

"jerry" <geiercpa@swbell.net> on 09/18/2008 03:23:26 PM

To:

<2022190174@fec.gov>

cc:

Subject: FEC Form 9

Greetings:

Attached is a pdf file for FEC form 9 dated September 19, 2008.



Jerry Geier AmericasMajority.pdf

FEC FORM 9

24 HOUR NOTICE OF DISBURSEMENTS/OBLIGATIONS FOR ELECTIONEERING COMMUNICATIONS

1. Person Making the Disbursements/Obligations		
(a) Name		
(b) Address (number and street) check if different than previous	Inly reported	
8640 TRAVIS	isty reported	2. FEC Identification Number
(c) City State and ZIP Code		C
OVERLAND PARK, KS 66212 (d) Name of Employer or Principal Place of Business		igs v. nips con the constitue on the continue of the continue
(d) Name of Employer or Principal Place of Business	(e) Occup	pation
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√ New	:"M	2008
O to This Contament	Covering Period	1.7 Juli re werd restriction of the most
3. IS This Statement Of	overing Period Fü	through
Amended	in a	09 19 2008
20 - 20 - 10 - 10 - 10 - 10 - 10 - 10 -	· water	
5. (a) Date of Public Distribution(s) 09 19 20	O (b) Communicati	ion Title NAFTA & AGRICULTURE
ART CO.	19-1 M	
6. The filer is a(n): (a) individual (b); Unincorporated C	• •	
(d) Corporation, Labor Organization or Qualified Nonpro	ofit Corporation making cor	mmunications under 11 CFR 114.15
(e) Other, specify:		
(o) Chion appeary.		
7. If the filer is an individual, unincorporated organizat	tion or qualified nonpre	ofit corporation, Yes No No
were the disbursements made exclusively from dor		
8. Custodian of Records		
(a) Name		
RICHARD NADLER		
(b) Address (number and street)		
(c) City, State and ZIP Code	·	
(c) City, State and ZIP Code)	
(d) Name of Employer or Principal Place of Business		cotton
(d) Name of Employer of Principal Place of Business	(e) Occu	pation
	3-3Mat12-1-1	on control stephenologists of control and
9. Total Donations This Statement		i
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	Batter of the Control and the	in anythic meithean and an ediction to the property of the pro
10. Total Disbursements/Obligations This Statement	hora na na padanjana kan a	4.3 92.38
	T. T T. P. P. P. P. P. P. P.	- 111 - 14 mary distantivistance . 1 = 102211944
Under penalty of perjury, I certify that this statement is true, co-	rect and complete.	
TYPE OR PRINT NAME OF PERSON COMPLETING FORM	GERALD G	SEIFR
SIGNATURE Mull Ria	DATE	9-19-2008
Sidily tons	VAIE	

er	son(s) Sharing/Exercising Control		_
A.	(a) Name RICHARD NADLER (b) Address (number and street)		
	8640 MAVIS ST (c) City, State and ZIP Code		
	OVERLAND PACK, KS 66212 (d) Name of Employer or Principal Place of Business	(e) Occupation	
	AMERICAS MAJORITY FOUNDATION	DILEGOR	
В.	(a) Name	procorote	
	(b) Address (number and street)		
	(c) City, State and ZiP Code		
	(d) Name of Employer or Principal Place of Business	(e) Occupation	
c.	(a) Name	,	
	(b) Address (number and street)		
	(c) City, State and ZIP Code	100	
	(d) Name of Employer or Principal Place of Business	(e) Occupation	
D.	(a) Name		
	(b) Address (number and street)		
	(c) City, State and ZIP Code		
	(d) Name of Employer or Principal Place of Business	(e) Occupation	
Ξ.	(a) Name	<u> </u>	
	(b) Address (number and street)		
	(c) City, State and ZIP Code	- Articles	
	(d) Name of Employer or Principal Place of Business	(e) Occupation	

SCHEDULE 9-E	3	
Disbursement(s)	Made o	r Obligation(s)

PAGE / OF Z

A. Full Name (Last, First, Middle Initial) of Payee KKPK - FM Mailing Address of Payee 777 GNANT ST STH FLOOR City State Zip Code	Date of Disbursement or Obligation 10 9 1 5 7 0 0 8 Amount The state of the state of Amount to the state of Amount to the state of the state of Amount to the state of the
DENVER CO 80203 Name of Employer Occupation	Communication Date
NIA	09 19 2008
Purpose of Disbursement (Including title(s) of communication(s))	
RADIO AIR TIME -NAFTA LAGRICULTURE	
Name of Federal Candidate Office Sought: House State:	Disbursement/Obligation For:
BARACK OBAMA Senate District: ————————————————————————————————————	☐ Primary ☑ General ☐ Other (specify) ▶
Name of Federal Candidate Office Sought: House State:	Disbursement/Obligation For:
Senate	Primary General
President District:	Other (specify)
Name of Federal Candidate Office Sought: Senate District: President	Disbursement/Obligation For: Primary General Other (specify)
	Date of Disbursement or Obligation
B. Full Name (Last, First, Middle Initial) of Payee	
KMXA -AM	09 15 2508
Mailing Address of Payee	Amount
5660 GRENWOOD PLAZA	Amount 72675
City State Zip Code	(. Timplement
ENGLEWOOD, CO 80111	Communication Date
Name of Employer Occupation	09 19 12508
N / Ox Purpose of Disbursement (Including title(s) of communication(s))	her a conf. hamether la findentemention and conference
RADIO AIN TIME -NAFTA + AGMCULTURE Name of Federal Candidate Office Sought: House	Dishara satisfication For
State:	Disbursement/Obligation For: Primary Ceneral
BACACK OBAMA Senate District: ————————————————————————————————————	Other (specify) ▶
Name of Federal Candidate Office Sought:	Disbursement/Obligation For:
State:	Primary General
President District:	Other (specify)
Name of Federal Candidate Office Squaht T House	Disbursement/Obligation For:
State:	Primary General
President District:	Other (specify)
SUBTOTAL of Disbursements/Obligations This Page (optional)	inger Breggsteller und der seit in zeit bermeitzerend zweit dem seiten seiten zu des - martys alleigen im gegen aufgestellig dem jest ung prassing geseiten zu - pro- mit dem seiten auf ausser im im presiden meisten zweiten und zweitelle seiten zu - men dem seiten.
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	1,243.13
DENVER, CO 80203 Name of Employer Occupation	Communication Date
Name of Employer Occupation	
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RADIO AIR TIME - NAFTA + AGMCULTURE	
Name of Federal Candidate Office Sought: House State:	Disbursement/Obligation For:
Senate	Primary General
BANK OBAMA President District	Other (specify)
Name of Federal Candidate Office Sought: House State:	Disbursement/Obligation For.
Senate	Primary General
President District:	Other (specify)
Name of Federal Candidate Office Sought: House State:	Disbursement/Obligation For:
Senate	Primary General
President District:	Other (specify)
B. Full Name (Last, First, Middle Initial) of Payee	Date of Disbursement or Obligation
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Mailing Address of Payee	Amount
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City State Zip Code	Insulare, for zette methocodorellers, observativellers of
New of Francisco	Communication Date
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President District:	Other (specify) >
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State:	Primary General
i Senate	<u> </u>
District:	Other (engoity)
President	Other (specify)
Name of Federal Candidate Office Sought: House State:	Disbursement/Obligation For:
Name of Federal Candidate Office Sought House State: Senate	Disbursement/Obligation For: Primary General
Name of Federal Candidate Office Sought: House State:	Disbursement/Obligation For:
Name of Federal Candidate Office Sought House State: Senate District:	Disbursement/Obligation For: Primary General
Name of Federal Candidate Office Sought House State: Senate District:	Disbursement/Obligation For: Primary General
Name of Federal Candidate Office Sought House State: Senate District:	Disbursement/Obligation For: Primary General Other (specify)
Name of Federal Candidate Office Sought: Senate President President House State: Senate President	Disbursement/Obligation For: Primary General Other (specify)
Name of Federal Candidate Office Sought: Senate President Senate President Subtract: Total This Period (last page this line number only)	Disbursement/Obligation For: Primary General Other (specify)
Name of Federal Candidate Office Sought: Senate President Senate President Substrict: Substrict: President Name of Federal Candidate State: Senate President Substrict: Substrict: President	Disbursement/Obligation For: Primary General Other (specify)

(3/2005)

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. Date of Receipt **Hand Delivered** Postmarked **USPS First Class Mail** Postmarked (R/C) USPS Registered/Certified Postmarked **USPS Priority Mail** Delivery Confirmation™ or Signature Confirmation™ Label Postmarked **USPS Express Mail** Postmark Illegible No Postmark **Shipping Date** Overnight Delivery Service (Specify): Next Business Day Delivery **Date of Receipt** Received from House Records & Registration Office **Date of Receipt** Received from Senate Public Records Office **Date of Receipt** Received from Electronic Filing Office Date of Receipt or Postmarked E-Mail Other (Specify): DATE PREPARED