetops Lane</p> <p>City State Zip Danvers MA 01923</p>	<p>Date of Receipt 08 12 2004</p> <p>Amount 1 000 00</p>
<p>B. Full Name of Donor Thomas Gumprecht</p> <p>Mailing Address of Donor 7445 SE 71st</p> <p>City State Zip Mercer Island WA 98040</p>	<p>Date of Receipt 08 26 2004</p> <p>Amount 5 000 00</p>
<p>C. Full Name of Donor Thomas Gumprecht</p> <p>Mailing Address of Donor 7445 SE 71st</p> <p>City State Zip Mercer Island WA 98040</p>	<p>Date of Receipt 08 22 2004</p> <p>Amount 1 000 00</p>
<p>D. Full Name of Donor Skip Gunther</p> <p>Mailing Address of Donor 979 Kinghorn Drive</p> <p>City State Zip Kennesaw GA 30152</p>	<p>Date of Receipt 08 21 2004</p> <p>Amount 1 000 00</p>
<p>E. Full Name of Donor Thomas Hale</p> <p>Mailing Address of Donor 3783 Center Way</p> <p>City State Zip Fairfax VA 22033</p>	<p>Date of Receipt 08 01 2004</p> <p>Amount 1 000 00</p>
<p>SUBTOTAL of Donations This Page (optional)</p>	<p>4 500 00</p>
<p>TOTAL This Period (last page this line number only)</p> <p>(carry total from last page to Line 9)</p>	<p>3 106 00 00</p>

SCHEDULE 9-A
Donation(s) Received

PAGE 59 OF 145

A. Full Name of Donor Lisa Hall			Date of Receipt 0 8 2 0 2 0 0 4	
Mailing Address of Donor 391 Nichols Run Ct.			Amount 2 5 0 0 0 0	
City Great Falls	State VA	Zip 22066		
B. Full Name of Donor Jack Hamilton			Date of Receipt 0 8 2 6 2 0 0 4	
Mailing Address of Donor 311 N. Newport Ave.			Amount 1 0 0 0 0 0	
City Tamap	State FL	Zip 33606		
C. Full Name of Donor kathy hannigan			Date of Receipt 0 8 0 2 2 0 0 4	
Mailing Address of Donor 391 claremont rd			Amount 1 0 0 0 0 0	
City Bernardsville	State NJ	Zip 07924		
D. Full Name of Donor Alex Hanson			Date of Receipt 0 8 0 2 2 0 0 4	
Mailing Address of Donor One Moorehead			Amount 1 0 0 0 0 0	
City Pennington	State NJ	Zip 08534		
E. Full Name of Donor Steven Hargis			Date of Receipt 0 8 1 4 2 0 0 4	
Mailing Address of Donor PO Box 1407			Amount 1 0 0 0 0 0	
City Hereford	State TX	Zip 79045		
SUBTOTAL of Donations This Page (optional)			6 5 0 0 0 0	
TOTAL This Period (last page (has line number only) (carry total from last page to Line 9)			3 1 7 1 0 0 0 0	

SCHEDULE 9-A

Donation(s) Received

A. Full Name of Donor Forrest Harrell			Date of Receipt 09 02 2004		
Mailing Address of Donor 14214 Bonney Brier Dr.			Amount 1,000.00		
City Houston	State TX	Zip 77069			
B. Full Name of Donor Carl R. Harrington			Date of Receipt 09 05 2004		
Mailing Address of Donor 1500 Candiewood Drive			Amount 1,000.00		
City Columbus	State OH	Zip 43235			
C. Full Name of Donor Mike Harrington			Date of Receipt 08 06 2004		
Mailing Address of Donor 108 Oakwood Place			Amount 2,500.00		
City Lynchburg	State VA	Zip 24503			
D. Full Name of Donor Mike Harrington			Date of Receipt 08 20 2004		
Mailing Address of Donor 108 Oakwood Place			Amount 500.00		
City Lynchburg	State VA	Zip 24503			
E. Full Name of Donor Mike Harrington			Date of Receipt 08 30 2004		
Mailing Address of Donor 108 Oakwood Place			Amount 2,500.00		
City Lynchburg	State VA	Zip 24503			
SUBTOTAL of Donations This Page (optional)			3,000.00		
TOTAL This Period (last page (line number only)) (carry total from last page to Line B)			3,201,000.00		

SCHEDULE 9-A

Donation(s) Received

<p>A. Full Name of Donor Joanne Hart</p> <p>Mailing Address of Donor 600 Columbus Avenue, Apt 12J</p> <p>City State Zip New York NY 10024</p>	<p>Date of Receipt 08 08 2004</p> <p>Amount 2 500 00</p>
<p>B. Full Name of Donor Joanne Hart</p> <p>Mailing Address of Donor 600 Columbus Avenue Apt 12J</p> <p>City State Zip New York NY 10024</p>	<p>Date of Receipt 08 21 2004</p> <p>Amount 2 500 00</p>
<p>C. Full Name of Donor Joanne Hart</p> <p>Mailing Address of Donor 600 Columbus Avenue, Apt 12J</p> <p>City State Zip New York NY 10024</p>	<p>Date of Receipt 08 28 2004</p> <p>Amount 2 500 00</p>
<p>D. Full Name of Donor Joanne Hart</p> <p>Mailing Address of Donor 600 Columbus Avenue, Apt. 12J</p> <p>City State Zip New York NY 10024</p>	<p>Date of Receipt 09 08 2004</p> <p>Amount 5 000 00</p>
<p>E. Full Name of Donor Edward Hatfield</p> <p>Mailing Address of Donor 4905 Burley Hills</p> <p>City State Zip Cincinnati OH 45243</p>	<p>Date of Receipt 08 28 2004</p> <p>Amount 1 000 00</p>

<p>SUBTOTAL of Donations This Page (optional)</p>	<p>2 250 00</p>
<p>TOTAL This Period (last page this line number only)</p> <p>(carry total from last page to Line 0)</p>	<p>3 223 50 00</p>

SCHEDULE 9-A
Donation(s) Received

<p>A. Full Name of Donor John Hauck</p> <p>Mailing Address of Donor 1151 Highland Pointe Dr.</p> <p>City State Zip Town & Country MO 63131</p>	<p>Date of Receipt 08 05 2004</p> <p>Amount 1,000.00</p>
<p>B. Full Name of Donor John Hauck</p> <p>Mailing Address of Donor 1151 Highland Pointe Dr.</p> <p>City State Zip Town & Country MO 63131</p>	<p>Date of Receipt 08 08 2004</p> <p>Amount 1,000.00</p>
<p>C. Full Name of Donor Frank Hawkins</p> <p>Mailing Address of Donor 204 Ocean Drive</p> <p>City State Zip Tavernier FL 33070</p>	<p>Date of Receipt 08 07 2004</p> <p>Amount 1,000.00</p>
<p>D. Full Name of Donor Frank Hawkins</p> <p>Mailing Address of Donor 204 Ocean Drive</p> <p>City State Zip Tavernier FL 33070</p>	<p>Date of Receipt 08 23 2004</p> <p>Amount 500.00</p>
<p>E. Full Name of Donor Frank Hawkins</p> <p>Mailing Address of Donor 204 Ocean Drive</p> <p>City State Zip Tavernier FL 33070</p>	<p>Date of Receipt 08 04 2004</p> <p>Amount 250.00</p>
<p>SUBTOTAL of Donations This Page (optional)</p>	<p>2,850.00</p>
<p>TOTAL This Form (last page this line number only)</p> <p>(carry total from last page to line 9)</p>	<p>3,252,000.00</p>

SCHEDULE 9-A
Donation(s) Received

PAGE 63 OF 145

A. Full Name of Donor Frank Hawkins			Date of Receipt 0 8 0 8 2 0 0 4	
Mailing Address of Donor 204 Ocean Drive			Amount 1 0 0 0 0 0	
City Tavernier	State FL	Zip 33070		
B. Full Name of Donor John Hawkins			Date of Receipt 0 8 2 6 2 0 0 4	
Mailing Address of Donor 250 scudders Lane			Amount 1 0 0 0 0 0	
City Roslyn	State NY	Zip 11576		
C. Full Name of Donor Lovell E. Hayden, III			Date of Receipt 0 8 2 4 2 0 0 4	
Mailing Address of Donor P.O.Box 14214			Amount 1 0 0 0 0 0	
City Monroe	State LA	Zip 71207		
D. Full Name of Donor William J. Hayes			Date of Receipt 0 8 1 1 2 0 0 4	
Mailing Address of Donor PO Box 25			Amount 1 0 0 0 0 0	
City West Barnstable	State MA	Zip 02668		
E. Full Name of Donor MARK HEALY			Date of Receipt 0 8 0 1 2 0 0 4	
Mailing Address of Donor 207 BLACKJACK OAK			Amount 1 0 0 0 0 0	
City SAN ANTONIO	State TX	Zip 78230		
SUBTOTAL of Donations This Page (optional)			5 0 0 0 0 0	
TOTAL This Period (last page this line number only) (Carry total from last page to Line 9)			5 3 0 2 0 0 0 0	

SCHEDULE 9-A
Donation(s) Received

<p>A. Full Name of Donor john heaney</p> <p>Mailing Address of Donor 9 lefe court, grenelefe estates</p> <p>City State Zip haines city FL 33844</p>	<p>Date of Receipt 08 21 2004</p> <p>Amount 1,000.00</p>
<p>B. Full Name of Donor Chase P. Hearn</p> <p>Mailing Address of Donor 104 Glenwood Dr</p> <p>City State Zip Williamsburg VA 23185</p>	<p>Date of Receipt 09 02 2004</p> <p>Amount 1,000.00</p>
<p>C. Full Name of Donor Kay Hedeem</p> <p>Mailing Address of Donor 218 North 14th Avenue</p> <p>City State Zip Sturgeon Bay WI 54235</p>	<p>Date of Receipt 08 12 2004</p> <p>Amount 500.00</p>
<p>D. Full Name of Donor Kay Hedeem</p> <p>Mailing Address of Donor 218 North 14 Avenue</p> <p>City State Zip Sturgeon Bay WI 54235</p>	<p>Date of Receipt 09 09 2004</p> <p>Amount 1,000.00</p>
<p>E. Full Name of Donor G Ronald Henderson</p> <p>Mailing Address of Donor 1801 Strathshire Hall Ln</p> <p>City State Zip Powell OH 43065</p>	<p>Date of Receipt 08 19 2004</p> <p>Amount 1,000.00</p>
<p>SUBTOTAL of Donations This Page (optional) ▶ 4,500.00</p>	
<p>TOTAL This Period (last page this line number only) ▶ 3,347.00 (carry total from last page to Line 9)</p>	

SCHEDULE 9-A
Donation(s) Received

<p>A. Full Name of Donor Andrew Hendricks, MD</p> <p>Mailing Address of Donor 103 Rosewood Drive</p> <p>City State Zip Lumberton NC 28358</p>	<p>Date of Receipt 08 27 2004</p> <p>Amount 1,000.00</p>
<p>B. Full Name of Donor Madeline Henry</p> <p>Mailing Address of Donor 10030 North Miller Court</p> <p>City State Zip Mequon WI 53092</p>	<p>Date of Receipt 09 02 2004</p> <p>Amount 1,000.00</p>
<p>C. Full Name of Donor David Hensley</p> <p>Mailing Address of Donor 31 Brush Everard Ct.</p> <p>City State Zip Stafford VA 22554</p>	<p>Date of Receipt 08 29 2004</p> <p>Amount 1,000.00</p>
<p>D. Full Name of Donor Willis Hern</p> <p>Mailing Address of Donor 3744 Cobbleridge Dr.</p> <p>City State Zip Charlotte NC 28215</p>	<p>Date of Receipt 08 20 2004</p> <p>Amount 500.00</p>
<p>E. Full Name of Donor Willis Hern</p> <p>Mailing Address of Donor 3744 Cobbleridge Dr.</p> <p>City State Zip Charlotte NC 28215</p>	<p>Date of Receipt 08 31 2004</p> <p>Amount 500.00</p>
<p>SUBTOTAL of Donations This Page (optional) ▶</p>	<p>4,000.00</p>
<p>TOTAL This Period (last page this line number only) ▶ (carry total from last page to Line B)</p>	<p>33,870.00</p>

SCHEDULE 9-A
Donation(s) Received

<p>A. Full Name of Donor Richard Herrington</p> <p>Mailing Address of Donor 10487 Courtney Drive</p> <p>City State Zip Fairfax VA 22030</p>	<p>Date of Receipt 09 24 2004</p> <p>Amount 50000</p>
<p>B. Full Name of Donor Richard Herrington</p> <p>Mailing Address of Donor 10487 Courtney Drive</p> <p>City State Zip Fairfax VA 22030</p>	<p>Date of Receipt 09 09 2004</p> <p>Amount 50000</p>
<p>C. Full Name of Donor Sam Hertogs</p> <p>Mailing Address of Donor 1350 South Frontage Road</p> <p>City State Zip Hastings MN 55033</p>	<p>Date of Receipt 09 02 2004</p> <p>Amount 100000</p>
<p>D. Full Name of Donor Joseph Hess</p> <p>Mailing Address of Donor P.O. Box 1049</p> <p>City State Zip Tiburon CA 94920</p>	<p>Date of Receipt 09 02 2004</p> <p>Amount 100000</p>
<p>E. Full Name of Donor Stan Hiatt</p> <p>Mailing Address of Donor 617 Violet St.</p> <p>City State Zip Modesto CA 95356</p>	<p>Date of Receipt 08 21 2004</p> <p>Amount 50000</p>
<p>SUBTOTAL of Donations This Page (optional)</p>	<p>350000</p>
<p>TOTAL This Period (last page this line number only)</p> <p>(carry total from last page to Line 9)</p>	<p>34220000</p>

SCHEDULE 3-A
Donation(s) Received

<p>A. Full Name of Donor Stan Hiatt</p> <p>Mailing Address of Donor 617 Violet St.</p> <p>City State Zip Modesto CA 95356</p>	<p>Date of Receipt 08 25 2004</p> <p>Amount 1,000.00</p>
<p>B. Full Name of Donor Stan Hiatt</p> <p>Mailing Address of Donor 617 Violet St.</p> <p>City State Zip Modesto CA 95356</p>	<p>Date of Receipt 08 27 2004</p> <p>Amount 2,500.00</p>
<p>C. Full Name of Donor Stan Hiatt</p> <p>Mailing Address of Donor 617 Violet St.</p> <p>City State Zip Modesto CA 95356</p>	<p>Date of Receipt 08 28 2004</p> <p>Amount 1,000.00</p>
<p>D. Full Name of Donor George Hibbs</p> <p>Mailing Address of Donor 505 E 8th</p> <p>City State Zip McMinnville OR 97128</p>	<p>Date of Receipt 08 08 2004</p> <p>Amount 1,000.00</p>
<p>E. Full Name of Donor Billy E. Hibbs, Jr</p> <p>Mailing Address of Donor 6708 Hollytree Circle</p> <p>City State Zip Tyler TX 75703</p>	<p>Date of Receipt 08 07 2004</p> <p>Amount 1,000.00</p>
<p>SUBTOTAL of Donations This Page (optional)</p>	<p>6,500.00</p>
<p>TOTAL This Period (last page 116 line number only) (carry total from last page to Line 9)</p>	<p>34,870.00</p>

SCHEDULE 9-A
Donation(s) Received

A. Full Name of Donor Jeff Hill			Date of Receipt 09 06 2004	
Mailing Address of Donor 104 Reagan Ct			Amount 500.00	
City	State	Zip		
Ventura	CA	93003		
B. Full Name of Donor Jeffrey Hill			Date of Receipt 08 21 2004	
Mailing Address of Donor 104 Reagan Ct			Amount 500.00	
City	State	Zip		
Ventura	CA	93003		
C. Full Name of Donor Gary P. Hite			Date of Receipt 08 07 2004	
Mailing Address of Donor 942 Lula Payne Trail			Amount 1000.00	
City	State	Zip		
Ball Ground	GA	30107		
D. Full Name of Donor Craig Hobbs			Date of Receipt 08 20 2004	
Mailing Address of Donor P.O. Box 10902			Amount 1000.00	
City	State	Zip		
Bainbridge Isl.	WA	98110		
E. Full Name of Donor Conrad Hock, Jr.			Date of Receipt 09 01 2004	
Mailing Address of Donor 13301 W. 99th St.			Amount 1000.00	
City	State	Zip		
Lenexa	KS	66216		
SUBTOTAL of Donations This Page (optional)			4,000.00	
TOTAL This Period (last page this line number only) (carry total from last page to Line B)			3,527,000.00	

SCHEDULE 9-A
Donation(s) Received

<p>A. Full Name of Donor Roy F. Hoffmann</p> <p>Mailing Address of Donor 9030 Ivybridge Crossing</p> <p>City State Zip Richmond VA 23236</p>	<p>Date of Receipt M M Y Y 0 8 1 3 2 0 0 4</p> <p>Amount 1 0 0 0 . 0 0</p>
<p>B. Full Name of Donor Joseph C. Hogan Jr.</p> <p>Mailing Address of Donor 50 Oak Avenue</p> <p>City State Zip Belmont MA 0247</p>	<p>Date of Receipt M M Y Y 0 8 1 8 2 0 0 4</p> <p>Amount 1 0 0 0 . 0 0</p>
<p>C. Full Name of Donor John Holds</p> <p>Mailing Address of Donor 8025 Daytona Dr.</p> <p>City State Zip St. Louis MO 63105</p>	<p>Date of Receipt M M Y Y 0 8 0 8 2 0 0 4</p> <p>Amount 1 0 0 0 . 0 0</p>
<p>D. Full Name of Donor William R. Honring</p> <p>Mailing Address of Donor 1320 Fayetteville RD</p> <p>City State Zip Rockingham NC 28379</p>	<p>Date of Receipt M M Y Y 0 8 0 7 2 0 0 4</p> <p>Amount 1 0 0 0 . 0 0</p>
<p>E. Full Name of Donor William Hoskins</p> <p>Mailing Address of Donor 85 East India Row 20A/B</p> <p>City State Zip Boston MA 02110</p>	<p>Date of Receipt M M Y Y 0 8 2 4 2 0 0 4</p> <p>Amount 1 0 0 0 . 0 0</p>
<p>SUBTOTAL of Donations This Page (optional) ▶ 5 0 0 0 . 0 0</p>	
<p>TOTAL This Period (tax pays this line number only) ▶ 3 5 7 7 6 0 . 0 0 (carry over from last page to Line 9)</p>	

SCHEDULE 9-A
Donation(s) Received

<p>A. Full Name of Donor John Huarte</p> <p>Mailing Address of Donor 14959 la cumbre dr.</p> <p>City State Zip pacific palisades CA 90272</p>	<p>Date of Receipt 08 23 2004</p> <p>Amount 2,500.00</p>
<p>B. Full Name of Donor John G. Huarte</p> <p>Mailing Address of Donor 14959 La Cumbre Dr</p> <p>City State Zip Pacific Palisade CA 90272</p>	<p>Date of Receipt 08 25 2004</p> <p>Amount 1,000.00</p>
<p>C. Full Name of Donor Albert D. Huddleston</p> <p>Mailing Address of Donor 3921 Normandy Avenue</p> <p>City State Zip Dallas TX 75205</p>	<p>Date of Receipt 07 15 2004</p> <p>Amount 5,000.00</p>
<p>D. Full Name of Donor Albert Huddletston</p> <p>Mailing Address of Donor 3921 Normandy Avenue</p> <p>City State Zip Dallas TX 75205</p>	<p>Date of Receipt 08 02 2004</p> <p>Amount 5,000.00</p>
<p>E. Full Name of Donor james hunter</p> <p>Mailing Address of Donor 5800 Sears Tower</p> <p>City State Zip Chicago IL 60606</p>	<p>Date of Receipt 08 23 2004</p> <p>Amount 1,000.00</p>

<p>SUBTOTAL of Donations This Page (optional) ▶</p>	<p>10,225.00</p>
<p>TOTAL This Period (last page this line number only) ▶ (carry total from last page to Line 9)</p>	<p>45,995.00</p>

SCHEDULE 9-A
Donation(s) Received

<p>A. Full Name of Donor Joanne Hunter</p> <p>Mailing Address of Donor 832 First St.</p> <p>City State Zip Manhattan Beach CA 90266</p>	<p>Date of Receipt 09 09 2004</p> <p>Amount 1,000.00</p>
<p>B. Full Name of Donor Anne Gibboney Huske</p> <p>Mailing Address of Donor 205 E 78th Street ,Apt.16H</p> <p>City State Zip New York NY 10021</p>	<p>Date of Receipt 09 07 2004</p> <p>Amount 1,000.00</p>
<p>C. Full Name of Donor Thomas Hyer</p> <p>Mailing Address of Donor 4 Holbein Mews</p> <p>City State Zip London, UK NU SW1W</p>	<p>Date of Receipt 08 29 2004</p> <p>Amount 1,000.00</p>
<p>D. Full Name of Donor Robert Ingram</p> <p>Mailing Address of Donor 8 Shaftsbury Ln.</p> <p>City State Zip Hilton Head SC 29926</p>	<p>Date of Receipt 08 06 2004</p> <p>Amount 1,000.00</p>
<p>E. Full Name of Donor Paul Isaac</p> <p>Mailing Address of Donor 75 Prospect Avenue</p> <p>City State Zip Larchmont NY 10538</p>	<p>Date of Receipt 08 24 2004</p> <p>Amount 1,000.00</p>
<p>SUBTOTAL of Donations This Page (optional)</p>	<p>5,000.00</p>
<p>TOTAL This Period (last page has line number only)</p> <p>(carry total from last page to Line 9)</p>	<p>4,649.50</p>

SCHEDULE 9-A
Donation(s) Received

<p>A. Full Name of Donor Paul Isaac</p> <p>Mailing Address of Donor 75 Prospect Avenue</p> <p>City State Zip Larchmont NY 10538</p>	<p>Date of Receipt 08 29 2004</p> <p>Amount 1,000.00</p>
<p>B. Full Name of Donor Ann Iverson</p> <p>Mailing Address of Donor 2902 West Lane Drive, Unit E</p> <p>City State Zip Houston TX 77027</p>	<p>Date of Receipt 08 20 2004</p> <p>Amount 500.00</p>
<p>C. Full Name of Donor Ann Iverson</p> <p>Mailing Address of Donor 2902 West Lane Drive, Unit E</p> <p>City State Zip Houston TX 77027</p>	<p>Date of Receipt 09 08 2004</p> <p>Amount 500.00</p>
<p>D. Full Name of Donor Frank Jackson</p> <p>Mailing Address of Donor 1460 Raven Hill Rd</p> <p>City State Zip Mechanicsburg PA 17055</p>	<p>Date of Receipt 08 27 2004</p> <p>Amount 1,000.00</p>
<p>E. Full Name of Donor Ron and Susan Jackson</p> <p>Mailing Address of Donor 13331 Buckland Hall Rd.</p> <p>City State Zip St. Louis MO 63131</p>	<p>Date of Receipt 08 12 2004</p> <p>Amount 1,000.00</p>
<p>SUBTOTAL of Donations This Page (optional)</p>	<p>4,000.00</p>
<p>TOTAL This Period (last page this line number only)</p> <p>(carry total from last page to Line 9)</p>	<p>4,689.50</p>

SCHEDULE 9-A

Donation(s) Received

<p>A. Full Name of Donor Betty Jean Salyer</p> <p>Mailing Address of Donor 172 Lily Lane</p> <p>City State Zip Whitter NC 28789</p>	<p>Date of Receipt 03 02 2004</p> <p>Amount 1,000.00</p>
<p>B. Full Name of Donor Thomas Jeckesing</p> <p>Mailing Address of Donor 7720 Mayfield Rd</p> <p>City State Zip Gates Mill OH 44040</p>	<p>Date of Receipt 08 07 2004</p> <p>Amount 5,000.00</p>
<p>C. Full Name of Donor Edward Jesie</p> <p>Mailing Address of Donor 732 El Rodeo Road</p> <p>City State Zip Santa Barbara CA 93110</p>	<p>Date of Receipt 08 28 2004</p> <p>Amount 1,000.00</p>
<p>D. Full Name of Donor Henry Jimenez</p> <p>Mailing Address of Donor 2172 March Place</p> <p>City State Zip San Diego CA 92110</p>	<p>Date of Receipt 08 24 2004</p> <p>Amount 1,000.00</p>
<p>E. Full Name of Donor James Johnson</p> <p>Mailing Address of Donor 7418 Maryland Ave.</p> <p>City State Zip St. Louis MO 63130</p>	<p>Date of Receipt 08 27 2004</p> <p>Amount 1,000.00</p>

<p>SUBTOTAL of Donations This Page (optional)</p>	<p>9,000.00</p>
<p>TOTAL This Period (last page this line number only) (carry total from last page to Line B)</p>	<p>47,795.00</p>

SCHEDULE 9-A
Donation(s) Received

A. Full Name of Donor Raymond Johnson			Date of Receipt 08 25 2004 Annual 1,000.00	
Mailing Address of Donor 340 Marcia Dr.				
City Luling	State LA	Zip 70070		
B. Full Name of Donor Robert Johnson			Date of Receipt 08 25 2004 Annual 1,000.00	
Mailing Address of Donor 1500 Sixth St S				
City Minneapolis	State MN	Zip 55454		
C. Full Name of Donor Thomas Johnson			Date of Receipt 08 02 2004 Annual 1,000.00	
Mailing Address of Donor Post Office Box 421549				
City Atlanta	State GA	Zip 30342		
D. Full Name of Donor Dean Johnston			Date of Receipt 08 01 2004 Annual 1,000.00	
Mailing Address of Donor 19 Snowfield Ct.				
City Midland	State MI	Zip 48640		
E. Full Name of Donor Richard H. Jones			Date of Receipt 08 25 2004 Annual 1,000.00	
Mailing Address of Donor PO Box 1549				
City Melrose	State FL	Zip 32666		
SUBTOTAL of Donations This Page (optional)			5,000.00	
TOTAL This Period (last page this line number only) (carry total from last page to Line 9)			48,295.00	

SCHEDULE 9-A
Donation(s) Received

<p>A. Full Name of Donor benjamin karcher</p> <p>Mailing Address of Donor 2300 e. orangewod ave</p> <p>City State Zip anaheim CA 92806</p>	<p>Date of Receipt 0 9 0 1 2 0 0 4</p> <p>Amount 1 0 0 0 0 0</p>
<p>B. Full Name of Donor Harvey Karp</p> <p>Mailing Address of Donor 10 West End Road(P.O.Box 30)</p> <p>City State Zip East Hampton NY 11937</p>	<p>Date of Receipt 0 8 2 1 2 0 0 4</p> <p>Amount 1 0 0 0 0 0</p>
<p>C. Full Name of Donor Harvey Karp</p> <p>Mailing Address of Donor P.O.Box 30</p> <p>City State Zip East Hampton NY 11937</p>	<p>Date of Receipt 0 8 0 5 2 0 0 4</p> <p>Amount 1 0 0 0 0 0</p>
<p>D. Full Name of Donor Harvey Karp</p> <p>Mailing Address of Donor P.O.Box 30 (10 West End Road)</p> <p>City State Zip East Hampton NY 11937</p>	<p>Date of Receipt 0 9 0 2 2 0 0 4</p> <p>Amount 1 0 0 0 0 0</p>
<p>E. Full Name of Donor Paul M. Keating</p> <p>Mailing Address of Donor PO Box 277</p> <p>City State Zip Westwood Ma 02090</p>	<p>Date of Receipt 0 8 0 7 2 0 0 4</p> <p>Amount 1 0 0 0 0 0</p>
<p>SUBTOTAL of Donations This Page (optional) ▶</p>	<p>5 0 0 0 0 0</p>
<p>TOTAL This Period (last page IRS line number only) ▶ (carry total from last page to Line 9)</p>	<p>4 8 7 9 5 0 0 0</p>

SCHEDULE 9-A
Donation(s) Received

<p>A. Full Name of Donor Paul M. Keating</p> <p>Mailing Address of Donor PO Box 277</p> <p>City State Zip Westwood MA 02090</p>	<p>Date of Receipt 0 8 / 0 2 / 2 0 0 4</p> <p>Amount 1 0 0 0 0 0</p>
<p>B. Full Name of Donor steven a. kempe</p> <p>Mailing Address of Donor P.O. Box 450006</p> <p>City State Zip Houston TX 77245</p>	<p>Date of Receipt 0 8 / 2 9 / 2 0 0 4</p> <p>Amount 1 0 0 0 0 0</p>
<p>C. Full Name of Donor Mark Kendrat</p> <p>Mailing Address of Donor 835 Crest Dr</p> <p>City State Zip Cary IL 60013</p>	<p>Date of Receipt 0 8 / 2 2 / 2 0 0 4</p> <p>Amount 2 5 0 0 0 0</p>
<p>D. Full Name of Donor Charles King</p> <p>Mailing Address of Donor 416 Sand Hill Circle</p> <p>City State Zip Menlo Park CA 94025</p>	<p>Date of Receipt 0 8 / 1 0 / 2 0 0 4</p> <p>Amount 1 0 0 0 0 0</p>
<p>E. Full Name of Donor Rodger B. King</p> <p>Mailing Address of Donor PO BOX 1008</p> <p>City State Zip Tampa FL 33601</p>	<p>Date of Receipt 0 8 / 0 7 / 2 0 0 4</p> <p>Amount 1 0 0 0 0 0</p>
<p>SUBTOTAL of Donations This Page (optional) 6 5 0 0 0 0</p>	
<p>TOTAL This Period (last page this line number only) 4 9 4 4 5 0 0 0 (carry total from last page to Line 9)</p>	

SCHEDULE 9-A
Donation(s) Received

<p>A. Full Name of Donor Barney Klinger</p> <p>Mailing Address of Donor 21604 Parvin Drive</p> <p>City State Zip Santa Clarita CA 91350</p>	<p>Date of Receipt 08 01 2004</p> <p>Amount 1,000.00</p>
<p>B. Full Name of Donor Aki Korhonen</p> <p>Mailing Address of Donor 765 Summer Star Place</p> <p>City State Zip Reno NV 89511</p>	<p>Date of Receipt 08 04 2004</p> <p>Amount 1,000.00</p>
<p>C. Full Name of Donor Karen A. Koval</p> <p>Mailing Address of Donor 507 Valhalla Lane</p> <p>City State Zip Sewickley Heights PA 15143</p>	<p>Date of Receipt 08 07 2004</p> <p>Amount 5,000.00</p>
<p>D. Full Name of Donor norman krischer</p> <p>Mailing Address of Donor 151 highland ave</p> <p>City State Zip montclair NJ 07042</p>	<p>Date of Receipt 08 28 2004</p> <p>Amount 2,500.00</p>
<p>E. Full Name of Donor Mark Kroll</p> <p>Mailing Address of Donor 493 Sinaloa Road</p> <p>City State Zip Simi Valley CA 93065</p>	<p>Date of Receipt 09 05 2004</p> <p>Amount 1,000.00</p>
<p>SUBTOTAL of Donations TNs Page (optional)</p>	<p>1,050.00</p>
<p>TOTAL This Period (last page this line number only)</p> <p>(carry total from last page to Line 9)</p>	<p>5,049.50</p>

SCHEDULE 9-A
Donation(s) Received

<p>A. Full Name of Donor arthur kubach</p> <hr/> <p>Mailing Address of Donor 24 sunflower circle</p> <hr/> <p>City State Zip lumberton NJ 08040</p>	<p>Date of Receipt 0 8 2 0 2 0 0 4</p> <p>Amount 1 0 0 0 0 0</p>
<p>B. Full Name of Donor Ray Kubly</p> <hr/> <p>Mailing Address of Donor 1112 7th Ave</p> <hr/> <p>City State Zip Monroe WI 53566</p>	<p>Date of Receipt 0 8 2 1 2 0 0 4</p> <p>Amount 1 0 0 0 0 0</p>
<p>C. Full Name of Donor Ray Kubly</p> <hr/> <p>Mailing Address of Donor 1112 7th ave</p> <hr/> <p>City State Zip Monroe WI 53566</p>	<p>Date of Receipt 0 8 0 8 2 0 0 4</p> <p>Amount 1 0 0 0 0 0</p>
<p>D. Full Name of Donor Dean Kyer</p> <hr/> <p>Mailing Address of Donor 86 Hunting Hills</p> <hr/> <p>City State Zip Charleston WV 25311</p>	<p>Date of Receipt 0 8 2 1 2 0 0 4</p> <p>Amount 1 0 0 0 0 0</p>
<p>E. Full Name of Donor Leon Lang</p> <hr/> <p>Mailing Address of Donor 26417 N. Fernbush Dr.</p> <hr/> <p>City State Zip Glendale AZ 85310</p>	<p>Date of Receipt 0 8 2 4 2 0 0 4</p> <p>Amount 1 0 0 0 0 0</p>
<p>SUBTOTAL of Donations This Page (optional) ▶ 5 0 0 0 0 0</p> <hr/> <p>TOTAL This Period (last page this line number only) ▶ 5 0 9 8 5 0 0 0 (carry over from last page to Line #)</p>	

SCHEDULE 9-A
Donation(s) Received

<p>A. Full Name of Donor Ed Lasky</p> <p>Mailing Address of Donor 1250 Ridge Road</p> <p>City State Zip Northbrook IL 60062</p>	<p>Date of Receipt 08 21 2004</p> <p>Amount 5 000 00</p>
<p>B. Full Name of Donor Ed Lasky</p> <p>Mailing Address of Donor 1250 Ridge Rd</p> <p>City State Zip Northbrook IL 60062</p>	<p>Date of Receipt 08 02 2004</p> <p>Amount 5 000 00</p>
<p>C. Full Name of Donor Elizabeth Latham</p> <p>Mailing Address of Donor 2539 Logmill Rd</p> <p>City State Zip Haymarket VA 20169</p>	<p>Date of Receipt 08 28 2004</p> <p>Amount 1 000 00</p>
<p>D. Full Name of Donor William Latham</p> <p>Mailing Address of Donor 2539 Logmill Rd</p> <p>City State Zip Haymarket VA 20169</p>	<p>Date of Receipt 08 28 2004</p> <p>Amount 2 000 00</p>
<p>E. Full Name of Donor John Lavigne</p> <p>Mailing Address of Donor 4113 Lawrence street</p> <p>City State Zip Alexandria VA 22309</p>	<p>Date of Receipt 08 19 2004</p> <p>Amount 5 000 00</p>
<p>SUBTOTAL of Donations This Page (optional) ▶ 5 500 00</p>	
<p>TOTAL This Period (last page lists line number only) ▶ 5 154 50 00 (carry total from last page to Line 9)</p>	

SCHEDULE 9-A
Donation(s) Received

<p>A. Full Name of Donor John Lavigne</p> <p>Mailing Address of Donor 4113 Lawrence Street</p> <p>City State Zip Alexandria VA 22309</p>	<p>Date of Receipt 08 20 2004</p> <p>Amount 50000</p>
<p>B. Full Name of Donor Tim Lee</p> <p>Mailing Address of Donor 9825 Willows Road NE, Suite 100</p> <p>City State Zip Redmond WA 98052</p>	<p>Date of Receipt 08 20 2004</p> <p>Amount 250000</p>
<p>C. Full Name of Donor Michael Leib</p> <p>Mailing Address of Donor 51 Centre Hill Road</p> <p>City State Zip Sugarloaf PA 18249</p>	<p>Date of Receipt 08 24 2004</p> <p>Amount 100000</p>
<p>D. Full Name of Donor Darryl Leifheit</p> <p>Mailing Address of Donor 3820 Huffman Mill Pike</p> <p>City State Zip Lexington KY 40511</p>	<p>Date of Receipt 08 28 2004</p> <p>Amount 100000</p>
<p>E. Full Name of Donor Daryl Leifheit</p> <p>Mailing Address of Donor 3820 Huffman Mill Pike</p> <p>City State Zip Lexington KY 40511</p>	<p>Date of Receipt 08 28 2004</p> <p>Amount 250000</p>
<p>SUBTOTAL of Donations This Page (optional)</p>	<p>660000</p>
<p>TOTAL This Period (last page this line number only)</p> <p>(carry total from last page to Line 5)</p>	<p>52205000</p>

SCHEDULE 9-A
Donation(s) Received

<p>A. Full Name of Donor Norman F. Lent</p> <p>Mailing Address of Donor 2336 South Queen St.</p> <p>City State Zip Arlington VA 22202</p>	<p>Date of Receipt 08 31 2004</p> <p>Amount 1,000.00</p>
<p>B. Full Name of Donor Steven Levine</p> <p>Mailing Address of Donor 26800 Degas Ln</p> <p>City State Zip Valencia CA 91355</p>	<p>Date of Receipt 08 20 2004</p> <p>Amount 1,000.00</p>
<p>C. Full Name of Donor Richard Levy</p> <p>Mailing Address of Donor P.O. Box 2356 (887 Wildrose Circle)</p> <p>City State Zip Lake Arrowhead CA 92352</p>	<p>Date of Receipt 08 26 2004</p> <p>Amount 1,000.00</p>
<p>D. Full Name of Donor Edward Lewandowski</p> <p>Mailing Address of Donor 805 Darrell Road</p> <p>City State Zip Hillsborough CA 94010</p>	<p>Date of Receipt 08 20 2004</p> <p>Amount 1,000.00</p>
<p>E. Full Name of Donor John J. Lewis, Jr</p> <p>Mailing Address of Donor 212 Daie Avenue</p> <p>City State Zip Scranton PA 18504</p>	<p>Date of Receipt 09 07 2004</p> <p>Amount 1,000.00</p>
<p>SUBTOTAL of Donations This Page (optional)</p>	<p>5,000.00</p>
<p>TOTAL This Period (last page via the number only)</p> <p>(carry total from last page to Line 9)</p>	<p>5,270.50</p>

SCHEDULE 9-A
Donation(s) Received

A. Full Name of Donor Yung Lim			Date of Receipt M M Y Y 0 8 0 9 2 0 0 4	
Mailing Address of Donor 57 East Delaware Place, #3705			Amount 1 0 0 0 0 0	
City Chicago	State IL	Zip 60611		
B. Full Name of Donor Robert C. Lindquist			Date of Receipt M M Y Y 0 8 0 9 2 0 0 4	
Mailing Address of Donor 2 Crazy Horse Court			Amount 1 0 0 0 0 0	
City Palm Coast	State FL	Zip 38137		
C. Full Name of Donor Christine M. Lindsay			Date of Receipt M M Y Y 0 5 1 7 2 0 0 4	
Mailing Address of Donor 38 Maria Drive			Amount 2 0 0 0 0 0	
City Loudonville	State NY	Zip 12211		
D. Full Name of Donor HAROLD LOVEMAN			Date of Receipt M M Y Y 0 8 1 5 2 0 0 4	
Mailing Address of Donor 7 PLEASANT HILL DR.			Amount 5 0 0 0 0 0	
City P.V.E.	State CA	Zip 90274		
E. Full Name of Donor HAROLD LOVEMAN			Date of Receipt M M Y Y 0 8 2 5 2 0 0 4	
Mailing Address of Donor 7 PLEASANT HILL DR.			Amount 5 0 0 0 0 0	
City ROLLING HILLS EST	State CA	Zip 90274		
SUBTOTAL of Donations This Page (optional)			5 0 0 0 0 0	
TOTAL This Period (last page this line number only) (carry total from last page to Line B)			5 3 2 0 5 0 0 0	

SCHEDULE 9-A

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Donation(s) Received

A. Full Name of Donor HAROLD LUKAS Mailing Address of Donor 7541 W 119TH City State Zip OVERLAND PARK KS 66213	Date of Receipt M O Y Y 0 8 0 5 2 0 0 4 Amount 5 0 0 0 0
B. Full Name of Donor HAROLD LUKAS Mailing Address of Donor 7541 WEST 119TH City State Zip OVERLAND PARK KS 66213	Date of Receipt M O Y Y 0 8 0 5 2 0 0 4 Amount 5 0 0 0 0
C. Full Name of Donor Michael Macielag Mailing Address of Donor 23463 Cacaway Farm Lane City State Zip Chesterfown MD 21620	Date of Receipt M O Y Y 0 8 2 6 2 0 0 4 Amount 1 0 0 0 0 0
D. Full Name of Donor J.S. Mailho Mailing Address of Donor 2954 Pine Valley City State Zip Sandestin FL 32550	Date of Receipt M O Y Y 0 8 2 4 2 0 0 4 Amount 2 5 0 0 0 0
E. Full Name of Donor walter malinowski Mailing Address of Donor 8903 chequers way City State Zip mclean VA 22102	Date of Receipt M O Y Y 0 8 2 0 2 0 0 4 Amount 1 0 0 0 0 0
SUBTOTAL of Donations TNs Page (optional)	5 5 0 0 0 0
TOTAL This Period (last page this line number only) (carry total from last page to line 9)	5 3 7 5 5 0 0 0

SCHEDULE 9-A

Donation(s) Received

A. Full Name of Donor Thomas Maney			Date of Receipt 08 02 2004	
Mailing Address of Donor 535 Greenglade Ave.			Amount 1 0 0 0 0 0	
City Worthington	State OH	Zip 43085		
B. Full Name of Donor Thomas P. Maney			Date of Receipt 08 02 2004	
Mailing Address of Donor 535 Greenglade Ave			Amount 1 0 0 0 0 0	
City Worthington	State OH	Zip 43085		
C. Full Name of Donor Kenneth Marcus			Date of Receipt 08 11 2004	
Mailing Address of Donor 12494 Palos Tierra Road			Amount 5 0 0 0 0 0	
City Valley Center	State CA	Zip 92082		
D. Full Name of Donor Kenneth J. Marcus			Date of Receipt 08 05 2004	
Mailing Address of Donor 12494 Palos Tierra Road			Amount 5 0 0 0 0 0	
City Valley Center	State CA	Zip 92082		
E. Full Name of Donor Col. Franklin D. Margiotta			Date of Receipt 02 26 2004	
Mailing Address of Donor 6383 Avington Place			Amount 1 0 0 0 0 0	
City Gainesville	State VA	Zip 20155		
SUBTOTAL of Donations This Page (optional)			3 1 0 0 0 0	
TOTAL This Period (last page this line number only) (carry total from last page to Line 9)			5 4 0 6 5 0 0 0	

SCHEDULE 9-A

Donation(s) Received

<p>A. Full Name of Donor Wm. Marshall Lee</p> <p>Mailing Address of Donor 84 Otis Road</p> <p>City State Zip Barrington IL 60010</p>	<p>Date of Receipt 08 03 2004</p> <p>Amount 1,000.00</p>
<p>B. Full Name of Donor John Martin</p> <p>Mailing Address of Donor Box 50190</p> <p>City State Zip Casper WY 82605</p>	<p>Date of Receipt 08 31 2004</p> <p>Amount 2,500.00</p>
<p>C. Full Name of Donor laurel martin</p> <p>Mailing Address of Donor 1690 cielito drive</p> <p>City State Zip giendale CA 91207</p>	<p>Date of Receipt 08 06 2004</p> <p>Amount 1,000.00</p>
<p>D. Full Name of Donor rex s. martin</p> <p>Mailing Address of Donor 1915 cocopium way</p> <p>City State Zip napies FL 34105</p>	<p>Date of Receipt 08 20 2004</p> <p>Amount 1,000.00</p>
<p>E. Full Name of Donor William Martin</p> <p>Mailing Address of Donor P.O. Box 1003</p> <p>City State Zip Charles Town WV 25414</p>	<p>Date of Receipt 08 04 2004</p> <p>Amount 1,000.00</p>
<p>SUBTOTAL of Donations This Page (optional) ▶ 6,500.00</p>	
<p>TOTAL This Period (last page this line number only) ▶ 6,471.50 (carry total from last page to line 9)</p>	

SCHEDULE 9-A
Donation(s) Received

<p>A. Full Name of Donor Stephen Matthews</p> <p>Mailing Address of Donor 8045 West 383rd St.</p> <p>City State Zip LaCygne KS 66040</p>	<p>Date of Receipt 0 0 2 2 2 0 0 4</p> <p>Amount 1 0 0 0 0 0</p>
<p>B. Full Name of Donor Michael Maurer</p> <p>Mailing Address of Donor 9209 Falcon Way</p> <p>City State Zip Sandy UT 84093</p>	<p>Date of Receipt 0 5 2 0 2 0 0 4</p> <p>Amount 1 0 0 0 0 0</p>
<p>C. Full Name of Donor Aubrey McClendon</p> <p>Mailing Address of Donor 6902 Avondale Drive</p> <p>City State Zip Oklahoma City OK 73116</p>	<p>Date of Receipt 0 8 0 8 2 0 0 4</p> <p>Amount 2 5 0 0 0 0 0 0</p>
<p>D. Full Name of Donor Thomas McGrath</p> <p>Mailing Address of Donor 21 Wychwood Lane</p> <p>City State Zip Langhorne PA 19047</p>	<p>Date of Receipt 0 8 0 8 2 0 0 4</p> <p>Amount 1 0 0 0 0 0</p>
<p>E. Full Name of Donor Thomas McGrath</p> <p>Mailing Address of Donor 21 Wychwood Lane</p> <p>City State Zip Langhorne PA 19047</p>	<p>Date of Receipt 0 8 0 8 2 0 0 4</p> <p>Amount 1 0 0 0 0 0</p>
<p>SUBTOTAL of Donations This Page (optional)</p> <p>TOTAL This Period (last page this line number only)</p> <p>(carry total from last page to Line 5)</p>	<p>2 5 4 0 0 0 0 0</p> <p>8 0 1 1 5 0 0 0</p>

SCHEDULE 9-A
Donation(s) Received

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A. Full Name of Donor Dana C. McManus Mailing Address of Donor 59 Lupin Ln. City State Zip Atherton CA 94027	Date of Receipt 08 01 2004 Amount 1,000.00
B. Full Name of Donor Douglas McMillan Mailing Address of Donor 707 Goodrich Avenue City State Zip St. Paul MN 55105	Date of Receipt 08 03 2004 Amount 1,000.00
C. Full Name of Donor Paul McTigue Mailing Address of Donor 15 Gainsborough Road City State Zip Scarsdale NY 10583	Date of Receipt 08 07 2004 Amount 1,000.00
D. Full Name of Donor Daniel E. Meehan Mailing Address of Donor 1473 East Goodrich Lane City State Zip Fox Point WI 53217	Date of Receipt 08 30 2004 Amount 1,000.00
E. Full Name of Donor Gilbert Meehan Mailing Address of Donor 9 Coprock Road City State Zip Tarrytown NY 10591	Date of Receipt 08 02 2004 Amount 1,000.00
SUBTOTAL of Donations This Page (optional)	1,400.00
TOTAL This Period (last page this line number only) (carry total from last page to Line B)	8,151.50

SCHEDULE 9-A
Donation(s) Received

<p>A. Full Name of Donor james mellers</p> <p>Mailing Address of Donor 5160 s sterling way</p> <p>City State Zip springfield MO 65809</p>	<p>Date of Receipt 08 19 2004</p> <p>Amount 1,000.00</p>
<p>B. Full Name of Donor Philip Mercer</p> <p>Mailing Address of Donor 11208 Ridermark Row</p> <p>City State Zip Columbia, MD 21044</p>	<p>Date of Receipt 08 19 2004</p> <p>Amount 2,500.00</p>
<p>C. Full Name of Donor thomas mercurio</p> <p>Mailing Address of Donor 10411 windtree drive</p> <p>City State Zip los angeles CA 90077</p>	<p>Date of Receipt 09 05 2004</p> <p>Amount 1,000.00</p>
<p>D. Full Name of Donor Hazel G. Meske</p> <p>Mailing Address of Donor 11 upper Woodcrest Rd</p> <p>City State Zip Berwick PA 18603</p>	<p>Date of Receipt 08 07 2004</p> <p>Amount 1,000.00</p>
<p>E. Full Name of Donor Connie Metrock</p> <p>Mailing Address of Donor PO Box 36</p> <p>City State Zip Montevallo AL 35115</p>	<p>Date of Receipt 08 25 2004</p> <p>Amount 1,000.00</p>
<p>SUBTOTAL of Donations This Page (optional)</p> <p>TOTAL This Period (ask page this line number only)</p> <p>(carry total from last page to Line 8)</p>	<p>6,500.00</p> <p>8,215.00</p>

SCHEDULE 9-A
Donation(s) Received

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A. Full Name of Donor Michael C. Mewhinney <hr/> Mailing Address of Donor 4242 Cochran Chapel <hr/> City State Zip Dallas TX 75201	Date of Receipt M M D D Y Y 0 8 0 7 2 0 0 4 Amount 5,000.00
B. Full Name of Donor joseph meyer <hr/> Mailing Address of Donor 4899 5th ave north <hr/> City State Zip st petersburg FL 33713	Date of Receipt M M D D Y Y 0 8 0 1 2 0 0 4 Amount 2,500.00
C. Full Name of Donor Wolf Michelson <hr/> Mailing Address of Donor 980 Mary Crest Rd. Suite B <hr/> City State Zip Henderson NV 89014	Date of Receipt M M D D Y Y 0 8 0 1 2 0 0 4 Amount 1,000.00
D. Full Name of Donor carl middleton <hr/> Mailing Address of Donor 3219 N. Wakefield St. <hr/> City State Zip Arlington VA 22207	Date of Receipt M M D D Y Y 0 8 0 2 2 0 0 4 Amount 1,000.00
E. Full Name of Donor Magdy Mikhail <hr/> Mailing Address of Donor 78 Hampton Oval <hr/> City State Zip New Rochelle NY 10805	Date of Receipt M M D D Y Y 0 8 0 3 2 0 0 4 Amount 1,000.00
SUBTOTAL of Donations This Page (optional) ▶	1,050.00
TOTAL This Period (last page this line number only) ▶ (carry total from last page to Line 9)	8,321.50

SCHEDULE 9-A
Donation(s) Received

A. Full Name of Donor Joseph Miller			Date of Receipt M M D D Y Y Y Y 0 8 2 4 2 0 0 4	
Mailing Address of Donor 7327 Christopher Drive			Amount 2 5 0 0 . 0 0	
City	State	Zip		
St. Louis	MO	63129		
B. Full Name of Donor Robert Miller			Date of Receipt M M D D Y Y Y Y 0 9 0 3 2 0 0 4	
Mailing Address of Donor 2271 Country Club Drive			Amount 1 0 0 0 . 0 0	
City	State	Zip		
Pittsburgh	PA	15241		
C. Full Name of Donor richard minshall			Date of Receipt M M D D Y Y Y Y 0 9 0 1 2 0 0 4	
Mailing Address of Donor 320 south boston suite 825			Amount 1 0 0 0 . 0 0	
City	State	Zip		
tulsa	OK	74103		
D. Full Name of Donor John Mitchell			Date of Receipt M M D D Y Y Y Y 0 8 2 5 2 0 0 4	
Mailing Address of Donor PO Box 606			Amount 1 0 0 0 . 0 0	
City	State	Zip		
Deer Park	WA	99006		
E. Full Name of Donor John E. Mitchell			Date of Receipt M M D D Y Y Y Y 0 9 0 2 2 0 0 4	
Mailing Address of Donor PO Box 606			Amount 1 0 0 0 . 0 0	
City	State	Zip		
Deer Park	WA	99006		
SUBTOTAL of Donations This Page (optional)			5 6 0 0 . 0 0	
TOTAL This Period (last page fills in number only) (carry total from last page to Line 5)			8 3 7 7 5 0 . 0 0	

SCHEDULE 9-A
Donation(s) Received

<p>A. Full Name of Donor Dan Moody</p> <p>Mailing Address of Donor 3003 W. Alabama</p> <p>City State Zip Houston TX 77098</p>	<p>Date of Receipt 08 24 2004</p> <p>Amount 2,500.00</p>
<p>B. Full Name of Donor Dan M Moody III</p> <p>Mailing Address of Donor 3003 W. Alabama</p> <p>City State Zip Houston TX 77098</p>	<p>Date of Receipt 08 24 2004</p> <p>Amount 2,500.00</p>
<p>C. Full Name of Donor William Mora</p> <p>Mailing Address of Donor 1612 Billy Casper Dr.</p> <p>City State Zip El Paso TX 79936</p>	<p>Date of Receipt 08 22 2004</p> <p>Amount 1,000.00</p>
<p>D. Full Name of Donor Richard Morash</p> <p>Mailing Address of Donor 52 Chestnut Streets</p> <p>City State Zip Boston MA 02108</p>	<p>Date of Receipt 08 02 2004</p> <p>Amount 1,000.00</p>
<p>E. Full Name of Donor David Morgan</p> <p>Mailing Address of Donor 18922 76th Ave SE</p> <p>City State Zip Snohomish WA 98296</p>	<p>Date of Receipt 08 14 2004</p> <p>Amount 1,000.00</p>

<p>SUBTOTAL of Donations This Page (optional)</p>	<p>7,100.00</p>
<p>TOTAL This Period (last page this line number only)</p> <p>(carry total from last page to Line 9)</p>	<p>8,448.50</p>

SCHEDULE 9-A
Donation(s) Received

<p>A. Full Name of Donor David Morgan</p> <p>Mailing Address of Donor 18922 76th Ave SE</p> <p>City State Zip Snohomish WA 98296</p>	<p>Date of Receipt 08 21 2004</p> <p>Amount 1,000.00</p>
<p>B. Full Name of Donor John Morgan</p> <p>Mailing Address of Donor 6028 Cessna Dr</p> <p>City State Zip Rockford IL 61109</p>	<p>Date of Receipt 08 07 2004</p> <p>Amount 2,500.00</p>
<p>C. Full Name of Donor John Morgan</p> <p>Mailing Address of Donor 6028 Cessna Dr</p> <p>City State Zip Rockford IL 61109</p>	<p>Date of Receipt 08 20 2004</p> <p>Amount 2,500.00</p>
<p>D. Full Name of Donor John Morgan</p> <p>Mailing Address of Donor 6028 Cessna Dr</p> <p>City State Zip Rockford IL 61109</p>	<p>Date of Receipt 08 27 2004</p> <p>Amount 500.00</p>
<p>E. Full Name of Donor G. Thomas Mortensen</p> <p>Mailing Address of Donor 2252 Encinal Avenue</p> <p>City State Zip Alameda CA 94501</p>	<p>Date of Receipt 08 27 2004</p> <p>Amount 1,000.00</p>
<p>SUBTOTAL of Donations This Page (optional)</p>	<p>3,000.00</p>
<p>TOTAL This Period (last page this line number only)</p> <p>(carry total from last page to Line 9)</p>	<p>8,478.50</p>

SCHEDULE 9-A
Donation(s) Received

<p>A. Full Name of Donor alexandra morton</p> <p>Mailing Address of Donor po box 2876</p> <p>City State Zip alpharetta GA 30023</p>	<p>Date of Receipt 0 8 3 1 2 0 0 4</p> <p>Amount 1 0 0 0 0 0</p>
<p>B. Full Name of Donor cyril moule-berteaux</p> <p>Mailing Address of Donor 112 east 19th st (apt 7R)</p> <p>City State Zip new york NY 10003</p>	<p>Date of Receipt 0 8 2 5 2 0 0 4</p> <p>Amount 1 0 0 0 0 0</p>
<p>C. Full Name of Donor mary movick</p> <p>Mailing Address of Donor 157 cottonwood</p> <p>City State Zip coppell TX 75019</p>	<p>Date of Receipt 0 8 0 2 2 0 0 4</p> <p>Amount 2 5 0 0 0 0</p>
<p>D. Full Name of Donor mary movick</p> <p>Mailing Address of Donor 157 cottonwood</p> <p>City State Zip coppell TX 75019</p>	<p>Date of Receipt 0 8 1 9 2 0 0 4</p> <p>Amount 2 5 0 0 0 0</p>
<p>E. Full Name of Donor mary movick</p> <p>Mailing Address of Donor 157 cottonwood</p> <p>City State Zip coppell TX 75019</p>	<p>Date of Receipt 0 8 2 8 2 0 0 4</p> <p>Amount 5 0 0 0 0 0</p>
<p>SUBTOTAL of Donations This Page (optional) ▶ , 3 0 0 0 0 0</p>	
<p>TOTAL This Period (last page this line number only) ▶ , 8 5 0 8 5 0 0 0 (carry total from last page to Line 9)</p>	

SCHEDULE 9-A
Donation(s) Received

<p>A. Full Name of Donor stanley mrose</p> <p>Mailing Address of Donor 3 stonewall circle</p> <p>City State Zip west harrison NY 10604</p>	<p>Date of Receipt 08 28 2004</p> <p>Amount 1,000.00</p>
<p>B. Full Name of Donor Paul Murphy</p> <p>Mailing Address of Donor 200 Seaport Blvd Z1C</p> <p>City State Zip Boston MA 02210</p>	<p>Date of Receipt 08 12 2004</p> <p>Amount 2,500.00</p>
<p>C. Full Name of Donor Marcia Naporano</p> <p>Mailing Address of Donor PO Box 187</p> <p>City State Zip Essex Fells NJ 07021</p>	<p>Date of Receipt 08 07 2004</p> <p>Amount 1,000.00</p>
<p>D. Full Name of Donor Brenda & Kent Nelson</p> <p>Mailing Address of Donor 10003 W Evans Ave</p> <p>City State Zip Lakewood CO 80227</p>	<p>Date of Receipt 08 20 2004</p> <p>Amount 1,000.00</p>
<p>E. Full Name of Donor James Neison</p> <p>Mailing Address of Donor 1954 alta vista dr</p> <p>City State Zip Roseville MN 55113</p>	<p>Date of Receipt 08 02 2004</p> <p>Amount 1,000.00</p>
<p>SUBTOTAL of Donations This Page (optional) ▶ 6,500.00</p>	
<p>TOTAL This Period (last page this line number only) ▶ 8,573.50 (carry total from last page to Line 9)</p>	

SCHEDULE 9-A

Donation(s) Received

A. Full Name of Donor leonard nelson			Date of Receipt 08 05 2004	
Mailing Address of Donor 137 ammons drive			Amount 1 0 0 0 0	
City raleigh	State NC	Zip 27615		
B. Full Name of Donor leonard nelson			Date of Receipt 08 24 2004	
Mailing Address of Donor 137 ammons drive			Amount 1 0 0 0 0	
City raleigh	State NC	Zip 27615		
C. Full Name of Donor Theodore Newlin			Date of Receipt 09 01 2004	
Mailing Address of Donor 60 Caldwell Road			Amount 1 0 0 0 0	
City Stillwater	State NY	Zip 12170		
D. Full Name of Donor Robert Nickell			Date of Receipt 08 29 2004	
Mailing Address of Donor 4655 Meadowood Rd.			Amount 2 5 0 0 0	
City Dallas	State TX	Zip 75220		
E. Full Name of Donor Kathleen Nielson			Date of Receipt 08 21 2004	
Mailing Address of Donor 400 Lone Eagle Point			Amount 1 0 0 0 0	
City Lafayette	State CO	Zip 80026		
SUBTOTAL of Donations This Page (optional)			5 6 0 0 0	
TOTAL This Period (last page this line number only) (carry total from last page to line 9)			8 6 2 9 5 0 0 0	

SCHEDULE 9-A

Donation(s) Received

A. Full Name of Donor Richard Nielson			Date of Receipt 08 27 2004	
Mailing Address of Donor 141 Riverplace Drive			Amount 1,000.00	
City Pierre	State SD	Zip 57501		

B. Full Name of Donor steve nixon			Date of Receipt 09 01 2004	
Mailing Address of Donor 12030 clark st.			Amount 1,000.00	
City santa fe springs	State CA	Zip 90670		

C. Full Name of Donor Frederick Noble			Date of Receipt 08 07 2004	
Mailing Address of Donor 41-700 Corporate Way Suite D			Amount 2,500.00	
City Palm Desert	State CA	Zip 92260		

D. Full Name of Donor Frederick Noble			Date of Receipt 08 20 2004	
Mailing Address of Donor 41-700 Corporate Way Suite D			Amount 2,500.00	
City Palm Desert	State CA	Zip 92260		

E. Full Name of Donor John O'Neill			Date of Receipt 05 04 2004	
Mailing Address of Donor 1000 Louisiana, Suite 1800			Amount 2,500.00	
City Houston	State TX	Zip 77002		

SUBTOTAL of Donations This Page (optional)	3,200.00
TOTAL This Period (last page this line number only)	8,949.50
(carry total from last page to Line 5)	

SCHEDULE 9-A
Donation(s) Received

<p>A. Full Name of Donor John O'Neill</p> <p>Mailing Address of Donor 1000 Louisiana, Suite 1800</p> <p>City State Zip Houston TX 77002</p>	<p>Date of Receipt 07 02 2004</p> <p>Amount 1061000</p>
<p>B. Full Name of Donor Richard OBrien</p> <p>Mailing Address of Donor PO Box 698</p> <p>City State Zip White Stone VA 22578</p>	<p>Date of Receipt 08 15 2004</p> <p>Amount 1000000</p>
<p>C. Full Name of Donor Rebecca Oneill</p> <p>Mailing Address of Donor 502 South Beach Road</p> <p>City State Zip Hobe Solind FL 33455</p>	<p>Date of Receipt 09 07 2004</p> <p>Amount 5000000</p>
<p>D. Full Name of Donor fred palmer</p> <p>Mailing Address of Donor 4 ridgemoor drive</p> <p>City State Zip clayton MO 63105</p>	<p>Date of Receipt 09 03 2004</p> <p>Amount 1000000</p>
<p>E. Full Name of Donor Louis Panigutti</p> <p>Mailing Address of Donor 21 Huntingtown Rd</p> <p>City State Zip Newtown TN 08470</p>	<p>Date of Receipt 08 24 2004</p> <p>Amount 1000000</p>
<p>SUBTOTAL of Donations This Page (optional)</p>	<p>1771000</p>
<p>TOTAL This Period (last page file line number only)</p> <p>(carry total from last page to Line 8)</p>	<p>91265000</p>

SCHEDULE 9-A

Donation(s) Received

<p>A. Full Name of Donor Louis Panigutti</p> <p>Mailing Address of Donor 21 Huntingtown Rd</p> <p>City State Zip Newtown TN 06470</p>	<p>Date of Receipt 03 21 2004</p> <p>Amount 2,500.00</p>
<p>B. Full Name of Donor Mark Pasquerilla</p> <p>Mailing Address of Donor c/o Crown American; 1 Pasquerilla Plaza</p> <p>City State Zip Johnstown PA 15901</p>	<p>Date of Receipt 08 08 2004</p> <p>Amount 2,500.00</p>
<p>C. Full Name of Donor Mark Pasquerilla</p> <p>Mailing Address of Donor c/o Crown American; 1 Pasquerilla Plaza</p> <p>City State Zip Johnstown PA 15901</p>	<p>Date of Receipt 08 20 2004</p> <p>Amount 1,000.00</p>
<p>D. Full Name of Donor Mark Pasquerilla</p> <p>Mailing Address of Donor c/o Crown American; 1 Pasquerilla Plaza</p> <p>City State Zip Johnstown PA 15901</p>	<p>Date of Receipt 08 28 2004</p> <p>Amount 1,000.00</p>
<p>E. Full Name of Donor James A. Patterson</p> <p>Mailing Address of Donor 10000 Sheibyville Road</p> <p>City State Zip Louisville KY 40223</p>	<p>Date of Receipt 08 07 2004</p> <p>Amount 5,000.00</p>

<p>SUBTOTAL of Donations This Page (optional)</p>	<p>9,750.00</p>
<p>TOTAL This Period (last page this line number only)</p> <p>(carry total from last page to line 9)</p>	<p>9,224,100.00</p>

SCHEDULE 9-A
Donation(s) Received

<p>A. Full Name of Donor levi pearson</p> <p>Mailing Address of Donor 42-48 81st St. 2r</p> <p>City elmhurst State NY Zip 11373</p>	<p>Date of Receipt 08 25 2004</p> <p>Amount 1 0 0 0 0 0</p>
<p>B. Full Name of Donor Mitzi Perdue</p> <p>Mailing Address of Donor 1529 Woodland Road</p> <p>City Salisbury State MD Zip 21801</p>	<p>Date of Receipt 08 24 2004</p> <p>Amount 1 0 0 0 0 0</p>
<p>C. Full Name of Donor Mitzi Perdue</p> <p>Mailing Address of Donor 1529 Woodland Road</p> <p>City Salisbury State MD Zip 21801</p>	<p>Date of Receipt 08 03 2004</p> <p>Amount 1 0 0 0 0 0</p>
<p>D. Full Name of Donor Bob Perry</p> <p>Mailing Address of Donor P.O.Box 34153</p> <p>City Houston State TX Zip 77234</p>	<p>Date of Receipt 07 16 2004</p> <p>Amount 1 0 0 0 0 0 0 0</p>
<p>E. Full Name of Donor Bob J. Perry</p> <p>Mailing Address of Donor P.O. Box 34153</p> <p>City Houston State TX Zip 77234</p>	<p>Date of Receipt 06 30 2004</p> <p>Amount 1 0 0 0 0 0 0 0</p>
<p>SUBTOTAL of Donations This Page (optional)</p>	<p>2 0 3 0 0 0 0 0</p>
<p>TOTAL This Period (last page this line number only)</p> <p>(carry total from last page to Line E)</p>	<p>1 1 2 5 4 1 0 0 0</p>

SCHEDULE 9-A
Donation(s) Received

PAGE 100 OF 145

A. Full Name of Donor Wayne M. Perry			Date of Receipt 0 9 / 0 8 / 2 0 0 4	
Mailing Address of Donor 611 Evergreen Point Road			Amount 2,500.00	
City Medina	State WA	Zip 98039		
B. Full Name of Donor Wayne M. Perry			Date of Receipt 0 9 / 0 8 / 2 0 0 4	
Mailing Address of Donor P.O. Box 645 (611 Evergreen Pt. Rd.)			Amount 2,500.00	
City Medina	State WA	Zip 98039		
C. Full Name of Donor John Peterman			Date of Receipt 0 9 / 0 7 / 2 0 0 4	
Mailing Address of Donor 1000 East 80th Place, Suite 700 South			Amount 2,500.00	
City Merrillville	State IN	Zip 46410		
D. Full Name of Donor Hal Pettigrew			Date of Receipt 0 9 / 0 1 / 2 0 0 4	
Mailing Address of Donor 2311 Cedar Springs Rd., Suite 100			Amount 1,000.00	
City Dallas	State TX	Zip 75201		
E. Full Name of Donor Priscilla Petty			Date of Receipt 0 8 / 2 0 / 2 0 0 4	
Mailing Address of Donor 229 Oliver Road			Amount 1,000.00	
City Cincinnati	State OH	Zip 45215		
SUBTOTAL of Donations This Page (optional)			9,500.00	
TOTAL This Period (last page this line number only) (carry total from last page to Line B)			1,134,910.00	

SCHEDULE 9-A

Donation(s) Received

A. Full Name of Donor William Petty			Date of Receipt 08 20 2004	
Mailing Address of Donor 6717 NW 48th Lane			Amount 500.00	
City Gainesville	State FL	Zip 32653		
B. Full Name of Donor William Petty			Date of Receipt 08 08 2004	
Mailing Address of Donor 6717 NW 48th Lane			Amount 500.00	
City Gainesville	State FL	Zip 32653		
C. Full Name of Donor Steven Pfeifer			Date of Receipt 08 03 2004	
Mailing Address of Donor 189 Oak Ridge Avenue			Amount 1000.00	
City Summit	State NJ	Zip 07901		
D. Full Name of Donor JOHN PHELPS			Date of Receipt 08 20 2004	
Mailing Address of Donor BOX 1041			Amount 1000.00	
City VAIL	State CO	Zip 81658		
E. Full Name of Donor Cameron Phillips			Date of Receipt 08 08 2004	
Mailing Address of Donor 626 Chain Bridge Rd			Amount 2500.00	
City Mclean	State VA	Zip 22101		
SUBTOTAL of Donations This Page (optional)			5,500.00	
TOTAL This Period (last page this line number only) (carry total from last page to Line 9)			1,140,410.00	

SCHEDULE 9-A
Donation(s) Received

<p>A. Full Name of Donor Jim Phillips</p> <p>Mailing Address of Donor 101 Bull Street</p> <p>City State Zip Charleston SC 29401</p>	<p>Date of Receipt 09 02 2004</p> <p>Amount 1 0 0 0 0 0</p>
<p>B. Full Name of Donor Norm Phillips</p> <p>Mailing Address of Donor 71 N. Windsail Place</p> <p>City State Zip Spring TX 77381</p>	<p>Date of Receipt 08 03 2004</p> <p>Amount 1 0 0 0 0 0</p>
<p>C. Full Name of Donor Norm Phillips</p> <p>Mailing Address of Donor 71 N. Windsail Place</p> <p>City State Zip Spring TX 77381</p>	<p>Date of Receipt 08 22 2004</p> <p>Amount 5 0 0 0 0 0</p>
<p>D. Full Name of Donor Norm Phillips</p> <p>Mailing Address of Donor 71 N. Windsail Place</p> <p>City State Zip Spring TX 77381</p>	<p>Date of Receipt 08 04 2004</p> <p>Amount 5 0 0 0 0 0</p>
<p>E. Full Name of Donor Randall Phillips</p> <p>Mailing Address of Donor 626 Chain Bridge Rd</p> <p>City State Zip McLean VA 22101</p>	<p>Date of Receipt 05 05 2004</p> <p>Amount 1 0 0 0 0 0</p>
<p>SUBTOTAL of Donations This Page (optional)</p>	<p>3 1 0 0 0 0</p>
<p>TOTAL This Period (last page this line number only)</p> <p>(carry total from last page to Line 9)</p>	<p>1 1 4 3 5 1 0 0 0</p>

SCHEDULE 9-A
Donation(s) Received

<p>A. Full Name of Donor Thomas Phillips</p> <p>Mailing Address of Donor 626 Chain Bridge Rd</p> <p>City State Zip McLean VA 22101</p>	<p>Date of Receipt 0 3 / 0 5 / 2 0 0 4</p> <p>Amount 1 0 0 0 . 0 0</p>
<p>B. Full Name of Donor Thomas F. Phillips</p> <p>Mailing Address of Donor 3401N.10th St. Suite 200</p> <p>City State Zip McAllen TX 78504</p>	<p>Date of Receipt 0 8 / 0 7 / 2 0 0 4</p> <p>Amount 1 0 0 0 . 0 0</p>
<p>C. Full Name of Donor Thompson S. Phillips</p> <p>Mailing Address of Donor 3300 Ridgewood Dr</p> <p>City State Zip Edmond OK 73013</p>	<p>Date of Receipt 0 9 / 0 8 / 2 0 0 4</p> <p>Amount 1 0 0 0 . 0 0</p>
<p>D. Full Name of Donor Boone Pickens</p> <p>Mailing Address of Donor 8117 Preston Road, Suite 260</p> <p>City State Zip Dallas TX 75225</p>	<p>Date of Receipt 0 7 / 1 9 / 2 0 0 4</p> <p>Amount 1 0 0 0 0 0 0 . 0 0</p>
<p>E. Full Name of Donor Boone Pickens</p> <p>Mailing Address of Donor 8117 Preston Road, Suite 260</p> <p>City State Zip Dallas TX 75225</p>	<p>Date of Receipt 0 8 / 0 2 / 2 0 0 4</p> <p>Amount 4 0 0 0 0 0 0 . 0 0</p>
<p>SUBTOTAL of Donations This Page (optional) ▶</p>	<p>5 0 3 0 0 0 0 . 0 0</p>
<p>TOTAL This Period (last page this line number only) ▶ (carry total from last page to Line 9)</p>	<p>1 6 4 6 5 1 0 0 0 . 0 0</p>

SCHEDULE 9-A
Donation(s) Received

<p>A. Full Name of Donor joseph pickering</p> <p>Mailing Address of Donor pob0949</p> <p>City State Zip easton PA 18044</p>	<p>Date of Receipt 08 20 2004</p> <p>Amount 1000.00</p>
<p>B. Full Name of Donor martin pierce</p> <p>Mailing Address of Donor 2341 suntuoso</p> <p>City State Zip farmington NM 87401</p>	<p>Date of Receipt 08 20 2004</p> <p>Amount 500.00</p>
<p>C. Full Name of Donor martin pierce</p> <p>Mailing Address of Donor 2341 suntuoso</p> <p>City State Zip farmington NM 87401</p>	<p>Date of Receipt 08 09 2004</p> <p>Amount 500.00</p>
<p>D. Full Name of Donor Brian Pilcher</p> <p>Mailing Address of Donor PO Box 399</p> <p>City State Zip Ross CA 94957</p>	<p>Date of Receipt 08 20 2004</p> <p>Amount 1000.00</p>
<p>E. Full Name of Donor Brian Pilcher</p> <p>Mailing Address of Donor PO Box 399</p> <p>City State Zip Ross CA 94957</p>	<p>Date of Receipt 08 27 2004</p> <p>Amount 1000.00</p>
<p>SUBTOTAL of Donations This Page (optional) ▶ 4000.00</p>	
<p>TOTAL This Period (last page this line number only) ▶ 1650510.00 (carry total from last page to Line 5)</p>	

SCHEDULE 9-A
Donation(s) Received

<p>A. Full Name of Donor Jan Pillar</p> <p>Mailing Address of Donor 3825 Bluffview Dr.</p> <p>City State Zip Marietta GA 30062</p>	<p>Date of Receipt 0 8 / 2 3 / 2 0 0 4</p> <p>Amount 1 0 0 0 . 0 0</p>
<p>B. Full Name of Donor Jan Pillar</p> <p>Mailing Address of Donor 3825 Bluffview Dr.</p> <p>City State Zip Marietta GA 30062</p>	<p>Date of Receipt 0 9 / 0 8 / 2 0 0 4</p> <p>Amount 1 0 0 0 . 0 0</p>
<p>C. Full Name of Donor Myles Pollin</p> <p>Mailing Address of Donor 270 Broadway, Apartment 16D</p> <p>City State Zip New York NY 10007</p>	<p>Date of Receipt 0 8 / 2 1 / 2 0 0 4</p> <p>Amount 5 0 0 . 0 0</p>
<p>D. Full Name of Donor Myles Pollin</p> <p>Mailing Address of Donor 270 Broadway</p> <p>City State Zip New York NY 10007</p>	<p>Date of Receipt 0 9 / 0 8 / 2 0 0 4</p> <p>Amount 5 0 0 . 0 0</p>
<p>E. Full Name of Donor Roger Polly</p> <p>Mailing Address of Donor po box 5781</p> <p>City State Zip kingsville TX 78364</p>	<p>Date of Receipt 0 8 / 2 2 / 2 0 0 4</p> <p>Amount 1 0 0 0 . 0 0</p>
<p>SUBTOTAL of Donations This Page (optional)</p>	<p>4 0 0 0 . 0 0</p>
<p>TOTAL This Period (last page this line number only)</p> <p>(carry total from last page to Line E)</p>	<p>1 6 5 4 . 5 1 0 0 0</p>

SCHEDULE 9-A

Donation(s) Received

<p>A. Full Name of Donor Neil Polo</p> <p>Mailing Address of Donor 2061 Aquetong Road</p> <p>City State Zip New Hope PA 18938</p>	<p>Date of Receipt 0 8 / 2 8 / 2 0 0 4</p> <p>Amount 1 0 0 0 0 0</p>
<p>B. Full Name of Donor Ruth Ann Poppa</p> <p>Mailing Address of Donor 1736 Via Boranda</p> <p>City State Zip Palos Verdes Pen CA 90274</p>	<p>Date of Receipt 0 8 / 0 2 / 2 0 0 4</p> <p>Amount 5 0 0 0 0 0</p>
<p>C. Full Name of Donor John Porter</p> <p>Mailing Address of Donor 91 Peyton Parkway Suite 104</p> <p>City State Zip Collierville TN 38017</p>	<p>Date of Receipt 0 8 / 2 8 / 2 0 0 4</p> <p>Amount 1 0 0 0 0 0</p>
<p>D. Full Name of Donor Stephanie Princa</p> <p>Mailing Address of Donor 5430 Vanalden Avenue</p> <p>City State Zip Tarzana CA 91356</p>	<p>Date of Receipt 0 8 / 0 5 / 2 0 0 4</p> <p>Amount 1 0 0 0 0 0</p>
<p>E. Full Name of Donor frank pringle</p> <p>Mailing Address of Donor 160 dolphin cive Quay</p> <p>City State Zip Stamford CT 06902</p>	<p>Date of Receipt 0 8 / 1 9 / 2 0 0 4</p> <p>Amount 1 0 0 0 0 0</p>
<p>SUBTOTAL of Donations This Page (optional)</p>	<p>9 0 0 0 0 0</p>
<p>TOTAL This Period (last page like this number only)</p> <p>(carry total from last page to Line 9)</p>	<p>1 6 0 3 5 1 0 0 0</p>

SCHEDULE 9-A
Donation(s) Received

<p>A. Full Name of Donor frank pringle</p> <p>Mailing Address of Donor 160 Dolphin cove Quay</p> <p>City State Zip stamford CT 06902</p>	<p>Date of Receipt 0 9 / 0 9 / 2 0 0 4</p> <p>Amount 1 0 0 0 . 0 0</p>
<p>B. Full Name of Donor E Stephen Purdom</p> <p>Mailing Address of Donor PO Box 2767</p> <p>City State Zip Columbus GA 31902</p>	<p>Date of Receipt 0 9 / 0 7 / 2 0 0 4</p> <p>Amount 1 0 0 0 . 0 0</p>
<p>C. Full Name of Donor Barry Putegnat</p> <p>Mailing Address of Donor 44 W Jefferson St Suite D</p> <p>City State Zip Brownsville TX 78520</p>	<p>Date of Receipt 0 9 / 0 2 / 2 0 0 4</p> <p>Amount 2 0 0 0 . 0 0</p>
<p>D. Full Name of Donor james quaremba</p> <p>Mailing Address of Donor 3 old english road</p> <p>City State Zip slingerlands NY 12159</p>	<p>Date of Receipt 0 9 / 2 3 / 2 0 0 4</p> <p>Amount 2 5 0 0</p>
<p>E. Full Name of Donor James A. Quaremba</p> <p>Mailing Address of Donor 3 Old English Rd</p> <p>City State Zip Slingerlands NY 12159</p>	<p>Date of Receipt 0 9 / 0 7 / 2 0 0 4</p> <p>Amount 1 0 0 0 . 0 0</p>
<p>SUBTOTAL of Donations This Page (optional) ▶ 5 0 2 5 0 0</p>	
<p>TOTAL This Period (last page this line at least one entry) ▶ 1 6 6 8 5 3 5 0 0 (carry total from last page to Line 9)</p>	

SCHEDULE 9-A
Donation(s) Received

<p>A. Full Name of Donor Larry Rabinowitz</p> <p>Mailing Address of Donor PO Box 87</p> <p>City State Zip Lightfoot Va 23090</p>	<p>Date of Receipt 0 9 / 0 7 / 2 0 0 4</p> <p>Amount 1, 0 0 0 . 0 0</p>
<p>B. Full Name of Donor fred rader</p> <p>Mailing Address of Donor 308 arroyo dr</p> <p>City State Zip south pasadena ab 91030</p>	<p>Date of Receipt 0 8 / 1 5 / 2 0 0 4</p> <p>Amount 1, 0 0 0 . 0 0</p>
<p>C. Full Name of Donor Paul Rady</p> <p>Mailing Address of Donor 4 Mockingbird Lane</p> <p>City State Zip Englewood CO 80113</p>	<p>Date of Receipt 0 8 / 0 2 / 2 0 0 4</p> <p>Amount 1, 0 0 0 . 0 0</p>
<p>D. Full Name of Donor Vincent M. Rafanelli</p> <p>Mailing Address of Donor 1 Bates Boulevard, Suite 200</p> <p>City State Zip Orinda CA 94563</p>	<p>Date of Receipt 0 8 / 0 2 / 2 0 0 4</p> <p>Amount 2, 0 0 0 . 0 0</p>
<p>E. Full Name of Donor James Ramsey</p> <p>Mailing Address of Donor 1734 Pressburg St</p> <p>City State Zip New Orleans LA 70122</p>	<p>Date of Receipt 0 8 / 2 3 / 2 0 0 4</p> <p>Amount 1, 0 0 0 . 0 0</p>
<p>SUBTOTAL of Donations This Page (optional)</p>	<p>6, 0 0 0 . 0 0</p>
<p>TOTAL This Period (last page this line number only)</p> <p>(carry total from last page to Line 9)</p>	<p>1, 6 7 4 5 3 5 . 0 0</p>

SCHEDULE 9-A

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Donation(s) Received

A. Full Name of Donor Eugene Regad			Date of Receipt 08 18 2004		
Mailing Address of Donor 854 Riverview Drive			Amount 1 0 0 0 0 0		
City Morgantown	State WV	Zip 26505			
B. Full Name of Donor Bruce J. Reines			Date of Receipt 08 02 2004		
Mailing Address of Donor 1517 N. Honeysuckle Circle			Amount 1 0 0 0 0 0		
City De Pere	State WI	Zip 54115			
C. Full Name of Donor Edward Reske			Date of Receipt 08 19 2004		
Mailing Address of Donor 1004 Sharpsburg Dr., S.E.			Amount 2 5 0 0 0 0		
City Huntsville	State AL	Zip 35803			
D. Full Name of Donor jack rettig			Date of Receipt 08 03 2004		
Mailing Address of Donor 507 pine road			Amount 5 0 0 0 0 0		
City clear lake shores	State TX	Zip 77565			
E. Full Name of Donor jack rettig			Date of Receipt 08 03 2004		
Mailing Address of Donor 507 pine road			Amount 5 0 0 0 0 0		
City clear lake shores	State TX	Zip 77565			
SUBTOTAL of Donations This Page (optional)			5 5 0 0 0 0		
TOTAL This Period (last page this line number only)			1 6 8 0 0 3 5 0 0		
(carry total from last page to line 9)					

SCHEDULE 9-A

Donation(s) Received

A. Full Name of Donor edward & shelby rice			Date of Receipt M M Y Y 0 5 3 1 2 0 0 4	
Mailing Address of Donor 6200 90th ave n.			Amount 1,000.00	
City pinellas park	State FL	Zip 33782		

B. Full Name of Donor Carolyn Richardson			Date of Receipt M M Y Y 0 8 2 7 2 0 0 4	
Mailing Address of Donor 1774 Seal Way			Amount 2,500.00	
City Discovery Bay	State CA	Zip 94514		

C. Full Name of Donor Carolyn Richardson			Date of Receipt M M Y Y 0 8 3 0 2 0 0 4	
Mailing Address of Donor 1774 Seal Way			Amount 2,500.00	
City Discovery Bay	State CA	Zip 94514		

D. Full Name of Donor Carolyn Richardson			Date of Receipt M M Y Y 0 9 0 9 2 0 0 4	
Mailing Address of Donor 1774 Seal Way			Amount 5,000.00	
City Discovery Bay	State CA	Zip 94514		

E. Full Name of Donor William R. Riley			Date of Receipt M M Y Y 0 8 2 1 2 0 0 4	
Mailing Address of Donor 12016 Arbargee Circle			Amount 1,000.00	
City Dallas	State TX	Zip 75230		

SUBTOTAL of Donations This Page (optional)	3,000.00
TOTAL This Period (last page this line number only) (carry total from last page to line 9)	1,683,035.00

SCHEDULE 9-A
Donation(s) Received

<p>A. Full Name of Donor John Rindlaub</p> <p>Mailing Address of Donor 8441 SE 68th Street (#217)</p> <p>City State Zip Merier Island WA 98040</p>	<p>Date of Receipt 08 07 2004</p> <p>Amount 1,000.00</p>
<p>B. Full Name of Donor Robert Robinson</p> <p>Mailing Address of Donor 6337 Morris Rd</p> <p>City State Zip Hamilton OH 45011</p>	<p>Date of Receipt 08 30 2004</p> <p>Amount 1,000.00</p>
<p>C. Full Name of Donor Brett Roby</p> <p>Mailing Address of Donor 220 N. Danna Dr.</p> <p>City State Zip Hot Springs AR 71913</p>	<p>Date of Receipt 08 25 2004</p> <p>Amount 1,000.00</p>
<p>D. Full Name of Donor Daniel L. Root</p> <p>Mailing Address of Donor 5201 College Blvd</p> <p>City State Zip Leawood KS 66211</p>	<p>Date of Receipt 09 02 2004</p> <p>Amount 1,000.00</p>
<p>E. Full Name of Donor Thomas Rosencrants</p> <p>Mailing Address of Donor 7920 Landowne Drive</p> <p>City State Zip Atlanta GA 30350</p>	<p>Date of Receipt 08 24 2004</p> <p>Amount 1,000.00</p>
<p>SUBTOTAL of Donations This Page (optional) ▶</p>	<p>5,000.00</p>
<p>TOTAL This Period (last page this line number only) ▶ (carry total from last page to Line 9)</p>	<p>1,038,035.00</p>

SCHEDULE 9-A
Donation(s) Received

<p>A. Full Name of Donor Burton Rosenfield</p> <p>Mailing Address of Donor 1241 Gulf Of Mexico Dr</p> <p>City State Zip Longboat Key FL 34228</p>	<p>Date of Receipt 0 8 / 0 3 / 2 0 0 4</p> <p>Amount 5 0 0 0 0 0</p>
<p>B. Full Name of Donor David Rosenstein</p> <p>Mailing Address of Donor 7245 Arlington Boulevard</p> <p>City State Zip Falls Church VA 22042</p>	<p>Date of Receipt 0 8 / 0 8 / 2 0 0 4</p> <p>Amount 5 0 0 0 0 0</p>
<p>C. Full Name of Donor David Rosenstein</p> <p>Mailing Address of Donor 7245 Arlington Boulevard</p> <p>City State Zip Falls Church VA 22042</p>	<p>Date of Receipt 0 8 / 0 8 / 2 0 0 4</p> <p>Amount 1 0 0 0 0 0</p>
<p>D. Full Name of Donor George M. Ryan</p> <p>Mailing Address of Donor 4320 Meadow View Pl.</p> <p>City State Zip Encino CA 91436</p>	<p>Date of Receipt 0 8 / 0 1 / 2 0 0 4</p> <p>Amount 1 0 0 0 0 0</p>
<p>E. Full Name of Donor Lawrence S Rybka</p> <p>Mailing Address of Donor 130 Springside Dr #300</p> <p>City State Zip Akron OH 44333</p>	<p>Date of Receipt 0 8 / 2 5 / 2 0 0 4</p> <p>Amount 1 0 0 0 0 0</p>
<p>SUBTOTAL of Donations This Page (optional) ▶ 8 5 0 0 0 0</p>	
<p>TOTAL This Period (last page this line number only) ▶ 1 6 9 6 5 3 5 0 0 (carry total from last page to Line 8)</p>	

SCHEDULE 9-A
Donation(s) Received

PAGE 118 OF 145

A. Full Name of Donor John Sabolich Mailing Address of Donor 153 lake aluma drive City State Zip Oklahoma city OK 73121	Date of Receipt 08 20 2004 Amount 4,000.00
B. Full Name of Donor Leslie Sacks Mailing Address of Donor 11640 San Vicente Blvd. City State Zip Los Angeles CA 90049	Date of Receipt 08 10 2004 Amount 5,000.00
C. Full Name of Donor Leslie Sacks Mailing Address of Donor 11640 San Vicente Blvd. City State Zip Los Angeles CA 90049	Date of Receipt 08 31 2004 Amount 5,000.00
D. Full Name of Donor Tony Salvaggio Mailing Address of Donor 1390 Ridgeview drive City State Zip Allentown PA 18104	Date of Receipt 08 02 2004 Amount 1,000.00
E. Full Name of Donor larry Sample Mailing Address of Donor PO Box 28 City State Zip Genoa NV 89411	Date of Receipt 08 20 2004 Amount 1,000.00
SUBTOTAL of Donations This Page (optional)	4,000.00
TOTAL This Period (last page this line number only) (carry total from last page to Line 9)	1,700,535.00

SCHEDULE 9-A

Donation(s) Received

<p>A. Full Name of Donor Fred Sauer</p> <p>Mailing Address of Donor 454 Hammersmith</p> <p>City State Zip St. Louis MO 63141</p>	<p>Date of Receipt 02 02 2004</p> <p>Amount 1,000.00</p>
<p>B. Full Name of Donor George Savani</p> <p>Mailing Address of Donor 57 Boone Trail</p> <p>City State Zip Severna Park MD 21146</p>	<p>Date of Receipt 02 28 2004</p> <p>Amount 1,000.00</p>
<p>C. Full Name of Donor Georgea. Schaefer, Jr</p> <p>Mailing Address of Donor 851 Delawrea Ridge Lane</p> <p>City State Zip Cincinnati Oh 45226</p>	<p>Date of Receipt 08 07 2004</p> <p>Amount 2,000.00</p>
<p>D. Full Name of Donor Robert Schilling</p> <p>Mailing Address of Donor 7820 Palmer Road</p> <p>City State Zip Reynoldsburg OH 43068</p>	<p>Date of Receipt 08 31 2004</p> <p>Amount 1,000.00</p>
<p>E. Full Name of Donor Kevin Schoensee</p> <p>Mailing Address of Donor 15201 Windmill Pointe</p> <p>City State Zip Grosse Pointe Park MI 48091</p>	<p>Date of Receipt 08 31 2004</p> <p>Amount 1,000.00</p>
<p>SUBTOTAL of Donations This Page (optional)</p>	<p>6,000.00</p>
<p>TOTAL This Period (last page this line number only)</p> <p>(carry total from last page to Line 6)</p>	<p>1,706,535.00</p>

SCHEDULE 9-A
Donation(s) Received

<p>A. Full Name of Donor L. C. Schroeder</p> <p>Mailing Address of Donor 610 Moorefield Park Dr</p> <p>City State Zip Richmond VA 23236</p>	<p>Date of Receipt 08 02 2004</p> <p>Amount 5,000.00</p>
<p>B. Full Name of Donor Paul Schulstad</p> <p>Mailing Address of Donor 20 Eckert Farm Road</p> <p>City State Zip Saddle River NJ 07458</p>	<p>Date of Receipt 08 08 2004</p> <p>Amount 5,000.00</p>
<p>C. Full Name of Donor Paul Schulstad</p> <p>Mailing Address of Donor 20 Eckert Farm Road</p> <p>City State Zip Saddle River NJ 07458</p>	<p>Date of Receipt 08 04 2004</p> <p>Amount 1,000.00</p>
<p>D. Full Name of Donor Paul Schulstad</p> <p>Mailing Address of Donor 20 Eckert Farm Road</p> <p>City State Zip Saddle River NJ 07458</p>	<p>Date of Receipt 08 18 2004</p> <p>Amount 1,000.00</p>
<p>E. Full Name of Donor Dale Scott</p> <p>Mailing Address of Donor 2372-B Kettle River Road</p> <p>City State Zip Kettle Falls WA 99141</p>	<p>Date of Receipt 08 11 2004</p> <p>Amount 1,000.00</p>
<p>SUBTOTAL of Donations This Page (optional) ▶</p>	<p>6,500.00</p>
<p>TOTAL This Period (last page (use the number only) (carry total from last page to Line 9) ▶</p>	<p>1,713,035.00</p>

SCHEDULE 9-A

Donation(s) Received

<p>A. Full Name of Donor steven scott</p> <p>Mailing Address of Donor 4200 park terrace drive</p> <p>City State Zip salt lake city UT 85018</p>	<p>Date of Receipt 08 24 2004</p> <p>Amount 1,000.00</p>
<p>B. Full Name of Donor Thomas Shanahan</p> <p>Mailing Address of Donor 100 Manzanita Way</p> <p>City State Zip Woodside CA 94062</p>	<p>Date of Receipt 08 26 2004</p> <p>Amount 500.00</p>
<p>C. Full Name of Donor Thomas Shanahan</p> <p>Mailing Address of Donor 100 Manzanita Way</p> <p>City State Zip Woodside CA 94062</p>	<p>Date of Receipt 08 09 2004</p> <p>Amount 500.00</p>
<p>D. Full Name of Donor Anna Shaw</p> <p>Mailing Address of Donor 5801 Glenview Ave</p> <p>City State Zip Cincinnati OH 45224</p>	<p>Date of Receipt 08 26 2004</p> <p>Amount 1,000.00</p>
<p>E. Full Name of Donor Mark Shevitz</p> <p>Mailing Address of Donor 65 Wardell Avenue</p> <p>City State Zip Rumson NJ 07760</p>	<p>Date of Receipt 08 07 2004</p> <p>Amount 1,000.00</p>
<p>SUBTOTAL of Donations This Page (applies) ▶</p>	<p>4,000.00</p>
<p>TOTAL This Period (last page this line number only) ▶ (carry total from last page to Line 5)</p>	<p>1,717,035.00</p>

SCHEDULE 9-A

Donation(s) Received

<p>A. Full Name of Donor Mark Shevitz</p> <p>Mailing Address of Donor 65 Wardell Ave</p> <p>City: Rumson State: NJ Zip: 07760</p>	<p>Date of Receipt 08 03 2004</p> <p>Amount 1,000.00</p>
<p>B. Full Name of Donor Duane Siebert</p> <p>Mailing Address of Donor 200 Park Central Blvd. South - Suite 2</p> <p>City: Pompano Beach State: FL Zip: 33064</p>	<p>Date of Receipt 08 27 2004</p> <p>Amount 500.00</p>
<p>C. Full Name of Donor Duane Siebert</p> <p>Mailing Address of Donor 200 Park Central Blvd. South - Suite 2</p> <p>City: Pompano Beach State: FL Zip: 33064</p>	<p>Date of Receipt 08 09 2004</p> <p>Amount 500.00</p>
<p>D. Full Name of Donor Harold Siebert</p> <p>Mailing Address of Donor 241 Governors Way</p> <p>City: Brentwood State: TN Zip: 37027</p>	<p>Date of Receipt 08 07 2004</p> <p>Amount 1,000.00</p>
<p>E. Full Name of Donor Roger Silber</p> <p>Mailing Address of Donor 11143 Ice Skate Place</p> <p>City: San Diego State: CA Zip: 92126</p>	<p>Date of Receipt 08 20 2004</p> <p>Amount 1,000.00</p>
<p>SUBTOTAL of Donations This Page (optional)</p>	<p>4,000.00</p>
<p>TOTAL This Period (last page this line number only) (carry total from last page to Line 5)</p>	<p>1,721,035.00</p>

SCHEDULE 9-A
Donation(s) Received

<p>A. Full Name of Donor Paul Singer</p> <p>Mailing Address of Donor 211 Central Park West</p> <p>City State Zip New York NY 10024</p>	<p>Date of Receipt 08 02 2004</p> <p>Amount 5,000.00</p>
<p>B. Full Name of Donor Michael Skinner</p> <p>Mailing Address of Donor 11030 Santa Monica Blvd</p> <p>City State Zip Los Angeles CA 90025</p>	<p>Date of Receipt 08 10 2004</p> <p>Amount 1,000.00</p>
<p>C. Full Name of Donor Dan Smith</p> <p>Mailing Address of Donor 3221 Avalon Place</p> <p>City State Zip Houston TX 77019</p>	<p>Date of Receipt 09 04 2004</p> <p>Amount 500.00</p>
<p>D. Full Name of Donor Dan F. Smith</p> <p>Mailing Address of Donor 3221 Avalon Place</p> <p>City State Zip Houston TX 77019</p>	<p>Date of Receipt 09 09 2004</p> <p>Amount 500.00</p>
<p>E. Full Name of Donor Ford Smith</p> <p>Mailing Address of Donor 3653 Oceanside Drive</p> <p>City State Zip Greenbank WA 98253</p>	<p>Date of Receipt 08 28 2004</p> <p>Amount 1,000.00</p>
<p>SUBTOTAL of Donations This Page (refused)</p>	<p>2,000.00</p>
<p>TOTAL This Period (last page this line number only) (carry total from last page to Line 9)</p>	<p>1,729,035.00</p>

SCHEDULE 9-A
Donation(s) Received

<p>A. Full Name of Donor milton smith</p> <p>Mailing Address of Donor 1241 El Mirador Drive</p> <p>City State Zip Pasadena CA 91103</p>	<p>Date of Receipt M U S 2 4 2 0 0 4</p> <p>Amount 2 5 0 0 0 0</p>
<p>B. Full Name of Donor Sidney Snellings</p> <p>Mailing Address of Donor P.O. Box 4367</p> <p>City State Zip Winchester VA 22604</p>	<p>Date of Receipt M U S 2 0 2 0 0 4</p> <p>Amount 1 0 0 0 0 0</p>
<p>C. Full Name of Donor William Sornsin</p> <p>Mailing Address of Donor 5465 43rd Ave. W.</p> <p>City State Zip Seattle WA 98199</p>	<p>Date of Receipt M U S 1 1 2 0 0 4</p> <p>Amount 5 0 0 0 0 0</p>
<p>D. Full Name of Donor William Sornsin</p> <p>Mailing Address of Donor 5465 43rd Ave. W.</p> <p>City State Zip Seattle WA 98199</p>	<p>Date of Receipt M U S 3 0 2 0 0 4</p> <p>Amount 1 0 0 0 0 0</p>
<p>E. Full Name of Donor James E. Sowell</p> <p>Mailing Address of Donor 1601 Elm Street, Suite 300</p> <p>City State Zip Dallas TX 75201</p>	<p>Date of Receipt M U S 0 2 2 0 0 4</p> <p>Amount 2 5 0 0 0 0</p>
<p>SUBTOTAL of Donations This Page (optional)</p>	<p>3 0 0 0 0 0 0</p>
<p>TOTAL This Period (last page this line number only)</p> <p>(carry total from last page to Line 9)</p>	<p>1 7 5 9 0 3 5 0 0</p>

SCHEDULE 9-A
Donation(s) Received

<p>A. Full Name of Donor William Spack</p> <p>Mailing Address of Donor 1105 Los Pueblos</p> <p>City State Zip Los Alamos NM 87544</p>	<p>Date of Receipt 0 8 / 2 0 / 2 0 0 4</p> <p>Amount 1, 0 0 0 . 0 0</p>
<p>B. Full Name of Donor Clay Spencer</p> <p>Mailing Address of Donor 5829 Plauche Street</p> <p>City State Zip Harahan LA 70123</p>	<p>Date of Receipt 0 8 / 3 0 / 2 0 0 4</p> <p>Amount 5 0 0 . 0 0</p>
<p>C. Full Name of Donor Clay Spencer</p> <p>Mailing Address of Donor 5829 Plauche Street</p> <p>City State Zip Harahan LA 70123</p>	<p>Date of Receipt 0 8 / 0 8 / 2 0 0 4</p> <p>Amount 5 0 0 . 0 0</p>
<p>D. Full Name of Donor William Spillane</p> <p>Mailing Address of Donor 3401 Maple Ave.</p> <p>City State Zip Manhattan Beach CA 90266</p>	<p>Date of Receipt 0 8 / 0 5 / 2 0 0 4</p> <p>Amount 2 5 0 . 0 0</p>
<p>E. Full Name of Donor William Spillane</p> <p>Mailing Address of Donor 3401 Maple Ave.</p> <p>City State Zip Manhattan Beach CA 90266</p>	<p>Date of Receipt 0 8 / 2 4 / 2 0 0 4</p> <p>Amount 2 5 0 0 . 0 0</p>
<p>SUBTOTAL of Donations This Page (optional)</p>	<p>4, 7 5 0 0 0</p>
<p>TOTAL This Period (last page this line number only)</p> <p>(carry total from last page to Line 9)</p>	<p>1, 7 6 3, 7 8 5 0 0</p>

SCHEDULE 9-A

Donation(s) Received

<p>A. Full Name of Donor William Spillane</p> <p>Mailing Address of Donor 3401 Maple Ave.</p> <p>City State Zip Manhattan Beach CA 90266</p>	<p>Date of Receipt 09 08 2004</p> <p>Amount 2,500.00</p>
<p>B. Full Name of Donor Robert Stallings</p> <p>Mailing Address of Donor 25 Highland Park Village 100-762</p> <p>City State Zip Dallas TX 75205</p>	<p>Date of Receipt 08 31 2004</p> <p>Amount 1,000.00</p>
<p>C. Full Name of Donor THERESE STANFILL</p> <p>Mailing Address of Donor 908 OAK GROVE AVENUE</p> <p>City State Zip SAN MARINO CA 91108</p>	<p>Date of Receipt 08 16 2004</p> <p>Amount 1,000.00</p>
<p>D. Full Name of Donor Therese Stanfill</p> <p>Mailing Address of Donor 908 Oak Grove Avenue</p> <p>City State Zip San Marino CA 91108</p>	<p>Date of Receipt 08 21 2004</p> <p>Amount 1,000.00</p>
<p>E. Full Name of Donor Mark Stern</p> <p>Mailing Address of Donor 1104 Bedford Valley Rd</p> <p>City State Zip Bedford PA 15522</p>	<p>Date of Receipt 08 24 2004</p> <p>Amount 2,500.00</p>
<p>SUBTOTAL of Donations This Page (see Form 990) 7,100.00</p>	
<p>TOTAL This Period (last page this line number only) 1,770,885.00 (carry total from last page to Line 9)</p>	

SCHEDULE 9-A
Donation(s) Received

<p>A. Full Name of Donor William Story</p> <p>Mailing Address of Donor 6 Isle of Sicily</p> <p>City State Zip Winter Park FL 32789</p>	<p>Date of Receipt 08 30 2004</p> <p>Amount 2,500.00</p>
<p>B. Full Name of Donor W. Robert Stover</p> <p>Mailing Address of Donor 220 N Wiget Ln</p> <p>City State Zip Walnut Creek CA 94598</p>	<p>Date of Receipt 08 28 2004</p> <p>Amount 1,000.00</p>
<p>C. Full Name of Donor Pat Sullivan</p> <p>Mailing Address of Donor 10801 E. Happy Valley Rd. Lot 18</p> <p>City State Zip Scottsdale AZ 85255</p>	<p>Date of Receipt 08 01 2004</p> <p>Amount 500.00</p>
<p>D. Full Name of Donor Pat Sullivan</p> <p>Mailing Address of Donor 10801 E. Happy Valley Rd.</p> <p>City State Zip Scottsdale AZ 85255</p>	<p>Date of Receipt 09 07 2004</p> <p>Amount 1,000.00</p>
<p>E. Full Name of Donor william sullivan</p> <p>Mailing Address of Donor 5001 s. lewis ave.</p> <p>City State Zip sioux falls SD 57108</p>	<p>Date of Receipt 08 31 2004</p> <p>Amount 1,000.00</p>
<p>SUBTOTAL of Donations This Page (optional)</p> <p>TOTAL This Page (set page to the number 00)</p> <p>(carry total from last page to Line 9)</p>	<p>5,550.00</p> <p>1,776,435.00</p>

SCHEDULE 9-A
Donation(s) Received

<p>A. Full Name of Donor william summers</p> <p>Mailing Address of Donor 20749 Beachcliff Blvd</p> <p>City State Zip Rocky River OH 44116</p>	<p>Date of Receipt 08 22 2004</p> <p>Amount 2,500.00</p>
<p>B. Full Name of Donor Robert Sydow</p> <p>Mailing Address of Donor 528 21st Street</p> <p>City State Zip Manhattan Beach CA 90266</p>	<p>Date of Receipt 08 23 2004</p> <p>Amount 1,000.00</p>
<p>C. Full Name of Donor Weymouth Symmes</p> <p>Mailing Address of Donor Post Office Box 26184</p> <p>City State Zip Alexandria VA 22313</p>	<p>Date of Receipt 09 02 2004</p> <p>Amount 1,000.00</p>
<p>D. Full Name of Donor Weymouth D. Symmes</p> <p>Mailing Address of Donor 2401 Brooks Street PMB 338</p> <p>City State Zip Missoula MT 59801</p>	<p>Date of Receipt 05 13 2004</p> <p>Amount 2,000.00</p>
<p>E. Full Name of Donor Max Talbott</p> <p>Mailing Address of Donor 5 Pheasants Ridge N</p> <p>City State Zip Greenville DE 19807</p>	<p>Date of Receipt 09 04 2004</p> <p>Amount 1,000.00</p>

<p>SUBTOTAL of Donations This Page (optional)</p>	<p>7,500.00</p>
<p>TOTAL This Period (last page this line number only)</p> <p>(carry total from last page to Line 9)</p>	<p>1,783,935.00</p>

SCHEDULE 9-A
Donation(s) Received

A. Full Name of Donor Max Taibott			Date of Receipt 09 09 2004	
Mailing Address of Donor 5 Pheasants Ridge North			Amount 1 0 0 0 0 0	
City Greenville	State DE	Zip 19807		
B. Full Name of Donor Hans Tanzler			Date of Receipt 09 03 2004	
Mailing Address of Donor 2703 Cove View Drive South			Amount 1 0 0 0 0 0	
City Jacksonville	State FL	Zip 32257		
C. Full Name of Donor Frances Taylor			Date of Receipt 09 22 2004	
Mailing Address of Donor 8811 Willow Hills Drive			Amount 5 0 0 0 0 0	
City Huntsville	State AL	Zip 35802		
D. Full Name of Donor Frances Taylor			Date of Receipt 09 08 2004	
Mailing Address of Donor 8811 Willow Hills Drive			Amount 5 0 0 0 0 0	
City Huntsville	State AL	Zip 35802		
E. Full Name of Donor Steven Taylor			Date of Receipt 09 28 2004	
Mailing Address of Donor 515 Santa Paula Drive			Amount 2 5 0 0 0 0	
City Salinas	State CA	Zip 93901		
SUBTOTAL of Donations This Page (optional)			5 5 0 0 0 0	
TOTAL This Period (see page this line number only) (carry total from last page to Line 9)			1 7 8 9 4 3 5 0 0	

SCHEDULE 9-A
Donation(s) Received

A. Full Name of Donor John M. Templeton			Date of Receipt 08 02 2004		
Mailing Address of Donor 601 Pembroke Road			Amount 5 0 0 0 0 0		
City Bryn Mawr	State PA	Zip 19010			
B. Full Name of Donor robert thing			Date of Receipt 08 08 2004		
Mailing Address of Donor 12437 Royal rd			Amount 1 0 0 0 0 0		
City el cajon	State CA	Zip 92021			
C. Full Name of Donor Paul Thomas			Date of Receipt 08 31 2004		
Mailing Address of Donor PO Box 11085			Amount 5 0 0 0 0 0		
City Truckee	State CA	Zip 96162			
D. Full Name of Donor Paul Thomas			Date of Receipt 08 28 2004		
Mailing Address of Donor PO Box 11085			Amount 1 0 0 0 0 0		
City Truckee	State CA	Zip 96162			
E. Full Name of Donor Glen Thompson			Date of Receipt 08 31 2004		
Mailing Address of Donor 221 HIGHWAY ONE			Amount 1 0 0 0 0 0		
City LEWES	State DE	Zip 19958			
SUBTOTAL of Donations This Page (optional)			8 5 0 0 0 0		
TOTAL This Period (last page this line number only) (carry total from last page to Line 9)			1 7 9 7 9 3 5 0 0		

SCHEDULE 9-A
Donation(s) Received

A. Full Name of Donor brian tierney			Date of Receipt M O Y Y C T 0 8 2 0 2 0 0 4	
Mailing Address of Donor 1020 rock creek road			Amount 1 0 0 0 0 0	
City bryn mawr	State PA	Zip 19010		

B. Full Name of Donor Brian Timmer			Date of Receipt M O Y Y C T 0 8 2 0 2 0 0 4	
Mailing Address of Donor 3347 64th Ave			Amount 5 0 0 0 0 0	
City Zeeland	State MI	Zip 49464		

C. Full Name of Donor Brian Timmer			Date of Receipt M O Y Y C T 0 8 0 3 2 0 0 4	
Mailing Address of Donor 3347 64th Ave.			Amount 5 0 0 0 0 0	
City Zeeland	State MI	Zip 49464		

D. Full Name of Donor Laura Timmis			Date of Receipt M O Y Y C T 0 8 0 3 2 0 0 4	
Mailing Address of Donor 2950 Ft. Charles Dr			Amount 1 0 0 0 0 0	
City Naples	State FL	Zip 34102		

E. Full Name of Donor Daniel P. Tinman			Date of Receipt M O Y Y C T 0 8 2 5 2 0 0 4	
Mailing Address of Donor 2656 Hampshire Rd			Amount 1 0 0 0 0 0	
City Cleveland	State OH	Zip 44106		

SUBTOTAL of Donations This Page (optional)	4 0 0 0 0 0
TOTAL This Period (last page lists line number only)	1 8 0 1 9 3 5 0 0
(carry total from last page to Line 9)	

SCHEDULE 9-A
Donation(s) Received

A. Full Name of Donor Jim Tonyan			Date of Receipt 08 21 2004	
Mailing Address of Donor 3709 W. Clover Ave.			Amount 1,000.00	
City McHenry	State IL	Zip 60050		

B. Full Name of Donor Jim Tonyan			Date of Receipt 08 08 2004	
Mailing Address of Donor 3709 W. Clover Ave.			Amount 1,000.00	
City McHenry	State IL	Zip 60050		

C. Full Name of Donor stefano Torcise Jr			Date of Receipt 08 24 2004	
Mailing Address of Donor 6800 s.w. 101 Street			Amount 1,000.00	
City Miami	State FL	Zip 33156		

D. Full Name of Donor Barry Traub			Date of Receipt 08 04 2004	
Mailing Address of Donor PO BOX 1169			Amount 1,000.00	
City NASHVILLE	State NC	Zip 27856		

E. Full Name of Donor martin trepel			Date of Receipt 08 20 2004	
Mailing Address of Donor 24 dockside lane pmb 447			Amount 2,500.00	
City key largo	State FL	Zip 33037		

SUBTOTAL of Donations This Page (optional)	6,500.00
TOTAL This Period (last page this line number only)	1,808,436.00
(carry total from last page to Line 9)	

SCHEDULE 9-A
Donation(s) Received

<p>A. Full Name of Donor malcolm tripp</p> <p>Mailing Address of Donor 941 cernan drive</p> <p>City State Zip bellwood IL 60104</p>	<p>Date of Receipt 08 26 2004</p> <p>Amount 1 000 00</p>
<p>B. Full Name of Donor Robert E. Tucker</p> <p>Mailing Address of Donor 13685 S West Bay Shore Ste 200</p> <p>City State Zip Traverse City MI 49684</p>	<p>Date of Receipt 09 02 2004</p> <p>Amount 1 000 00</p>
<p>C. Full Name of Donor Robert E. Tucker, Jr</p> <p>Mailing Address of Donor 13685 S West Bay Shore, Suite 200</p> <p>City State Zip Traverse city MI 49684</p>	<p>Date of Receipt 09 07 2004</p> <p>Amount 1 000 00</p>
<p>D. Full Name of Donor Ralph Ungermann</p> <p>Mailing Address of Donor 1045 Vallejo St.</p> <p>City State Zip San Francisco CA 94133</p>	<p>Date of Receipt 08 22 2004</p> <p>Amount 1 000 00</p>
<p>E. Full Name of Donor James T. Uren</p> <p>Mailing Address of Donor 313 Oaktree Dr</p> <p>City State Zip Mountain View CA 94040</p>	<p>Date of Receipt 09 02 2004</p> <p>Amount 1 000 00</p>

<p>SUBTOTAL of Donations This Page (optional)</p>	<p>5 000 00</p>
<p>TOTAL This Period (last page this line number only)</p> <p>(carry total from last page to line 9)</p>	<p>1 813 435 00</p>

SCHEDULE 9-A
Donation(s) Received

<p>A. Full Name of Donor Michael Valentine</p> <p>Mailing Address of Donor 1861 Dexter Avenue</p> <p>City State Zip Cincinnati OH 45206</p>	<p>Date of Receipt 0 8 / 0 4 / 2 0 0 4</p> <p>Amount 1 0 0 0 0 0</p>
<p>B. Full Name of Donor Michael Valentine</p> <p>Mailing Address of Donor 1861 Dexter Avenue</p> <p>City State Zip Cincinnati OH 45206</p>	<p>Date of Receipt 0 8 / 2 2 / 2 0 0 4</p> <p>Amount 2 5 0 0 0 0</p>
<p>C. Full Name of Donor Michael Valentine</p> <p>Mailing Address of Donor 1861 Dexter Avenue</p> <p>City State Zip Cincinnati OH 45206</p>	<p>Date of Receipt 0 8 / 0 1 / 2 0 0 4</p> <p>Amount 1 0 0 0 0 0</p>
<p>D. Full Name of Donor Michael Valentine</p> <p>Mailing Address of Donor 1861 Dexter Avenue</p> <p>City State Zip Cincinnati OH 45206</p>	<p>Date of Receipt 0 8 / 0 8 / 2 0 0 4</p> <p>Amount 2 5 0 0 0 0</p>
<p>E. Full Name of Donor John Vanlaer</p> <p>Mailing Address of Donor P.O. Box 26184</p> <p>City State Zip Alexandria VA 22313</p>	<p>Date of Receipt 0 8 / 0 2 / 2 0 0 4</p> <p>Amount 1 0 0 0 0 0</p>
<p>SUBTOTAL of Donations This Page (optional)</p>	<p>8 0 0 0 0 0</p>
<p>TOTAL This Period (last page this line number only) (carry total from last page to Line 9)</p>	<p>1 8 2 1 4 3 5 0 0</p>

SCHEDULE 9-A
Donation(s) Received

<p>A. Full Name of Donor Arlene Vetter Haliman</p> <p>Mailing Address of Donor 258 Stable Gate Drive</p> <p>City State Zip Campobello SC 29322</p>	<p>Date of Receipt A M D Y Y C T 0 8 2 5 2 0 0 4</p> <p>Amount 1 0 0 0 0 0</p>
<p>B. Full Name of Donor Stephen Vidibor</p> <p>Mailing Address of Donor 217 Ada Ave. #24</p> <p>City State Zip Mountain View CA 94043</p>	<p>Date of Receipt M D Y Y C T 0 8 0 5 2 0 0 4</p> <p>Amount 5 0 0 0 0 0</p>
<p>C. Full Name of Donor Stephen Vidibor</p> <p>Mailing Address of Donor 217 Ada Ave. #24</p> <p>City State Zip Mountain View CA 94043</p>	<p>Date of Receipt A M D Y Y C T 0 8 2 2 2 0 0 4</p> <p>Amount 5 0 0 0 0 0</p>
<p>D. Full Name of Donor Steve Vidibor</p> <p>Mailing Address of Donor 217 Ada Ave. #24</p> <p>City State Zip Mountain View CA 94043</p>	<p>Date of Receipt M D Y Y C T 0 8 0 8 2 0 0 4</p> <p>Amount 5 0 0 0 0 0</p>
<p>E. Full Name of Donor E. Duke Vincent</p> <p>Mailing Address of Donor 9255 Sunset Blvd.</p> <p>City State Zip Los Angeles CA 90069</p>	<p>Date of Receipt M D Y Y C T 0 8 0 7 2 0 0 4</p> <p>Amount 2 5 0 0 0 0 0 0</p>
<p>SUBTOTAL of Donations This Page (applies) ▶</p>	<p>2 7 5 0 0 0 0 0</p>
<p>TOTAL This Period (last page this line number only) ▶ (carry total from last page to Line 9)</p>	<p>1 8 4 8 9 3 5 0 0</p>

SCHEDULE 9-A
Donation(s) Received

A. Full Name of Donor John Vitaliti			Date of Receipt 08 04 2004	
Mailing Address of Donor 5507 Moorewood Drive			Amount 500.00	
City Arlington	State TX	Zip 76017		
B. Full Name of Donor John Vitaliti			Date of Receipt 08 13 2004	
Mailing Address of Donor 5507 Moorewood Drive			Amount 500.00	
City Arlington	State TX	Zip 76017		
C. Full Name of Donor John Vitaliti			Date of Receipt 08 04 2004	
Mailing Address of Donor 5507 Moorewood Drive			Amount 500.00	
City Arlington	State TX	Zip 76017		
D. Full Name of Donor Gary Vogler			Date of Receipt 08 29 2004	
Mailing Address of Donor 11451 S. W. 3rd. Street			Amount 1000.00	
City Plantation	State FL	Zip 33325		
E. Full Name of Donor Terry Voik			Date of Receipt 08 12 2004	
Mailing Address of Donor 617 Brambles Way			Amount 1000.00	
City Orange	State CA	Zip 92869		
SUBTOTAL of Donations This Page (optional)			3,500.00	
TOTAL This Period (last page use this number only) (carry total from last page to Line 8)			1,852,435.00	

SCHEDULE 9-A
Donation(s) Received

A. Full Name of Donor Jimmy Wallace	Date of Receipt 08 31 2004
Mailing Address of Donor 428 Wiley Parker Rd.	Amount 3,000.00
City Jackson	State TN
Zip 38305	

B. Full Name of Donor Quinten Ward	Date of Receipt 08 24 2004
Mailing Address of Donor PO Box 8000 #263	Amount 500.00
City Mesquite	State NV
Zip 89024	

C. Full Name of Donor Quinten Ward	Date of Receipt 08 31 2004
Mailing Address of Donor PO Box 8000 #263	Amount 500.00
City Mesquite	State NV
Zip 89024	

D. Full Name of Donor james waters	Date of Receipt 08 28 2004
Mailing Address of Donor 1153 grove st	Amount 1,000.00
City framingham	State MA
Zip 01701	

E. Full Name of Donor Alan Weissman	Date of Receipt 08 20 2004
Mailing Address of Donor 60 Rye Road	Amount 1,000.00
City Rye	State NY
Zip 10580	

SUBTOTAL of Donations This Page (optional)	4,000.00
TOTAL This Period (last page this line number only) (carry over from last page to Line 9)	1,856.43500

SCHEDULE 9-A
Donation(s) Received

<p>A. Full Name of Donor Billy Westbrook</p> <p>Mailing Address of Donor PO Box 24625</p> <p>City State Zip Houston TX 77229</p>	<p>Date of Receipt 08 19 2004</p> <p>Amount 1,000.00</p>
<p>B. Full Name of Donor Roy Wetterstrom</p> <p>Mailing Address of Donor 295 Lythrum Lane</p> <p>City State Zip Hamel MN 55340</p>	<p>Date of Receipt 08 19 2004</p> <p>Amount 500.00</p>
<p>C. Full Name of Donor Roy Wetterstrom</p> <p>Mailing Address of Donor 295 Lythrum Lane</p> <p>City State Zip Hamel MN 55340</p>	<p>Date of Receipt 09 08 2004</p> <p>Amount 500.00</p>
<p>D. Full Name of Donor Joseph White</p> <p>Mailing Address of Donor 10 St. Thomas More Drive</p> <p>City State Zip Winchester MA 01890</p>	<p>Date of Receipt 08 07 2004</p> <p>Amount 1,000.00</p>
<p>E. Full Name of Donor Bret Wien</p> <p>Mailing Address of Donor 41 Honeyman Drive</p> <p>City State Zip Succasunna NJ 07876</p>	<p>Date of Receipt 08 22 2004</p> <p>Amount 1,000.00</p>
<p>SUBTOTAL of Donations This Page (optional)</p> <p>TOTAL This Period (last page info first within entry)</p> <p>(carry total from last page to Line 8)</p>	<p>4,000.00</p> <p>1,860,435.00</p>

SCHEDULE 9-A
Donation(s) Received

A. Full Name of Donor Walter Wilkening			Date of Receipt 0 9 / 3 1 / 2 0 0 4	
Mailing Address of Donor PO Box 222			Amount 1 0 0 0 0 0	
City La Grange	State KY	Zip 40031		

B. Full Name of Donor Sam Wilcoxon			Date of Receipt 0 8 / 2 4 / 2 0 0 4	
Mailing Address of Donor 64 Falcon Hills Dr			Amount 1 0 0 0 0 0	
City Highlands Ranch	State CO	Zip 80126		

C. Full Name of Donor Michael Willett			Date of Receipt 0 8 / 0 4 / 2 0 0 4	
Mailing Address of Donor 5 Oriole Way			Amount 5 0 0 0 0 0	
City Ringoes	State NJ	Zip 08551		

D. Full Name of Donor Michael Willett			Date of Receipt 0 8 / 0 8 / 2 0 0 4	
Mailing Address of Donor 5 Oriole Way			Amount 5 0 0 0 0 0	
City Ringoes	State NJ	Zip 08551		

E. Full Name of Donor Reynolds Williams			Date of Receipt 0 8 / 0 4 / 2 0 0 4	
Mailing Address of Donor 1224 McIntosh Woods Rd			Amount 1 0 0 0 0 0	
City Florence	State SC	Zip 29501		

SUBTOTAL of Donations This Page (optional)			4 0 0 0 0 0	
TOTAL This Period (last page this the number only)			1 8 6 4 4 3 5 0 0	
(carry total from last page to Line 9)				

SCHEDULE 9-A**Donation(s) Received**

A. Full Name of Donor William Williams			Date of Receipt 08 23 2004	
Mailing Address of Donor 100 Westcliff Road			Amount 1,000.00	
City Weston	State MA	Zip 02493		
B. Full Name of Donor Andrew Wilson			Date of Receipt 08 27 2004	
Mailing Address of Donor 11163 Rich Meadow Dr.			Amount 1,000.00	
City Great Falls	State VA	Zip 22065		
C. Full Name of Donor William Wilson, Jr.			Date of Receipt 08 20 2004	
Mailing Address of Donor 171 Paddington Way			Amount 2,500.00	
City San Antonio	State TX	Zip 78209		
D. Full Name of Donor J Calvin Winter III			Date of Receipt 08 25 2004	
Mailing Address of Donor 6220 SW 123rd Terrace			Amount 1,000.00	
City Miami	State FL	Zip 33156		
E. Full Name of Donor Randall Wolcott			Date of Receipt 08 19 2004	
Mailing Address of Donor 2002 Oxford			Amount 1,000.00	
City Lubbock	State TX	Zip 79410		
SUBTOTAL of Donations This Page (optional)			5,600.00	
TOTAL This Period (last page this line number only) (copy total from last page to Line #)			1,870,035.00	

SCHEDULE 9-A
Donation(s) Received

A. Full Name of Donor Randall Wolcott			Date of Receipt 08 20 2004	
Mailing Address of Donor 2002 Oxford Ave			Amount 1,000.00	
City Lubbock	State TX	Zip 79410		
B. Full Name of Donor Robert Woodings			Date of Receipt 08 20 2004	
Mailing Address of Donor 6 Meadowood Drive			Amount 2,500.00	
City Pittsburgh	State PA	Zip 15215		
C. Full Name of Donor Robert Woodings			Date of Receipt 09 08 2004	
Mailing Address of Donor 6 Meadowood Drive			Amount 2,500.00	
City Pittsburgh	State PA	Zip 15215		
D. Full Name of Donor Sarah Woodings			Date of Receipt 08 21 2004	
Mailing Address of Donor 6 Meadowood Drive			Amount 2,500.00	
City Pittsburgh	State PA	Zip 15215		
E. Full Name of Donor Hall Worthington			Date of Receipt 08 25 2004	
Mailing Address of Donor 222 Plateau Ave.			Amount 1,000.00	
City Santa Cruz	State CA	Zip 95060		
SUBTOTAL of Donations This Page (optional)			9,500.00	
TOTAL This Period (last page this form number only) (carry total from last page to Line 9)			18,795.35	

SCHEDULE 9-A
Donation(s) Received

<p>A. Full Name of Donor Alan Wright</p> <p>Mailing Address of Donor 6212 Waterman</p> <p>City State Zip St. Louis MO 63130</p>	<p>Date of Receipt 08 06 2004</p> <p>Amount 1,000.00</p>
<p>B. Full Name of Donor Alan Wright</p> <p>Mailing Address of Donor 6212 Waterman</p> <p>City State Zip St. Louis MO 63130</p>	<p>Date of Receipt 08 19 2004</p> <p>Amount 1,000.00</p>
<p>C. Full Name of Donor Alan Wright</p> <p>Mailing Address of Donor 6212 Waterman</p> <p>City State Zip St. Louis MO 63130</p>	<p>Date of Receipt 08 05 2004</p> <p>Amount 1,000.00</p>
<p>D. Full Name of Donor Sam Wylie</p> <p>Mailing Address of Donor 300 Crescent Court, Suite 1000</p> <p>City State Zip Dallas TX 75201</p>	<p>Date of Receipt 07 08 2004</p> <p>Amount 1,000.00</p>
<p>E. Full Name of Donor Charles Wylie, Jr.</p> <p>Mailing Address of Donor 300 Crescent Court, Suite 1000</p> <p>City State Zip Dallas TX 75201</p>	<p>Date of Receipt 07 08 2004</p> <p>Amount 1,000.00</p>
<p>SUBTOTAL of Donations This Page (net total) ▶</p> <p>TOTAL This Period (last page in's line number only) ▶ (carry total from last page to Line 8)</p>	<p>2,300.00</p> <p>1,902,535.00</p>

SCHEDULE 9-A
Donation(s) Received

A. Full Name of Donor James Yonkers Mailing Address of Donor 2000 Regency Parkway Suite 465 City State Zip Cary NC 27511	Date of Receipt 08 31 2004 Amount 1,000.00
B. Full Name of Donor David York Mailing Address of Donor 135 Commonwealth Drive City State Zip Menlo Park CA 94025	Date of Receipt 05 31 2004 Amount 1,000.00
C. Full Name of Donor Peter Zieve Mailing Address of Donor 4606 107th St SW City State Zip Mukilteo WA 98275	Date of Receipt 08 27 2004 Amount 1,000.00
D. Full Name of Donor Michael Zimmerman Mailing Address of Donor 8102 Edgeware Ln. City State Zip Louisville KY 40220	Date of Receipt 08 15 2004 Amount 1,000.00
E. Full Name of Donor Doug Zych Mailing Address of Donor 172 Field Point Road No. 4 City State Zip Greenwich CT 06830	Date of Receipt 08 18 2004 Amount 500.00
SUBTOTAL of Donations This Page (optional)	4,500.00
TOTAL This Period (last page this line number only) (carry total from last page to Line 9)	1,907,035.00

SCHEDULE 9-A
Donation(s) Received

A. Full Name of Donor
Doug Zych

Mailing Address of Donor
172 Field Point Road No. 4

City State Zip
Greenwich CT 06830

Date of Receipt
0 9 / 0 9 / 2 0 0 4

Amount
2 5 0 0 0

B. Full Name of Donor
Douglas J. Zych

Mailing Address of Donor
172 Field Point Rd Apt 4

City State Zip
Greenwich CT 06830

Date of Receipt
0 9 / 0 2 / 2 0 0 4

Amount
5 0 0 0 0

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) ▶ 7 5 0 0 0

TOTAL This Period (last page this line number only) ▶ 1 9 0 7 7 8 5 0 0
(carry total from last page to Line 9)

SCHEDULE 9-B

Disbursement(s) Made or Obligation(s)

A. Full Name (Last, First, Middle Initial) of Payer Chris LaCivita Consulting				Date of Disbursement or Obligation 0 8 3 1 2 0 0 4					
Mailing Address of Payer 13604 Timberlake Ct				Amount 3,393.00					
City Midlothian, VA 23311		State VA		Zip Code 23311		Communication Date 0 9 1 0 2 0 0 4			
Name of Employer Chris LaCivita Consulting		Occupation Consultant							
Purpose of Disbursement (including use(s) of communication(s)) Media Copywriting & Production									
Name of Federal Candidate John F. Kerry		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President		State: MA		District: 1		Disbursement/Obligation For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	
Name of Federal Candidate John F. Kerry		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		State: MA		District: 1		Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	
Name of Federal Candidate John F. Kerry		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		State: MA		District: 1		Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	
B. Full Name (Last, First, Middle Initial) of Payer CNN-TV				Date of Disbursement or Obligation 0 9 1 0 2 0 0 4					
Mailing Address of Payer One CNN Center 9-South				Amount 2,183,785.55					
City Atlanta, GA 30303		State GA		Zip Code 30303		Communication Date 0 9 1 0 2 0 0 4			
Name of Employer CNN-TV		Occupation TV Station							
Purpose of Disbursement (including use(s) of communication(s)) Media Buy									
Name of Federal Candidate John F. Kerry		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		State: MA		District: 1		Disbursement/Obligation For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	
Name of Federal Candidate John F. Kerry		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		State: MA		District: 1		Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	
Name of Federal Candidate John F. Kerry		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		State: MA		District: 1		Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	
SUBTOTAL of Disbursements/Obligations This Page (optional)						2,197,115.55			
TOTAL This Period (last page this line number only) (carry total from last page to Line 10)						2,197,115.55			

SCHEDULE B-B

Disbursement(s) Made or Obligation(s)

A. Full Name (Last, First Middle Initial) of Payee Mentzer Media Service, Inc.				Date of Disbursement or Obligation 0 9 / 1 0 / 2 0 0 4	
Mailing Address of Payee 600 Fairmont Ave, Suite 306				Amount 3 8,1 8 4.4 5	
City Towson, MD 21285		State MD		Zip Code 21285	
Name of Employer Mentzer Media Service, Inc.		Occupation Media Commission		Communication Date 0 9 / 1 0 / 2 0 0 4	
Purpose of Disbursement (including title(s) of communication(s)) Media Commission					
Name of Federal Candidate John F. Kerry		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President		Disbursement/Obligation For: <input type="checkbox"/> Primary <input checked="" 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		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		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 Headline News				Date of Disbursement or Obligation 0 9 / 1 0 / 2 0 0 4	
Mailing Address of Payee One CNN Center 9-South				Amount 3 5,8 5 4.7 0	
City Atlanta, GA 30303		State GA		Zip Code 30303	
Name of Employer Headline News		Occupation Media Buy		Communication Date 0 9 / 1 0 / 2 0 0 4	
Purpose of Disbursement (including title(s) of communication(s)) Media Buy					
Name of Federal Candidate John F. Kerry		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President		Disbursement/Obligation For: <input type="checkbox"/> Primary <input checked="" 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		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		Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	
SUBTOTAL of Disbursements/Obligations This Page (optional)				7 4 0 3 9.1 5	
TOTAL This Period (last page this line number only) (carry total from last page to Line 1B)				2 9 3 7 5 0.7 0	

SCHEDULE 9-B

Disbursement(s) Made or Obligation(s)

A. Full Name (Last, First, Middle Initial) of Payee Mentzer Media Services, Inc.			Date of Disbursement or Obligation 0 5 1 0 2 0 0 4	
Mailing Address of Payee 600 Faimont Ave, Suite 308			Amount 6,327.20	
City	State	Zip Code	Communication Date 0 8 1 0 2 0 0 4	
Name of Employer Occupation				

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

Media Commission

Name of Federal Candidate	Office Sought:	House	State	Disbursement/Obligation For:
John F. Kerry	<input checked="" type="checkbox"/>	Senate	District	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
		President		<input type="checkbox"/> Other (specify) ▶
Name of Federal Candidate	Office Sought:	House	State	Disbursement/Obligation For:
	<input type="checkbox"/>	Senate	District	<input type="checkbox"/> Primary <input type="checkbox"/> General
		President		<input type="checkbox"/> Other (specify) ▶
Name of Federal Candidate	Office Sought:	House	State	Disbursement/Obligation For:
	<input type="checkbox"/>	Senate	District	<input type="checkbox"/> Primary <input type="checkbox"/> General
		President		<input type="checkbox"/> Other (specify) ▶

B. Full Name (Last, First, Middle Initial) of Payee Fox News Channel			Date of Disbursement or Obligation 0 8 1 0 2 0 0 4	
Mailing Address of Payee 11211 Avenue of the Americas, 17th Floor			Amount 1,981,843.00	
City	State	Zip Code	Communication Date 0 5 1 0 2 0 0 4	
Name of Employer Occupation				

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

Media Buy

Name of Federal Candidate	Office Sought:	House	State	Disbursement/Obligation For:
John F. Kerry	<input checked="" type="checkbox"/>	Senate	District	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
		President		<input type="checkbox"/> Other (specify) ▶
Name of Federal Candidate	Office Sought:	House	State	Disbursement/Obligation For:
	<input type="checkbox"/>	Senate	District	<input type="checkbox"/> Primary <input type="checkbox"/> General
		President		<input type="checkbox"/> Other (specify) ▶
Name of Federal Candidate	Office Sought:	House	State	Disbursement/Obligation For:
	<input type="checkbox"/>	Senate	District	<input type="checkbox"/> Primary <input type="checkbox"/> General
		President		<input type="checkbox"/> Other (specify) ▶

SUBTOTAL of Disbursements/Obligations This Page (optional) ▶	204,511.60
TOTAL This Period (last page this line number only) ▶ (carry total from last page to Line 10)	4,982,623.00

SCHEDULE 9-B

Disbursement(s) Made or Obligation(s)

A. Full Name (Last, First, Middle Initial) of Payee Mentzer Media Services, Inc.				Date of Disbursement or Obligation 0 9 / 1 0 / 2 0 0 4			
Mailing Address of Payee 600 Fairmont Ave., Suite 306				Amount , 3 4 , 9 7 3 , 7 0			
City Towson, MD 21286		State MD		Zip Code 21286			
Name of Employer Mentzer Media Services, Inc.		Occupation Media Commission		Communication Date 0 9 / 1 0 / 2 0 0 4			
Purpose of Disbursement (Including title(s) of communication(s)) Media Commission							
Name of Federal Candidate John F. Kerry		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President		Disbursement/Obligation For: <input type="checkbox"/> Primary <input checked="" 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		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		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 MSNBC				Date of Disbursement or Obligation 0 9 / 1 0 / 2 0 0 4			
Mailing Address of Payee 1 MSNBC Plaza				Amount , 7 3 , 2 8 5 , 7 5			
City Seaucucus, NJ 07094		State NJ		Zip Code 07094			
Name of Employer MSNBC		Occupation Media Buy		Communication Date 0 9 / 1 0 / 2 0 0 4			
Purpose of Disbursement (Including title(s) of communication(s)) Media Buy							
Name of Federal Candidate John F. Kerry		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President		Disbursement/Obligation For: <input type="checkbox"/> Primary <input checked="" 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		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		Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶			
SUBTOTAL of Disbursements/Obligations This Page (optional)				1 0 8 , 2 3 9 , 4 5			
TOTAL This Period (last page this line number only) (carry total from last page to Line 10)				6 0 6 , 5 0 1 , 4 5			

SCHEDULE 9-B

Disbursement(s) Made or Obligation(s)

A. Full Name (Last, First, Middle Initial) of Payee Mentzar Media Services, Inc.			Date of Disbursement or Obligation 09 / 10 / 2004	
Mailing Address of Payee 600 Fairmont Ave., Suite 306			Amount 12,929.25	
City Towson, MD	State MD	Zip Code 21288	Communication Date 09 / 10 / 2004	
Name of Employer _____			Occupation _____	

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

Media Commission

Name of Federal Candidate John F. Kerry	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____	Disbursement/Obligation For: <input type="checkbox"/> Primary <input checked="" 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) ▶
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 THC Network			Date of Disbursement or Obligation 09 / 10 / 2004	
Mailing Address of Payee 250 Harbor Drive			Amount 6,832.80	
City Stamford, CT	State CT	Zip Code 06904	Communication Date 09 / 10 / 2004	
Name of Employer _____			Occupation _____	

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

Media Buy

Name of Federal Candidate John F. Kerry	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____	Disbursement/Obligation For: <input type="checkbox"/> Primary <input checked="" 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) ▶
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 Disbursements/Obligations This Page (addition) ▶	73,762.05
TOTAL This Period (last page this line number only) ▶ (carry total from last page to Line 10)	68,026.80

SCHEDULE 9-B

Disbursement(s) Made or Obligation(s)

A. Full Name (Last, First, Middle Initial) of Payee Mentzer Media Services, inc. <hr/> Mailing Address of Payee 600 Fairmont Ave., Suite 306 <hr/> City: _____ State: _____ Zip Code: _____ Towson, MD 21286 <hr/> Name of Employer: _____ Occupation: _____	Date of Disbursement or Obligation 0 9 / 1 0 / 2 0 0 4 <hr/> Amount 1 0,7 3 5.2 0 <hr/> Communication Date 0 9 / 1 0 / 2 0 0 4
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Purpose of Disbursement (including title) of communication(s):

Media Commission

Name of Federal Candidate	Office Sought:	<input type="checkbox"/> House	State: _____	Disbursement/Obligation For:
John F. Kerry		<input type="checkbox"/> Senate	District: _____	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
		<input checked="" type="checkbox"/> President		<input type="checkbox"/> Other (specify) _____
Name of Federal Candidate	Office Sought:	<input type="checkbox"/> House	State: _____	Disbursement/Obligation For:
		<input type="checkbox"/> Senate	District: _____	<input type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> President		<input type="checkbox"/> Other (specify) _____
Name of Federal Candidate	Office Sought:	<input type="checkbox"/> House	State: _____	Disbursement/Obligation For:
		<input type="checkbox"/> Senate	District: _____	<input type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> President		<input type="checkbox"/> Other (specify) _____

B. Full Name (Last, First, Middle Initial) of Payee Stevens Reed Curcio & Potholm <hr/> Mailing Address of Payee 305 Cameron St <hr/> City: _____ State: _____ Zip Code: _____ Alexandria, VA 22314 <hr/> Name of Employer: _____ Occupation: _____	Date of Disbursement or Obligation 0 9 / 1 0 / 2 0 0 4 <hr/> Amount 1 1,3 1 3.0 0 <hr/> Communication Date 0 9 / 1 0 / 2 0 0 4
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Purpose of Disbursement (including title) of communication(s):

Media Production/Post

Name of Federal Candidate	Office Sought:	<input type="checkbox"/> House	State: _____	Disbursement/Obligation For:
John F. Kerry		<input type="checkbox"/> Senate	District: _____	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
		<input checked="" type="checkbox"/> President		<input type="checkbox"/> Other (specify) _____
Name of Federal Candidate	Office Sought:	<input type="checkbox"/> House	State: _____	Disbursement/Obligation For:
		<input type="checkbox"/> Senate	District: _____	<input type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> President		<input type="checkbox"/> Other (specify) _____
Name of Federal Candidate	Office Sought:	<input type="checkbox"/> House	State: _____	Disbursement/Obligation For:
		<input type="checkbox"/> Senate	District: _____	<input type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> President		<input type="checkbox"/> Other (specify) _____

SUBTOTAL of Disbursements/Obligations This Page (optional)	2 2 0 4 8.2 0
TOTAL This Period (last page this line number only)	7 0 2 3 1 2 0 0
(carry total from last page to Line 13)	

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.

<input checked="" type="checkbox"/> Hand Delivered	Date of Receipt 9-10-04
<input type="checkbox"/> USPS First Class Mail	Postmarked
<input type="checkbox"/> USPS Registered/Certified	Postmarked (R/C)
<input type="checkbox"/> USPS Priority Mail	Postmarked
	Delivery Confirmation™ Label <input type="checkbox"/>
<input type="checkbox"/> USPS Express Mail	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked
<i>SL</i> PREPARER	9-10-04 DATE PREPARED