

FEC FORM 9

24 HOUR NOTICE OF DISBURSEMENTS/OBLIGATIONS FOR ELECTIONEERING COMMUNICATIONS

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

(a) Name
The Media Fund

(b) Address (number and street) check if different than previously reported
888 16th Street NW

(c) City, State and ZIP Code
Washington, DC 20006

(d) Name of Employer or Principal Place of Business
N/A

(e) Occupation
N/A

2. FEC Identification Number
N/A

3. Is This Statement New or Amended

4. Covering Period
10/25/2004 through 10/25/2004

5. (a) Date of Public Distribution(s) 10/25/2004 (b) Communication Type Verify records, report equal time provided, direct debit, other as applicable, see instructions, stand by, program

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
Erik Smith

(b) Address (number and street)
888 16th Street NW

(c) City, State and ZIP Code
Washington, DC 20006

(d) Name of Employer or Principal Place of Business
The Media Fund


(e) Occupation
President

9. Total Donations This Statement **675000 00**

10. Total Disbursements/Obligations This Statement **1684753 44**

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.

TYPED OR PRINT NAME OF PERSON COMPLETING FORM Erik Smith

SIGNATURE  DATE 10/26/04

NOTE: Submission of false, erroneous or incomplete information may subject the person signing this statement to the penalties of 2 U.S.C. § 4377.

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

PAGE 1 OF 1

11. Person(s) Sharing/Exercising Control

A. (a) Name	
Erik Smith	
(b) Address (number and street)	
888 16th Street	
(c) City, State and ZIP Code	
Washington, DC 20006	
(d) Name of Employer or Principal Place of Business	(e) Occupation
The Media Fund	President
B. (a) Name	
(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	
(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
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

A. Full Name of Donor

Joseph Field

Mailing Address of Donor

401 City Avenue #809

City

State

Zip

Bala Cynwyd

PA

19004

Date of Receipt

10 25 2004

Amount

675000 00

B. Full Name of Donor

Mailing Address of Donor

City

State

Zip

Date of Receipt

Amount

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)

TOTAL This Period (last page this line number only)

(carry total from last page to Line B)

675000 00

SCHEDULE 9-B

Disbursement(s) Made or Obligation(s)

A. Full Name (Last, First, Middle Initial) of Payee

KDKS-FM

Mailing Address of Payee

3104 S 70th Street

City State Zip Code

Ft Smith AR 72503

Name of Employer Occupation

N/A N/A

Date of Disbursement or Obligation

10 25 2004

Amount

1507.80

Communication Date

10 25 2004

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

Radio Ads: Family Friends, Saudi Combo Rev, Flight Home 10/25/04-11/2/04

Name of Federal Candidate Office Sought: House Senate President State: AR District: _____ Disbursement/Obligation For: Primary General Other (specify) _____

Name of Federal Candidate Office Sought: House Senate President State: _____ District: _____ Disbursement/Obligation For: Primary General Other (specify) _____

Name of Federal Candidate Office Sought: House Senate President State: _____ District: _____ Disbursement/Obligation For: Primary General Other (specify) _____

B. Full Name (Last, First, Middle Initial) of Payee

KSPQ-FM

Mailing Address of Payee

3104 S 70th Street

City State Zip Code

Ft. Smith AR 72503

Name of Employer Occupation

N/A N/A

Date of Disbursement or Obligation

10 25 2004

Amount

547.75

Communication Date

10 25 2004

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

Radio Ads: Family Friends, Saudi Combo Rev, Flight Home 10/25/04-11/2/04

Name of Federal Candidate Office Sought: House Senate President State: AR District: _____ Disbursement/Obligation For: Primary General Other (specify) _____

Name of Federal Candidate Office Sought: House Senate President State: _____ District: _____ Disbursement/Obligation For: Primary General Other (specify) _____

Name of Federal Candidate Office Sought: House Senate President State: _____ District: _____ Disbursement/Obligation For: Primary General Other (specify) _____

SUBTOTAL of Disbursements/Obligations This Page (optional)

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

SCHEDULE 9-B

Disbursement(s) Made or Obligation(s)

A. Full Name (Last, First, Middle Initial) of Payee WFSI-AM			Date of Disbursement or Obligation 10 25 2004	
Mailing Address of Payee 311 Lexington Ave			Amount \$55.00	
City St. Smith	State AR	Zip Code 72901	Communication Date 10 25 2004	
Name of Employer N/A			Occupation N/A	

Purpose of Disbursement (including date(s) of communication(s))
 Radio Ads: Family Friends, Report, Saudi Combo Rev, Flight Home 10/25/04-11/2/04

Name of Federal Candidate George W. Bush	Office Sought <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State AR	Disbursement/Obligation For <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
Name of Federal Candidate	Office Sought	State	Disbursement/Obligation For
Name of Federal Candidate	Office Sought	State	Disbursement/Obligation For

B. Full Name (Last, First, Middle Initial) of Payee KICS-FM			Date of Disbursement or Obligation 10 25 2004	
Mailing Address of Payee 5304 Highway 45 East			Amount 2704.70	
City Ft. Smith	State AR	Zip Code 72916	Communication Date 10 25 2004	
Name of Employer N/A			Occupation N/A	

Purpose of Disbursement (including date(s) of communication(s))
 Radio Ads: Family Friends, Report, Saudi Combo Rev, Flight Home 10/25/04-11/2/04

Name of Federal Candidate George W. Bush	Office Sought <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State AR	Disbursement/Obligation For <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
Name of Federal Candidate	Office Sought	State	Disbursement/Obligation For
Name of Federal Candidate	Office Sought	State	Disbursement/Obligation For

SUBTOTAL of Disbursements/Obligations This Page (optional) _____

TOTAL This Page (last page this line number only) _____
 (carry total from last page to Line 16)

SCHEDULE 9-B

Disbursement(s) Made or Obligation(s)

A. Full Name (Last, First, Middle Initial) of Payee

KSBD-PM

Mailing Address of Payee

311 Lexington Ave

City State Zip Code
Ft. Smith AR 72901

Name of Employer Occupation
N/A N/A

Date of Disbursement or Obligation

10 25 2004

Amount

1542.00

Communication Date

10 25 2004

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

Radio Ads: Family Friends, Report, Saudi Combo Rev, Flight Home 10/25/04-11/2/04

Name of Federal Candidate

Office Sought

House State AR
Senate District
 President

Disbursement/Obligation For:

Primary General

Other (specify)

Name of Federal Candidate

Office Sought

House State
Senate District
 President

Disbursement/Obligation For:

Primary General

Other (specify)

Name of Federal Candidate

Office Sought

House State
Senate District
 President

Disbursement/Obligation For:

Primary General

Other (specify)

B. Full Name (Last, First, Middle Initial) of Payee

KMAG-PM

Mailing Address of Payee

311 Lexington Ave

City State Zip Code
Ft. Smith AR 72901

Name of Employer Occupation
N/A N/A

Date of Disbursement or Obligation

10 25 2004

Amount

3742.50

Communication Date

10 25 2004

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

Radio Ads: Family Friends, Report, Saudi Combo Rev, Flight Home 10/25/04-11/2/04

Name of Federal Candidate

Office Sought

House State AR
Senate District
 President

Disbursement/Obligation For:

Primary General

Other (specify)

Name of Federal Candidate

Office Sought

House State
Senate District
 President

Disbursement/Obligation For:

Primary General

Other (specify)

Name of Federal Candidate

Office Sought

House State
Senate District
 President

Disbursement/Obligation For:

Primary General

Other (specify)

SUBTOTAL of Disbursements/Obligations This Page (optional)

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

SCHEDULE 9-B

Disbursement(s) Made or Obligation(s)

A. Full Name (Last, First, Middle Initial) of Payee KLSZ-FM			Date of Disbursement or Obligation 10 25 2004	
Mailing Address of Payee 3104 E 10th St			Amount 483.00	
City Ft. Smith	State AR	Zip Code 72902	Communication Date 10 25 2004	
Name of Employer N/A			Occupation N/A	

Purpose of Disbursement (including title(s) of communication(s))
 Radio Ads: Family Friends, Report, Saudi Combo Rev, Flight Home 10/25/04-11/2/04

Name of Federal Candidate George W. Bush	Office Sought <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State AR	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 KBIT-AM			Date of Disbursement or Obligation 10 25 2004	
Mailing Address of Payee 407 W parker Rd			Amount 365.50	
City Jonesboro	State AR	Zip Code 72404	Communication Date 10 25 2004	
Name of Employer N/A			Occupation N/A	

Purpose of Disbursement (including title(s) of communication(s))
 Radio Ads: Family Friends, Report, Saudi Combo Rev, Flight Home 10/25/04-11/2/04

Name of Federal Candidate George W. Bush	Office Sought <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State AR	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 (optional) _____

TOTAL This Period (add page this line number only) _____
 (copy total from last page to Line 10)

SCHEDULE 9-B

Disbursement(s) Made or Obligation(s)

A. Full Name (Last, First, Middle Initial) of Payee KDXZ/KDSZ/KJBA-PM				Date of Disbursement or Obligation 10 25 2004	
Mailing Address of Payee 314 Union St				Amount 8334.60	
City Jonesboro		State AR	Zip Code 72401		Communication Date 10 25 2004
Name of Employer N/A		Occupation N/A			
Purpose of Disbursement (including title(s) of communication(s)) Radio Ads: Family Friends, Report, Saudi Condo Rev, Flight Home 10/25/04-11/2/04					
Name of Federal Candidate George W. Bush		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: AR 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 KPIX-FM				Date of Disbursement or Obligation 10 25 2004	
Mailing Address of Payee 407 N Parker Rd				Amount 2016.25	
City Jonesboro		State AR	Zip Code 72404		Communication Date 10 25 2004
Name of Employer N/A		Occupation N/A			
Purpose of Disbursement (including title(s) of communication(s)) Radio Ads: Family Friends, Report, Saudi Condo Rev, Flight Home 10/25/04-11/2/04					
Name of Federal Candidate George W. Bush		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: AR 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 (optional)					
TOTAL This Period (last page this line number only) (carry total from last page to Line 10)					

SCHEDULE 3-B

Disbursement(s) Made or Obligation(s)

A. Full Name (Last, First, Middle Initial) of Payee KSSN-FM			Date of Disbursement or Obligation 10 25 2004	
Mailing Address of Payee 10800 Colonel Glenn Rd			Amount 9557.75	
City Little Rock	State AR	Zip Code 72204	Communication Date 10 25 2004	
Name of Employer N/A			Occupation N/A	

Purpose of Disbursement (including date(s) of communication(s))
 Radio Ads: Family Friends, Report: Saudi Combo Rev, Flight Home 10/25/04-11/2/04

Name of Federal Candidate George W. Bush	Office Sought <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: AR 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 KARN-FM			Date of Disbursement or Obligation 10 25 2004	
Mailing Address of Payee 700 Wellington Hills Rd			Amount 11071.25	
City Little Rock	State AR	Zip Code 72211	Communication Date 10 25 2004	
Name of Employer N/A			Occupation N/A	

Purpose of Disbursement (including date(s) of communication(s))
 Radio Ads: Family Friends, Report: Saudi Combo Rev, Flight Home 10/25/04-11/2/04

Name of Federal Candidate George W. Bush	Office Sought <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: AR 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 (optional) _____

TOTAL This Period (see page this line number only) _____
 (carry total from last page to Line 13)

SCHEDULE 9-B

Disbursement(s) Made or Obligation(s)

A. Full Name (Last, First, Middle Initial) of Payee RWJK-574				Date of Disbursement or Obligation 10 25 2004	
Mailing Address of Payee 10800 Colonel Glenn Rd				Amount \$ 8760.00	
City Little Rock	State AR	Zip Code 72204		Communication Date 10 25 2004	
Name of Employer N/A				Occupation N/A	
Purpose of Disbursement (including title(s) of communication(s)) Radio Ads: Family Friends, Report, Saudi Conbo Rev, Flight Home 10/25/04-11/2/04					
Name of Federal Candidate George W. Bush	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: AR	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 KRPT-PN				Date of Disbursement or Obligation 10 25 2004	
Mailing Address of Payee 3400 Cottondale Ln				Amount \$ 5185.00	
City Little Rock	State AR	Zip Code 72202		Communication Date 10 25 2004	
Name of Employer N/A				Occupation N/A	
Purpose of Disbursement (including title(s) of communication(s)) Radio Ads: Family Friends, Report, Saudi Conbo Rev, Flight Home 10/25/04-11/2/04					
Name of Federal Candidate George W. Bush	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: AR	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 (optional)					
TOTAL This Period (last page this line number only) (carry total from last page to Line 10)					

SCHEDULE 9-B

Disbursement(s) Made or Obligation(s)

A. Full Name (Last, First, Middle Initial) of Payee KHREN-PM			Date of Disbursement or Obligation 10 25 2004	
Mailing Address of Payee 10800 Colonel Glenn Rd			Amount 3646.50	
City Little Rock	State AR	Zip Code 72204	Communication Date 10 25 2004	
Name of Employer N/A			Occupation N/A	

Purpose of Disbursement (including date(s) of communication(s))
 Radio Ads: Family Friends, Report, Saudi Combo Rev, Flight Home 10/25/04-11/2/04

Name of Federal Candidate George W. Bush	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: AR District:	Disbursement/Obligation For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
Name of Federal Candidate	Office Sought:	State: District:	Disbursement/Obligation For:
Name of Federal Candidate	Office Sought:	State: District:	Disbursement/Obligation For:

B. Full Name (Last, First, Middle Initial) of Payee XDRS-SM			Date of Disbursement or Obligation 10 25 2004	
Mailing Address of Payee 1 Shakelford Dr #400			Amount 2452.25	
City Little Rock	State AR	Zip Code 72211	Communication Date 10 25 2004	
Name of Employer N/A			Occupation N/A	

Purpose of Disbursement (including date(s) of communication(s))
 Radio Ads: Family Friends, Report, Saudi Combo Rev, Flight Home 10/25/04-11/2/04

Name of Federal Candidate George W. Bush	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: AR District:	Disbursement/Obligation For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
Name of Federal Candidate	Office Sought:	State: District:	Disbursement/Obligation For:
Name of Federal Candidate	Office Sought:	State: District:	Disbursement/Obligation For:

SUBTOTAL of Disbursements/Obligations This Page (Optional) _____

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

SCHEDULE 9-B

Disbursement(s) Made or Obligation(s)

A. Full Name (Last, First, Middle Initial) of Payee WEGR-FK		Date of Disbursement or Obligation 10 25 2004	
Mailing Address of Payee 2630 Thousand Oaks Blvd #4100		Amount 15385.00	
City Memphis	State TN	Zip Code 38118	Communication Code 10 25 2004
Name of Employer N/A	Occupation N/A		
Purpose of Disbursement (including use(s) of communication(s)) Radio Ads: Family Friends, Report, Saudi Combo Rev, Flight Home 10/25/04-11/2/04			
Name of Federal Candidate George W. Bush	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: TN 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 WSRP-FH		Date of Disbursement or Obligation 10 25 2004	
Mailing Address of Payee 5629 Murray Road		Amount 4238.00	
City Memphis	State TN	Zip Code 38119	Communication Code 10 25 2004
Name of Employer N/A	Occupation N/A		
Purpose of Disbursement (including use(s) of communication(s)) Radio Ads: Family Friends, Report, Saudi Combo Rev, Flight Home 10/25/04-11/2/04			
Name of Federal Candidate George W. Bush	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: AR 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 (optional) _____			
TOTAL This Period (last page this line number only) (carry total from last page to Line 10) _____			

SCHEDULE B-B

Disbursement(s) Made or Obligation(s)

A. Full Name (Last, First, Middle Initial) of Payee NAVE-EM			Date of Disbursement or Obligation 10 25 2004	
Mailing Address of Payee 9904 Ridgeway Center Hwy			Amount 31039.00	
City	State	Zip Code	Communication Date 10 25 2004	
Memphis	TN	38130		
Name of Employer N/A				
Occupation N/A				

Purpose of Disbursement (including title(s) of communication(s))
 Radio Ads: Family Friends, Report, Saudi Combo Rev, Flight Home 10/25/04-11/2/04

Name of Federal Candidate	Office Sought	House	State	IN	Disbursement/Obligation For:
George W. Bush	<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 WRBC-AM			Date of Disbursement or Obligation 10 25 2004	
Mailing Address of Payee 2650 Thousand Oaks Blvd #4100			Amount 3323.50	
City	State	Zip Code	Communication Date 10 25 2004	
Memphis	TN	38118		
Name of Employer N/A				
Occupation N/A				

Purpose of Disbursement (including title(s) of communication(s))
 Radio Ads: Family Friends, Report, Saudi Combo Rev, Flight Home 10/25/04-11/2/04

Name of Federal Candidate	Office Sought	House	State	AR	Disbursement/Obligation For:
George W. Bush	<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) >

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

SCHEDULE 9-B

Disbursement(s) Made or Obligation(s)

A. Full Name (Last, First, Middle Initial) of Payee WMC-FY				Date of Disbursement or Obligation 10/25/2004	
Mailing Address of Payee 1960 Union Ave				Amount 11220.00	
City Memphis	State TN	Zip Code 38104		Communication Date 10/25/2004	
Name of Employer N/A		Occupation N/A			
Purpose of Disbursement (including title(s) of communication(s)) Radio Ads: Family Friends, Report, Saudi Combo Rev, Flight Home 10/25/04-11/2/04					
Name of Federal Candidate George W. Bush	Office Sought <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State TN	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 WGIX-FM				Date of Disbursement or Obligation 10/25/2004	
Mailing Address of Payee 5629 Murray Rd				Amount 10731.25	
City Memphis	State TN	Zip Code 38119		Communication Date 10/25/2004	
Name of Employer N/A		Occupation N/A			
Purpose of Disbursement (including title(s) of communication(s)) Radio Ads: Family Friends, Report, Saudi Combo Rev, Flight Home 10/25/04-11/2/04					
Name of Federal Candidate George W. Bush	Office Sought <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State AL	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 (optional)					
TOTAL This Period (last page this line number only) (copy total from last page to Line 10)					

SCHEDULE B-B

Disbursement(s) Made or Obligation(s)

A. Full Name (Last, First, Middle Initial) of Payee KMJL-PM			Date of Disbursement or Obligation 10 25 2004	
Mailing Address of Payee 2324 Arkansas Blvd			Amount 1037.00	
City Texarkana	State TX	Zip Code 71654	Communication Date 10 25 2004	
Name of Employer N/A			Occupation N/A	

Purpose of Disbursement (including title(s) of communication(s))
 Radio Ads: Family Friends, Report, Saudi Condo Rev, Flight Home 10/25/04-11/2/04

Name of Federal Candidate George W. Bush	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: TX District:	Disbursement/Obligation For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
Name of Federal Candidate	Office Sought:	State:	Disbursement/Obligation For:
Name of Federal Candidate	Office Sought:	State:	Disbursement/Obligation For:

B. Full Name (Last, First, Middle Initial) of Payee KEJR-PM			Date of Disbursement or Obligation 10 25 2004	
Mailing Address of Payee 2324 Arkansas Blvd			Amount 4520.00	
City Texarkana	State TX	Zip Code 71654	Communication Date 10 25 2004	
Name of Employer N/A			Occupation N/A	

Purpose of Disbursement (including title(s) of communication(s))
 Radio Ads: Family Friends, Report, Saudi Condo Rev, Flight Home 10/25/04-11/2/04

Name of Federal Candidate George W. Bush	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: TX District:	Disbursement/Obligation For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
Name of Federal Candidate	Office Sought:	State:	Disbursement/Obligation For:
Name of Federal Candidate	Office Sought:	State:	Disbursement/Obligation For:

SUBTOTAL of Disbursements/Obligations This Page (upward)
TOTAL This Period (last page this line number only)
 (carry total from last page to line 1G)

SCHEDULE 9-B

Disbursement(s) Made or Obligation(s)

A. Full Name (Last, First, Middle Initial) of Payee KRMZ-FM			Date of Disbursement or Obligation 10 25 2004
Mailing Address of Payee 1323 College Dr			Amount 872.10
City TEXARKANA	State TX	Zip Code 75503	Communication Date 10 25 2004
Name of Employer N/A	Occupation N/A		

Purpose of Disbursement (including title(s) of communication(s))
 Radio Ads: Family Friends, Report, Saudi Combo Rev, Flight Home 10/25/04-11/2/04

Name of Federal Candidate George W. Bush	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: TX 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 KFYX-FM			Date of Disbursement or Obligation 10 25 2004
Mailing Address of Payee 615 Olive St			Amount 953.70
City TEXARKANA	State TX	Zip Code 75503	Communication Date 10 25 2004
Name of Employer N/A	Occupation N/A		

Purpose of Disbursement (including title(s) of communication(s))
 Radio Ads: Family Friends, Report, Saudi Combo Rev, Flight Home 10/25/04-11/2/04

Name of Federal Candidate George W. Bush	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: TX 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 (optional) _____

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

SCHEDULE B-B

Disbursement(s) Made or Obligation(s)

A. Full Name (Last, First, Middle Initial) of Payee KYGL-FM			Date of Disbursement or Obligation 10 25 2004
Mailing Address of Payee 3324 Arkansas Blvd			Amount 1785.00
City Texarkana	State TX	Zip Code 71854	Communication Date 10 25 2004
Name of Employer N/A			Occupation N/A

Purpose of Disbursement (including use(s) of communication(s))
 Radio Ads: Family Friends, Report, Saudi Combo Rev, Flight Home 10/25/04-11/3/04

Name of Federal Candidate George W. Bush	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: TX District:	Disbursement/Obligation For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
Name of Federal Candidate	Office Sought:	State:	Disbursement/Obligation For:
Name of Federal Candidate	Office Sought:	State:	Disbursement/Obligation For:

B. Full Name (Last, First, Middle Initial) of Payee WTTA-TV			Date of Disbursement or Obligation 10 25 2004
Mailing Address of Payee 7622 Bald Cypress Pl			Amount 11989.25
City Tampa	State FL	Zip Code 33614	Communication Date 10 25 2004
Name of Employer N/A			Occupation N/A

Purpose of Disbursement (including use(s) of communication(s))
 TV Ads: Family Friends, Report, Saudi Combo Rev, Flight Home 10/25/04-11/3/04

Name of Federal Candidate George W. Bush	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District:	Disbursement/Obligation For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
Name of Federal Candidate	Office Sought:	State:	Disbursement/Obligation For:
Name of Federal Candidate	Office Sought:	State:	Disbursement/Obligation For:

SUBTOTAL of Disbursements/Obligations This Page (optional) _____

TOTAL This Period (last page 9th line number only) _____
 (carry total from last page to Line 10)

SCHEDULE 9-B

Disbursement(s) Made or Obligation(s)

A. Full Name (Last, First, Middle Initial) of Payee WFLA-TV		Date of Disbursement or Obligation 10 25 2004	
Mailing Address of Payee 200 S Parker St		Amount 170996.75	
City Tampa	State FL	Zip Code 33606	Communication Date 10 25 2004
Name of Employer N/A		Occupation N/A	
Purpose of Disbursement (including title(s) of communication(s)) TV Ads: Family Friends, Report, Saudi Combo Rev, Flight Home 10/25/04-11/2/04			
Name of Federal Candidate George W. Bush	Office Sought <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State FL District	Disbursement/Obligation For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
Name of Federal Candidate	Office Sought	State	Disbursement/Obligation For:
Name of Federal Candidate	Office Sought	State	Disbursement/Obligation For:
B. Full Name (Last, First, Middle Initial) of Payee WFTS-TV		Date of Disbursement or Obligation 10 25 2004	
Mailing Address of Payee 4045 W Himes Ave		Amount 69168.75	
City Tampa	State FL	Zip Code 33607	Communication Date 10 25 2004
Name of Employer N/A		Occupation N/A	
Purpose of Disbursement (including title(s) of communication(s)) TV Ads: Family Friends, Report, Saudi Combo Rev, Flight Home 10/25/04-11/2/04			
Name of Federal Candidate George W. Bush	Office Sought <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State FL District	Disbursement/Obligation For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
Name of Federal Candidate	Office Sought	State	Disbursement/Obligation For:
Name of Federal Candidate	Office Sought	State	Disbursement/Obligation For:
SUBTOTAL of Disbursements/Obligations This Page (optional)		
TOTAL This Period (last page this line number only) (carry total from last page to Line 10)		

SCHEDULE 9-B

Disbursement(s) Made or Obligation(s)

A. Full Name (Last, First, Middle Initial) of Payee WTVT-TV				Date of Disbursement or Obligation 10 25 2004	
Mailing Address of Payee 3213 W Kennedy Blvd				Amount 50737.50	
City Tampa	State FL	Zip Code 33609	Communication Date 10 25 2004		
Name of Employer N/A				Occupation N/A	
Purpose of Disbursement (including title(s) of communication(s)) TV Ads: Family Friends, Report, Saudi Combo Rev, Flight Home 10/25/04-11/2/04					
Name of Federal Candidate George W. Bush	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District:	Disbursement/Obligation For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
Name of Federal Candidate	Office Sought:	State: District:	Disbursement/Obligation For:		
Name of Federal Candidate	Office Sought:	State: District:	Disbursement/Obligation For:		
B. Full Name (Last, First, Middle Initial) of Payee WTOG-TV				Date of Disbursement or Obligation 10 25 2004	
Mailing Address of Payee 365 105th Terrace NE				Amount 2850.00	
City St. Petersburg	State FL	Zip Code 33715	Communication Date 10 25 2004		
Name of Employer N/A				Occupation N/A	
Purpose of Disbursement (including title(s) of communication(s)) TV Ads: Family Friends, Report, Saudi Combo Rev, Flight Home 10/25/04-11/2/04					
Name of Federal Candidate George W. Bush	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District:	Disbursement/Obligation For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
Name of Federal Candidate	Office Sought:	State: District:	Disbursement/Obligation For:		
Name of Federal Candidate	Office Sought:	State: District:	Disbursement/Obligation For:		
SUBTOTAL of Disbursements/Obligations This Page (optional)					
TOTAL This Period (last page this line number only) (carry over from last page to line 10)					

SCHEDULE 9-B

Disbursement(s) Made or Obligation(s)

A. Full Name (Last, First, Middle Initial) of Payee WTSP-TV		Date of Disbursement or Obligation OCT 25 2004	
Mailing Address of Payee 11450 Gandy Blvd N		Amount 25500.00	
City St. Petersburg	State FL	Zip Code 33702	Communication Date OCT 25 2004
Name of Employer N/A		Occupation N/A	
Purpose of Disbursement (including title(s) of commercial(s)) TV Ads: Family Friends, Report, Saudi Combo Rev, Flight Home 10/25/04-11/2/04			
Name of Federal Candidate George W. Bush	Office Sought <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State FL District	Disbursement/Obligation For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
Name of Federal Candidate	Office Sought	State	Disbursement/Obligation For:
Name of Federal Candidate	Office Sought	State	Disbursement/Obligation For:
B. Full Name (Last, First, Middle Initial) of Payee XFLSA-TV		Date of Disbursement or Obligation OCT 25 2004	
Mailing Address of Payee 1377 University Blvd NE		Amount 1275.00	
City Albuquerque	State NM	Zip Code 87102	Communication Date OCT 25 2004
Name of Employer N/A		Occupation N/A	
Purpose of Disbursement (including title(s) of commercial(s)) TV Ads: Family Friends, Report, Saudi Combo Rev, Flight Home 10/25/04-11/2/04			
Name of Federal Candidate George W. Bush	Office Sought <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State NM District	Disbursement/Obligation For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
Name of Federal Candidate	Office Sought	State	Disbursement/Obligation For:
Name of Federal Candidate	Office Sought	State	Disbursement/Obligation For:
SUBTOTAL of Disbursements/Obligations This Page (optional)			
TOTAL This Period (last page this line number only) (carry total from last page to line 10)			

SCHEDULE 9-B

Disbursement(s) Made or Obligation(s)

A. Full Name (Last, First, Middle Initial) of Payee KDAT-TV				Date of Disbursement or Obligation 10 25 2004	
Mailing Address of Payee 3851 Carlisle Blvd NE				Amount 59338.50	
City Albuquerque	State NM	Zip Code 87107		Communication Date 10 25 2004	
Name of Employer N/A				Occupation N/A	
Purpose of Disbursements (including title(s) of communication(s)) TV Ads: Family Friends, Report, Saudi Combo Rev, Flight Home 10/25/04-11/2/04					
Name of Federal Candidate George W. Bush	Office Sought <input checked="" type="checkbox"/> President	House <input type="checkbox"/> Senate	State: NM District: _____	Disbursement/Obligation For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
Name of Federal Candidate	Office Sought	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	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 KOB-TV				Date of Disbursement or Obligation 10 25 2004	
Mailing Address of Payee 4 Broadcast Plz SW				Amount 54443.50	
City Albuquerque	State NM	Zip Code 87104		Communication Date 10 25 2004	
Name of Employer N/A				Occupation N/A	
Purpose of Disbursements (including title(s) of communication(s)) TV Ads: Family Friends, Report, Saudi Combo Rev, Flight Home 10/25/04-11/2/04					
Name of Federal Candidate George W. Bush	Office Sought <input checked="" type="checkbox"/> President	House <input type="checkbox"/> Senate	State: NM District: _____	Disbursement/Obligation For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
Name of Federal Candidate	Office Sought	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	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 (optional)					
TOTAL This Period (last page this line number only) (carry total from last page to Line 10)					

SCHEDULE D-B

Disbursement(s) Made or Obligation(s)

A. Full Name (Last, First, Middle Initial) of Payee KRQE-TV		Date of Disbursement or Obligation 10 25 2004	
Mailing Address of Payee 13 Broadcast Plaza SW		Amount 17425.00	
City Albuquerque	State NM	Zip Code 87106	Communication Date 10 25 2004
Name of Employer N/A	Occupation N/A		
Purpose of Disbursement (including title(s) of communication(s)) TV Ads: Family Friends, Report, Saudi Combo Rev, Flight Home 10/25/04-11/2/04			
Name of Federal Candidate George W. Bush	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: NM 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 KWBQ-TV		Date of Disbursement or Obligation 10 25 2004	
Mailing Address of Payee 8341 Washington St NE		Amount 3032.79	
City Albuquerque	State NM	Zip Code 87113	Communication Date 10 25 2004
Name of Employer N/A	Occupation N/A		
Purpose of Disbursement (including title(s) of communication(s)) TV Ads: Family Friends, Report, Saudi Combo Rev, Flight Home 10/25/04-11/2/04			
Name of Federal Candidate George W. Bush	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NM 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 (optional)			
TOTAL This Period (add page this for number only) (carry total from last page to line 10)			

SCHEDULE 9-B

Disbursement(s) Made or Obligation(s)

A. Full Name (Last, First, Middle Initial) of Payee WEKP-TV		Date of Disbursement or Obligation 10 25 2004	
Mailing Address of Payee 8455 Peach Street		Amount 2380.00	
City Erie	State PA	Zip Code 16509	Communication Date 10 25 2004
Name of Employer N/A	Occupation N/A		
Purpose of Disbursement (including title(s) of communication(s)) TV Ads: Family Friends, Report, Saudi Combo Rev, Flight Home 10/25/04-11/2/04			
Name of Federal Candidate George W. Bush	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District:	Disbursement/Obligation For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
Name of Federal Candidate	Office Sought:	State:	Disbursement/Obligation For:
Name of Federal Candidate	Office Sought:	State:	Disbursement/Obligation For:
B. Full Name (Last, First, Middle Initial) of Payee WESE-TV		Date of Disbursement or Obligation 10 25 2004	
Mailing Address of Payee 1220 Peach Street		Amount 14510.75	
City Erie	State PA	Zip Code 16501	Communication Date 10 25 2004
Name of Employer N/A	Occupation N/A		
Purpose of Disbursement (including title(s) of communication(s)) TV Ads: Family Friends, Report, Saudi Combo Rev, Flight Home 10/25/04-11/2/04			
Name of Federal Candidate George W. Bush	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District:	Disbursement/Obligation For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
Name of Federal Candidate	Office Sought:	State:	Disbursement/Obligation For:
Name of Federal Candidate	Office Sought:	State:	Disbursement/Obligation For:
SUBTOTAL of Disbursements/Obligations This Page (optional)			
TOTAL This Period (last page this line number only) (carry total from last page to Line 10)			

SCHEDULE B-B

Disbursement(s) Made or Obligation(s)

A. Full Name (Last, First, Middle Initial) of Payer WJET-TV				Date of Disbursement or Obligation 10 25 2004	
Mailing Address of Payer 8455 Peach Street				Amount 30855.25	
City Erie	State PA	Zip Code 16509	Communication Date 10 25 2004		
Name of Employer N/A		Occupation N/A			
Purpose of Disbursement (including title(s) of communication(s)) TV Ads: Family Friends, Report, Saudi Combo Rev, Flight Home 10/25/04-11/2/04					
Name of Federal Candidate George W. Bush	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA 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 Payer WICD-TV				Date of Disbursement or Obligation 10 25 2004	
Mailing Address of Payer 3514 State St				Amount 16664.00	
City Erie	State PA	Zip Code 16509	Communication Date 10 25 2004		
Name of Employer N/A		Occupation N/A			
Purpose of Disbursement (including title(s) of communication(s)) TV Ads: Family Friends, Report, Saudi Combo Rev, Flight Home 10/25/04-11/2/04					
Name of Federal Candidate George W. Bush	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA 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 (optional)					
TOTAL This Period (last page the line number only) (carry total from last page to Line 10)					

SCHEDULE 9-B

Disbursement(s) Made or Obligation(s)

A. Full Name (Last, First, Middle Initial) of Payee Time Warner-Eric				Date of Disbursement or Obligation 10 25 2004	
Mailing Address of Payee 130 Washington Ave BXC				Amount 566.50	
City Albany	State NY	Zip Code 12203			
Name of Employer N/A		Occupation N/A		Communication Date 10 25 2004	
Purpose of Disbursement (including title(s) of communication(s)) Radio Ads: Family Friends, Report, Saudi Combo Rev, Flight Home 10/25/04-11/2/04					
Name of Federal Candidate George W. Bush	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: PA	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 Adolphia-Eric				Date of Disbursement or Obligation 10 25 2004	
Mailing Address of Payee 325 Delaware Ave #210				Amount 632.40	
City Buffalo	State NY	Zip Code 14202			
Name of Employer N/A		Occupation N/A		Communication Date 10 25 2004	
Purpose of Disbursement (including title(s) of communication(s)) Radio Ads: Family Friends, Report, Saudi Combo Rev, Flight Home 10/25/04-11/2/04					
Name of Federal Candidate George W. Bush	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: PA	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 (optional)				_____	
TOTAL This Period (last page this line number only) (carry total from last page to Line 10)				_____	

SCHEDULE 9-B

Disbursement(s) Made or Obligation(s)

A. Full Name (Last, First, Middle Initial) of Payee WJH-TV		Date of Disbursement or Obligation 10 25 2004	
Mailing Address of Payee 5000 6th Ave		Amount 26337.25	
City Altoona	State PA	Zip Code 16602	Communication Date 10 25 2004
Name of Employer N/A	Occupation N/A		
Purpose of Disbursement (Including title(s) of communication(s)) TV Ads: Family Friends, Report, Saudi Combo Rev, Flight Rome 10/25/04-11/2/04			
Name of Federal Candidate George W. Bush	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: PA 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 WJAC-TV		Date of Disbursement or Obligation 10 25 2004	
Mailing Address of Payee 49 Old Hickory Ln		Amount 15605.00	
City Johnstown	State PA	Zip Code 15905	Communication Date 10 25 2004
Name of Employer N/A	Occupation N/A		
Purpose of Disbursement (Including title(s) of communication(s)) TV Ads: Family Friends, Report, Saudi Combo Rev, Flight Rome 10/25/04-11/2/04			
Name of Federal Candidate George W. Bush	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: PA 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 (optional)			
TOTAL This Period (last page this line number only) (carry total from last page to Line 10)			

SCHEDULE A-B

Disbursement(s) Made or Obligation(s)

A. Full Name (Last, First, Middle Initial) of Payee NWCP-TV				Date of Disbursement or Obligation 10 25 2004	
Mailing Address of Payee 1450 Scalp Ave				Amount 2996.25	
City Johnstown	State PA	Zip Code 15904		Communication Date 10 25 2004	
Name of Employer N/A		Occupation N/A			
Purpose of Disbursement (including title(s) of communication(s)) TV Ads: Family Friends, Report, Saudi Combo Rev, Flight Home 10/25/04-11/2/04					
Name of Federal Candidate George W. Bush	Office Sought <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State PA	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 NWCP-TV				Date of Disbursement or Obligation 10 25 2004	
Mailing Address of Payee 1450 Scalp Ave				Amount 2672.50	
City Johnstown	State PA	Zip Code 15904		Communication Date 10 25 2004	
Name of Employer N/A		Occupation N/A			
Purpose of Disbursement (including title(s) of communication(s)) TV Ads: Family Friends, Report, Saudi Combo Rev, Flight Home 10/25/04-11/2/04					
Name of Federal Candidate George W. Bush	Office Sought <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State PA	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 (optional)				-----	
TOTAL This Period (last page this and number only) (copy total from last page to Line 10)				-----	

SCHEDULE 9-B

Disbursement(s) Made or Obligation(s)

A. Full Name (Last, First, Middle Initial) of Payee Adelpia-Johnstown			Date of Disbursement or Obligation 10 25 2004		
Mailing Address of Payee 35 Resnick Rd			Amount 1045.50		
City Plymouth	State MA	Zip Code 02360	Communication Date 10 25 2004		
Name of Employer N/A			Occupation N/A		
Purpose of Disbursement (including title(s) of communication(s)) TV Ads: Family Friends, Report, Saudi Conbo Rev, Flight Home 10/25/04-11/2/04					
Name of Federal Candidate George W. Bush	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: MA District:	Disbursement/Obligation For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
Name of Federal Candidate	Office Sought:	State: District:	Disbursement/Obligation For:		
Name of Federal Candidate	Office Sought:	State: District:	Disbursement/Obligation For:		
B. Full Name (Last, First, Middle Initial) of Payee WYBP-TV			Date of Disbursement or Obligation 10 25 2004		
Mailing Address of Payee 15 Montage Mountain Rd			Amount 55675.00		
City Moosic	State PA	Zip Code 18507	Communication Date 10 25 2004		
Name of Employer N/A			Occupation N/A		
Purpose of Disbursement (including title(s) of communication(s)) TV Ads: Family Friends, Report, Saudi Conbo Rev, Flight Home 10/25/04-11/2/04					
Name of Federal Candidate George W. Bush	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District:	Disbursement/Obligation For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
Name of Federal Candidate	Office Sought:	State: District:	Disbursement/Obligation For:		
Name of Federal Candidate	Office Sought:	State: District:	Disbursement/Obligation For:		
SUBTOTAL of Disbursement/Obligations This Page (optional)					
TOTAL This Period (last page this line number only) (copy total from last page to Line 10)					

SCHEDULE 9-B

Disbursement(s) Made or Obligation(s)

A. Full Name (Last, First, Middle Initial) of Payee WOLF-TV		Date of Disbursement or Obligation 10 25 2004	
Mailing Address of Payee 1181 Highway 315		Amount 14812.25	
City Plains	State PA	Zip Code 18702	Communication Date 10 25 2004
Name of Employer N/A	Occupation N/A		
Purpose of Disbursement (including title) or communication(s) TV Ads: Family Friends, Report, Saudi Combo Rev, Flight Home 10/25/04-11/2/04			
Name of Federal Candidate George W. Bush	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: PA 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 Target Media-Wilkes Barre		Date of Disbursement or Obligation 10 25 2004	
Mailing Address of Payee 100 Broadcat Dr		Amount 1572.50	
City Bloomfield	State NJ	Zip Code 07003	Communication Date 10 25 2004
Name of Employer N/A	Occupation N/A		
Purpose of Disbursement (including title) or communication(s) TV Ads: Family Friends, Report, Saudi Combo Rev, Flight Home 10/25/04-11/2/04			
Name of Federal Candidate George W. Bush	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: PA 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 (top line)		_____	
TOTAL This Period (last page line (to number only)) (carry total from last page to Line 10)		_____	

SCHEDULE 9-B

Disbursement(s) Made or Obligation(s)

A. Full Name (Last, First, Middle Initial) of Payee WERE-TV			Date of Disbursement or Obligation 10 25 2004	
Mailing Address of Payee 62 E Franklin St			Amount 44583.50	
City Wilkes Barre	State PA	Zip Code 18701	Communication Date 10 25 2004	
Name of Employer Y/A			Occupation N/A	
Purpose of Disbursement (including title(s) of communication(s)) TV Ads: Family Friends, Report, Saudi Combo Rev, Flight Home 10/25/04-11/2/04				
Name of Federal Candidate George W. Bush	Office Sought <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State PA District	Disbursement/Obligation For <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Name of Federal Candidate	Office Sought	State District	Disbursement/Obligation For <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Name of Federal Candidate	Office Sought	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 NYOU-TV			Date of Disbursement or Obligation 10 25 2004	
Mailing Address of Payee 402 Lackawanna Ave			Amount 22563.25	
City Scranton	State PA	Zip Code 18503	Communication Date 10 25 2004	
Name of Employer N/A			Occupation N/A	
Purpose of Disbursement (including title(s) of communication(s)) TV Ads: Family Friends, Report, Saudi Combo Rev, Flight Home 10/25/04-11/2/04				
Name of Federal Candidate George W. Bush	Office Sought <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State PA District	Disbursement/Obligation For <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Name of Federal Candidate	Office Sought	State District	Disbursement/Obligation For <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Name of Federal Candidate	Office Sought	State District	Disbursement/Obligation For <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
SUBTOTAL of Disbursements/Obligations This Page (optional)			_____	
TOTAL This Period (last page this line number only) (carry into last page to line 19)			_____	

SCHEDULE B-B

Disbursement(s) Made or Obligation(s)

A. Full Name (Last, First, Middle Initial) of Payee WISN-TV			Date of Disbursement or Obligation 10 25 2004		
Mailing Address of Payee 12100 W Howard Ave			Amount 2332.00		
City Milwaukee	State WI	Zip Code 53228	Communication Date 10 25 2004		
Name of Employer N/A			Occupation N/A		
Purpose of Disbursement (including title(s) of communication(s)) Radio Ads: Family Friends, Report, Gaudi Combo Rev, Flight Home 10/25/04-11/2/04					
Name of Federal Candidate George W. Bush	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: WI 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 WJZL-FM			Date of Disbursement or Obligation 10 25 2004		
Mailing Address of Payee 2979 N Mayfair Rd			Amount 4590.00		
City Milwaukee	State WI	Zip Code 53222	Communication Date 10 25 2004		
Name of Employer N/A			Occupation N/A		
Purpose of Disbursement (including title(s) of communication(s)) Radio Ads: Family Friends, Report, Gaudi Combo Rev, Flight Home 10/25/04-11/2/04					
Name of Federal Candidate George W. Bush	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: WI 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 (optional)					
TOTAL This Period (last page this line number only) (carry total from last page to Line 10)					

SCHEDULE 3-B

Disbursement(s) Made or Obligation(s)

A. Full Name (Last, First, Middle Initial) of Payee WKTI-FM				Date of Disbursement or Obligation 10 25 2004	
Mailing Address of Payee 720 E Capitol Dr				Amount 7650.00	
City Milwaukee	State WI	Zip Code 53212	Communication Date 10 25 2004		
Name of Employer N/A		Occupation N/A			
Purpose of Disbursement (including title) of communication(s) Radio Ads - Family Friends, Report, Saudi Combo Rev, Flight Home 10/25/04-11/2/04					
Name of Federal Candidate George W. Bush	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: WI District:	Disbursement/Obligation For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
Name of Federal Candidate	Office Sought:	State: District:	Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
Name of Federal Candidate	Office Sought:	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 WLTQ-FM				Date of Disbursement or Obligation 10 25 2004	
Mailing Address of Payee 12100 W Howard Ave				Amount 7480.00	
City Milwaukee	State WI	Zip Code 53226	Communication Date 10 25 2004		
Name of Employer N/A		Occupation N/A			
Purpose of Disbursement (including title) of communication(s) Radio Ads: Family Friends, Report, Saudi Combo Rev, Flight Home 10/25/04-11/2/04					
Name of Federal Candidate George W. Bush	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: WI District:	Disbursement/Obligation For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
Name of Federal Candidate	Office Sought:	State: District:	Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
Name of Federal Candidate	Office Sought:	State: District:	Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
SUBTOTAL of Disbursements/Obligations This Page (optional)					
TOTAL This Period (last page this line number only) (carry total from last page to Line 10)					

SCHEDULE 3-B

Disbursement(s) Made or Obligation(s)

A. Full Name (Last, First, Middle Initial) of Payee WMZX-FM			Date of Disbursement or Obligation 10 25 2004		
Mailing Address of Payee 11600 W Grange Ave			Amount 15869.50		
City Hales Corner	State WI	Zip Code 53130	Communication Date 10 25 2004		
Name of Employer N/A			Occupation N/A		
Purpose of Disbursement (Including title(s) of communication(s)) Radio Ads: Family Friends, Report, Saudi Combo Rev, Flight Home 10/25/04-11/2/04					
Name of Federal Candidate George W. Bush	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: WI	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 WRIT-FM			Date of Disbursement or Obligation 10 25 2004		
Mailing Address of Payee 12100 W Howard Ave			Amount 10030.00		
City Greenfield	State WI	Zip Code 53228	Communication Date 10 25 2004		
Name of Employer N/A			Occupation N/A		
Purpose of Disbursement (Including title(s) of communication(s)) Radio Ads: Family Friends, Report, Saudi Combo Rev, Flight Home 10/25/04-11/2/04					
Name of Federal Candidate George W. Bush	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: WI	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 (optional): _____					
TOTAL This Period (last page this line number only): _____ (carry total from last page to Line 10)					

SCHEDULE B-B

Disbursement(s) Made or Obligation(s)

A. Full Name (Last, First, Middle initial) of Payee WXSS-FM				Date of Disbursement or Obligation 10 25 2004	
Mailing Address of Payee 11800 Grange Ave				Amount 8197.90	
City Wales Corner	State WI	Zip Code 53130	Communication Date 10 25 2004		
Name of Employer N/A			Occupation N/A		
Purpose of Disbursement (including title(s) of communication(s)) Radio Ads: Family Friends, Report, Saudi Combo Rev, Flight Home 10/25/04-11/2/04					
Name of Federal Candidate George W. Bush	Office Sought <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State WI	District _____	Disbursement/Obligation For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) >	
Name of Federal Candidate	Office Sought	State	District	Disbursement/Obligation For:	
Name of Federal Candidate	Office Sought	State	District	Disbursement/Obligation For:	
B. Full Name (Last, First, Middle initial) of Payee Media Strategies & Research				Date of Disbursement or Obligation 10 25 2004	
Mailing Address of Payee 1580 Lincoln Street #510				Amount 21188.27	
City Denver	State CO	Zip Code 80203	Communication Date _____		
Name of Employer N/A			Occupation N/A		
Purpose of Disbursement (including title(s) of communication(s)) Commission on TV/Radio Ads					
Name of Federal Candidate George W. Bush	Office Sought <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State WI	District _____	Disbursement/Obligation For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) >	
Name of Federal Candidate	Office Sought	State	District	Disbursement/Obligation For:	
Name of Federal Candidate	Office Sought	State	District	Disbursement/Obligation For:	
SUBTOTAL of Disbursements/Obligations This Page (optional)					
TOTAL This Period (see page this line number only) (carry total from last page to Line 10)					

SCHEDULE 9-B

Disbursement(s) Made or Obligation(s)

A. Full Name (Last, First, Middle Initial) of Payee WFLD-TV			Date of Disbursement or Obligation 10 25 2004		
Mailing Address of Payee 3411 W Tharpe Street			Amount 3900.00		
City Tallahassee	State FL	Zip Code 32303	Communication Date 10 25 2004		
Name of Employer N/A			Occupation N/A		
Purpose of Disbursement (including title(s) of communication(s)) Radio Ads: Choose to Fight, Not an Accident 10/25/04-11/2/04					
Name of Federal Candidate George W. Bush	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: FL 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 WHEX-TV			Date of Disbursement or Obligation 10 25 2004		
Mailing Address of Payee 3411 W Tharpe Street			Amount 8075.00		
City Tallahassee	State FL	Zip Code 32303	Communication Date 10 25 2004		
Name of Employer N/A			Occupation N/A		
Purpose of Disbursement (including title(s) of communication(s)) Radio Ads: Choose to Fight, Not an Accident 10/25/04-11/2/04					
Name of Federal Candidate George W. Bush	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: FL 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)		
GRAND TOTAL of Disbursements/Obligations This Page (optional)					
TOTAL This Period (less page than five number only) (carry total from last page to Line 11)					

SCHEDULE 9-B

Disbursement(s) Made or Obligation(s)

A. Full Name (Last, First, Middle Initial) of Payee WMBX-TV				Date of Disbursement or Obligation 10 25 2004	
Mailing Address of Payee 701 Northpoint Pkwy #500				Amount 10642.00	
City W. Palm Beach	State FL	Zip Code 33407	Communication Date 10 25 2004		
Name of Employer N/A		Occupation N/A			
Purpose of Disbursement (including title(s) of communication(s)) Radio Ads: Choose to Fight, Not an Accident 10/25/04-11/2/04					
Name of Federal Candidate George W. Bush	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District:	Disbursement/Obligation For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
Name of Federal Candidate	Office Sought:	State:	Disbursement/Obligation For:		
Name of Federal Candidate	Office Sought:	State:	Disbursement/Obligation For:		
B. Full Name (Last, First, Middle Initial) of Payee WJBY-TV				Date of Disbursement or Obligation 10 25 2004	
Mailing Address of Payee 701 Northpoint Pkwy #500				Amount 6290.00	
City W. Palm Beach	State FL	Zip Code 33407	Communication Date 10 25 2004		
Name of Employer N/A		Occupation N/A			
Purpose of Disbursement (including title(s) of communication(s)) Radio Ads: Choose to Fight, Not an Accident 10/25/04-11/2/04					
Name of Federal Candidate George W. Bush	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District:	Disbursement/Obligation For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
Name of Federal Candidate	Office Sought:	State:	Disbursement/Obligation For:		
Name of Federal Candidate	Office Sought:	State:	Disbursement/Obligation For:		
SUBTOTAL of Disbursements/Obligations This Page (optional)					
TOTAL This Period (last page the line number only) (carry over from last page to Line 10)					

SCHEDULE 9-B

Disbursement(s) Made or Obligation(s)

A. Full Name (Last, First, Middle Initial) of Payee WBLX-FM				Date of Disbursement or Obligation 10 25 2004	
Mailing Address of Payee 2600 Daupin Street #104				Annual 10370.00	
City Mobile	State AL	Zip Code 36606		Communication Date 10 25 2004	
Name of Employer N/A		Occupation N/A			
Purpose of Disbursement (including title(s) of communication(s)) Radio Ads: Choose to Fight, Not an Accident 10/23/04-11/2/04					
Name of Federal Candidate George W. Bush	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District:	Disbursement/Obligation For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		
Name of Federal Candidate	Office Sought:	State:	Disbursement/Obligation For:		
Name of Federal Candidate	Office Sought:	State:	Disbursement/Obligation For:		
B. Full Name (Last, First, Middle Initial) of Payee WTMG-FM				Date of Disbursement or Obligation 10 25 2004	
Mailing Address of Payee 245 W University				Annual 9850.00	
City Gainesville	State FL	Zip Code 32601		Communication Date 10 25 2004	
Name of Employer N/A		Occupation N/A			
Purpose of Disbursement (including title(s) of communication(s)) Radio Ads: Choose to Fight, Not an Accident 10/25/04-11/2/04					
Name of Federal Candidate George W. Bush	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District:	Disbursement/Obligation For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		
Name of Federal Candidate	Office Sought:	State:	Disbursement/Obligation For:		
Name of Federal Candidate	Office Sought:	State:	Disbursement/Obligation For:		
SUBTOTAL of Disbursements/Obligations This Page (optional) ▶					
TOTAL This Period (last page this line number only) ▶ (carry total from last page to Line 10)					

SCHEDULE B-B

Disbursement(s) Made or Obligation(s)

A. Full Name (Last, First, Middle Initial) of Payee WLOQ-FM				Date of Disbursement or Obligation 10 25 2004	
Mailing Address of Payee 170 W Fairbanks #200				Amount \$123.75	
City Winter Park	State FL	Zip Code 32769	Communication Date 10 25 2004		
Name of Employer N/A		Occupation N/A			
Purpose of Disbursement (including type(s) of communication(s)) Radio Ads: Choose to Fight, Not an Accident 10/25/04-11/2/04					
Name of Federal Candidate George W. Bush	Office Sought <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State FL District	Disbursement/Obligation For <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
Name of Federal Candidate	Office Sought	State District	Disbursement/Obligation For <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
Name of Federal Candidate	Office Sought	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 WCFB-FM				Date of Disbursement or Obligation 10 25 2004	
Mailing Address of Payee 1292 N John Young Pkwy				Amount 3850.00	
City Orlando	State FL	Zip Code 32804	Communication Date 10 25 2004		
Name of Employer N/A		Occupation N/A			
Purpose of Disbursement (including type(s) of communication(s)) Radio Ads: Choose to Fight, Not an Accident 10/25/04-11/2/04					
Name of Federal Candidate George W. Bush	Office Sought <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State FL District	Disbursement/Obligation For <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
Name of Federal Candidate	Office Sought	State District	Disbursement/Obligation For <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
Name of Federal Candidate	Office Sought	State District	Disbursement/Obligation For <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
SUBTOTAL of Disbursements/Obligations This Page (optional)					
TOTAL This Period (add page this line number only) (copy total from last page to Line 10)					

SCHEDULE B-B

Disbursement(s) Made or Obligation(s)

A. Full Name (Last, First, Middle Initial) of Payee NJFF-FM				Date of Disbursement or Obligation 10 25 2004	
Mailing Address of Payee 4192 N John Young Hwy				Amount 8416.00	
City Orlando	State FL	Zip Code 32804	Communication Date 10 25 2004		
Name of Employer N/A		Occupation N/A			
Purpose of Disbursement (including title(s) of communication(s)) Radio Ads: Choose to Fight, Not an Accident 10/25/04-11/2/04					
Name of Federal Candidate George W. Bush	Office Sought <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State FL	Disbursement/Obligation For <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
Name of Federal Candidate	Office Sought	State	Disbursement/Obligation For		
Name of Federal Candidate	Office Sought	State	Disbursement/Obligation For		
B. Full Name (Last, First, Middle Initial) of Payee WELD-FM				Date of Disbursement or Obligation 10 25 2004	
Mailing Address of Payee 9721 Executive Center Dr #200				Amount 19550.00	
City St Petersburg	State FL	Zip Code 33702	Communication Date 10 25 2004		
Name of Employer N/A		Occupation N/A			
Purpose of Disbursement (including title(s) of communication(s)) Radio Ads: Choose to Fight, Not an Accident 10/25/04-11/2/04					
Name of Federal Candidate George W. Bush	Office Sought <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State FL	Disbursement/Obligation For <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
Name of Federal Candidate	Office Sought	State	Disbursement/Obligation For		
Name of Federal Candidate	Office Sought	State	Disbursement/Obligation For		
SUBTOTAL of Disbursements/Obligations This Page (colense)					
TOTAL This Period (total page this line number only) (carry total from last page to Line 10)					

SCHEDULE 9-B

Disbursement(s) Made or Obligation(s)

A. Full Name (Last, First, Middle Initial) of Payee WBPT-TV				Date of Disbursement or Obligation 10 25 2004	
Mailing Address of Payee 9721 Executive Center Dr W #200				Amount 17000.00	
City St. Petersburg	State FL	Zip Code 33702	Communication Date 10 25 2004		
Name of Employer N/A		Occupation N/A			
Purpose of Disbursement (including title(s) of communication(s)) Radio Ads: Choose to Fight, Not an Accident 10/25/04-11/2/04					
Name of Federal Candidate George W. Bush	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District:	Disbursement/Obligation For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
Name of Federal Candidate	Office Sought:	State:	Disbursement/Obligation For:		
Name of Federal Candidate	Office Sought:	State:	Disbursement/Obligation For:		
B. Full Name (Last, First, Middle Initial) of Payee WBPT-TV				Date of Disbursement or Obligation 10 25 2004	
Mailing Address of Payee 4002 W Gandy Blvd				Amount 7385.00	
City Tampa	State FL	Zip Code 33611	Communication Date 10 25 2004		
Name of Employer N/A		Occupation N/A			
Purpose of Disbursement (including title(s) of communication(s)) Radio Ads: Choose to Fight, Not an Accident 10/25/04-11/2/04					
Name of Federal Candidate George W. Bush	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District:	Disbursement/Obligation For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
Name of Federal Candidate	Office Sought:	State:	Disbursement/Obligation For:		
Name of Federal Candidate	Office Sought:	State:	Disbursement/Obligation For:		
SUBTOTAL of Disbursements/Obligations This Page (optional)					
TOTAL This Period (next page %s line number only) (carry total from last page to Line 10)					

SCHEDULE 9-B

Disbursement(s) Made or Obligation(s)

A. Full Name (Last, First, Middle Initial) of Payee WTKP-AM				Date of Disbursement or Obligation 10 25 2004	
Mailing Address of Payee 5207 E Washington St				Amount 15898.10	
City Tampa	State FL	Zip Code 33619	Communication Date 10 25 2004		
Name of Employer N/A		Occupation N/A			
Purpose of Disbursement (including title(s) of communication(s)) Radio Ads: Choose to Fight, Not an Accident 10/25/04-11/2/04					
Name of Federal Candidate George W. Bush	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: FL	Disbursement/Obligation For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
Name of Federal Candidate	Office Sought:	State:	Disbursement/Obligation For:		
Name of Federal Candidate	Office Sought:	State:	Disbursement/Obligation For:		
B. Full Name (Last, First, Middle Initial) of Payee WEDR-FM				Date of Disbursement or Obligation 10 25 2004	
Mailing Address of Payee 2741 N 29th Ave				Amount 12520.00	
City Hollywood	State FL	Zip Code 33020	Communication Date 10 25 2004		
Name of Employer N/A		Occupation N/A			
Purpose of Disbursement (including title(s) of communication(s)) Radio Ads: Choose to Fight, Not an Accident 10/25/04-11/2/04					
Name of Federal Candidate George W. Bush	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: FL	Disbursement/Obligation For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
Name of Federal Candidate	Office Sought:	State:	Disbursement/Obligation For:		
Name of Federal Candidate	Office Sought:	State:	Disbursement/Obligation For:		
SUBTOTAL of Disbursements/Obligations This Page (optional)					
TOTAL This Period (last page this line number only) (carry total from last page to Line 10)					

SCHEDULE 9-B

Disbursement(s) Made or Obligation(s)

A. Full Name (Last, First, Middle Initial) of Payee WMIB-FM		Date of Disbursement or Obligation 10 25 2004	
Mailing Address of Payee 7601 Riviera Blvd Miramar FL 33023		Amount 1955.00	
Name of Employer N/A		Occupation N/A	
Purpose of Disbursement (including title(s) of communication(s)) Radio Ads: Choose to Fight, Not an Accident 10/25/04-11/2/04			
Name of Federal Candidate George W. Bush	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: FL 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 WSRP-AM		Date of Disbursement or Obligation 10 25 2004	
Mailing Address of Payee 4431 Rock Island Rd Tamarac FL 33119		Amount 1150.00	
Name of Employer N/A		Occupation N/A	
Purpose of Disbursement (including title(s) of communication(s)) Radio Ads: Choose to Fight, Not an Accident 10/25/04-11/2/04			
Name of Federal Candidate George W. Bush	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: FL 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 (optional)			
TOTAL This Period (last page this line number only) (carry total from last page to Line 10)			

SCHEDULE 9-B

Disbursement(s) Made or Obligation(s)

A. Full Name (Last, First, Middle Initial) of Payee WAVE-AM Mailing Address of Payee 6360 SW 11st Place City State Zip Code Davie FL 33314 Name of Employer Occupation N/A N/A		Date of Disbursement or Obligation 10 25 2004 Amount 1613.00 Communication Date 10 25 2004
Purpose of Disbursement (including title(s) of communication(s)) Radio Ads: Choose to Fight, Not an Accident 10/25/04-11/2/04		
Name of Federal Candidate George W. Bush	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: FL 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 WMBH-AM Mailing Address of Payee 13242 NW 7th Ave City State Zip Code Miami FL 33168 Name of Employer Occupation N/A N/A		Date of Disbursement or Obligation 10 25 2004 Amount 7954.00 Communication Date 10 25 2004
Purpose of Disbursement (including title(s) of communication(s)) Radio Ads: Choose to Fight, Not an Accident 10/25/04-11/2/04		
Name of Federal Candidate George W. Bush	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: FL 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 Disbursement/Obligations This Page (optional)		
TOTAL This Period (last page this line number only) (carry total from last page to Line 10)		

SCHEDULE 9-B

Disbursement(s) Made or Obligation(s)

A. Full Name (Last, First, Middle Initial) of Payee WLQY-AM				Date of Disbursement or Obligation 10 25 2004	
Mailing Address of Payee 10800 Biscayne Blvd #810				Amount 1176.00	
City Miami	State FL	Zip Code 33161	Communication Date 10 25 2004		
Name of Employer N/A				Occupation N/A	
Purpose of Disbursement (including title(s) of communication(s)) Radio Ads: Choose to Fight, Not an Accident 10/25/04-11/2/04					
Name of Federal Candidate George W. Bush	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District:	Disbursement/Obligation For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
Name of Federal Candidate	Office Sought:	State:	Disbursement/Obligation For:		
Name of Federal Candidate	Office Sought:	State:	Disbursement/Obligation For:		
B. Full Name (Last, First, Middle Initial) of Payee WSOJ-FM				Date of Disbursement or Obligation 10 25 2004	
Mailing Address of Payee 11700 Central Pkwy				Amount 12987.50	
City Jacksonville	State FL	Zip Code 32224	Communication Date 10 25 2004		
Name of Employer N/A				Occupation N/A	
Purpose of Disbursement (including title(s) of communication(s)) Radio Ads: Choose to Fight, Not an Accident 10/25/04-11/2/04					
Name of Federal Candidate George W. Bush	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District:	Disbursement/Obligation For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
Name of Federal Candidate	Office Sought:	State:	Disbursement/Obligation For:		
Name of Federal Candidate	Office Sought:	State:	Disbursement/Obligation For:		
SUBTOTAL of Disbursements/Obligations This Page (optional)					
TOTAL This Period (last page this line number only) (copy total from last page to Line 10)					

SCHEDULE 9-B

Disbursement(s) Made or Obligation(s)

A. Full Name (Last, First, Middle Initial) of Payee WJBT-FM		Date of Disbursement or Obligation 10 25 2004		
Mailing Address of Payee 11700 Central Parkway City: Jacksonville State: FL Zip Code: 32224		Amount 7712.50		
Name of Employer N/A		Communication Date 10 25 2004		
Purpose of Disbursement (Including title(s) of communication(s)) Radio Ads: Choose to Fight, Not an Accident 10/25/04-11/2/04				
Name of Federal Candidate	Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input checked="" type="checkbox"/>	State: FL District: _____	Disbursement/Obligation For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
George W. Bush				
Name of Federal Candidate	Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	State: _____ District: _____	Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
Name of Federal Candidate	Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	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 WFLM-FM		Date of Disbursement or Obligation 10 25 2004		
Mailing Address of Payee 5803 S Federal Hwy City: Ft. St. Julie State: FL Zip Code: 34952		Amount 2346.00		
Name of Employer N/A		Communication Date 10 25 2004		
Purpose of Disbursement (Including title(s) of communication(s)) Radio Ads: Choose to Fight, Not an Accident 10/25/04-11/2/04				
Name of Federal Candidate	Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input checked="" type="checkbox"/>	State: FL District: _____	Disbursement/Obligation For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
George W. Bush				
Name of Federal Candidate	Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	State: _____ District: _____	Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
Name of Federal Candidate	Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	State: _____ District: _____	Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
SUBTOTAL of Disbursements/Obligations (This Page (optional)) _____				
TOTAL This Period (last page this line number only) _____ (carry total from last page to Line 10)				

SCHEDULE 9-B

Disbursement(s) Made or Obligation(s)

A. Full Name (Last, First, Middle Initial) of Payer WNPV-FM				Date of Disbursement or Obligation 10 25 2004	
Mailing Address of Payer 20800 Center Ridge Rd #312				Amount \$ 5065.09	
City Cleveland	State OH	Zip Code 45229	Communication Date 10 25 2004		
Name of Employer N/A				Occupation N/A	
Purpose of Disbursement (including date(s) of communication(s)) Radio Ads: Choose to Fight, Not an Accident 10/25/04-11/2/04					
Name of Federal Candidate George W. Bush	Office Sought <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State OH	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 Payer WZAK-FM				Date of Disbursement or Obligation 10 25 2004	
Mailing Address of Payer 2510 St Clair Ave				Amount \$ 6842.50	
City Cleveland	State OH	Zip Code 44114	Communication Date 10 25 2004		
Name of Employer N/A				Occupation N/A	
Purpose of Disbursement (including date(s) of communication(s)) Radio Ads: Choose to Fight, Not an Accident 10/25/04-11/2/04					
Name of Federal Candidate George W. Bush	Office Sought <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State OH	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 (optional)				_____	
TOTAL This Page (add page this line number only) (carry total from last page to Line 10)				_____	

SCHEDULE 9-B

Disbursement(s) Made or Obligation(s)

A. Full Name (Last, First, Middle Initial) of Payee WENZ-FM				Date of Disbursement or Obligation 10 25 2004	
Mailing Address of Payee 2512 St Clair Ave				Amount 7663.00	
City Cleveland	State OH	Zip Code 44114	Communication Date 10 25 2004		
Name of Employer N/A				Occupation N/A	
Purpose of Disbursement (including title) of communication(s) Radio Ads: Choose to Fight, Not an Accident 10/25/04-11/2/04					
Name of Federal Candidate George W. Bush	Office Sought <input checked="" type="checkbox"/> President	House Senate	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	House Senate	State District	Disbursement/Obligation For <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Name of Federal Candidate	Office Sought	House Senate	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 WCIN-AM				Date of Disbursement or Obligation 10 25 2004	
Mailing Address of Payee 3540 Reading Rd				Amount 1428.00	
City Cincinnati	State OH	Zip Code 45202	Communication Date 10 25 2004		
Name of Employer N/A				Occupation N/A	
Purpose of Disbursement (including title) of communication(s) Radio Ads: Choose to Fight, Not an Accident 10/25/04-11/2/04					
Name of Federal Candidate George W. Bush	Office Sought <input checked="" type="checkbox"/> President	House Senate	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	House Senate	State District	Disbursement/Obligation For <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Name of Federal Candidate	Office Sought	House Senate	State District	Disbursement/Obligation For <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
SUBTOTAL of Disbursements/Obligations This Page (optional)					
TOTAL This Period (last page this line number only) (carry total from last page to Line 10)					

SCHEDULE 9-B

Disbursement(s) Made or Obligation(s)

A. Full Name (Last, First, Middle initial) of Payee WZZP-FM				Date of Disbursement or Obligation 10 25 2004	
Mailing Address of Payee 750 Central Ave #200				Amount 7140.00	
City Cincinnati	State OH	Zip Code 45202	Communication Date 10 25 2004		
Name of Employer N/A		Occupation N/A			
Purpose of Disbursement (including title(s) of communication(s)) Radio Ads: Choose to Fight, not an Accident 10/25/04-11/2/04					
Name of Federal Candidate George W. Bush	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: OH	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 WDBZ-AM				Date of Disbursement or Obligation 10 25 2004	
Mailing Address of Payee 750 Central Ave #200				Amount 1628.00	
City Cincinnati	State OH	Zip Code 45202	Communication Date 10 25 2004		
Name of Employer N/A		Occupation N/A			
Purpose of Disbursement (including title(s) of communication(s)) Radio Ads: Choose to Fight, not an Accident 10/25/04-11/2/04					
Name of Federal Candidate George W. Bush	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: OH	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 (if total)					
TOTAL This Form (last page file the number only) (carry total from last page to Line 10)					

SCHEDULE 9-B

Disbursement(s) Made or Obligation(s)

A. Full Name (Last, First, Middle Initial) of Payee WIREZ-FN		Date of Disbursement or Obligation 10 25 2004	
Mailing Address of Payee 5744 Southwyck Blvd #200		Amount 3220.00	
City Toledo	State OH	Zip Code 43614	Communication Date 10 25 2004
Name of Employer N/A	Occupation N/A		
Purpose of Disbursement (including date(s) of communication(s)) Radio Ads: Choose to Fight, Not an Accident 10/25/04-11/2/04			
Name of Federal Candidate George W. Bush	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: OH	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: _____	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: _____	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 MJUC-FN		Date of Disbursement or Obligation 10 25 2004	
Mailing Address of Payee 5902 Southwyck Blvd		Amount 4080.00	
City Toledo	State OH	Zip Code 43614	Communication Date 10 25 2004
Name of Employer N/A	Occupation N/A		
Purpose of Disbursement (including date(s) of communication(s)) Radio Ads: Choose to Fight, Not an Accident 10/25/04-11/2/04			
Name of Federal Candidate George W. Bush	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: OH	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: _____	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: _____	Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
SUBTOTAL of Disbursements/Obligations This Page (optional)			
TOTAL This Period (last page this line number only) (carry total from last page to line 10)			

SCHEDULE 9-B

Disbursement(s) Made or Obligation(s)

A. Full Name (Last, First, Middle Initial) of Payee WRBP-AM				Date of Disbursement or Obligation 10/25/2004	
Mailing Address of Payee 36 Federal Plaza W #1200				Amount 4426.00	
City Youngstown	State OH	Zip Code 44512	Communication Date 10/25/2004		
Name of Employer N/A				Occupation N/A	
Purpose of Disbursement (including title(s) of communication(s)) Radio Ads: Choose to Fight, Not an Accident 10/25/04-11/2/04					
Name of Federal Candidate George W. Bush	Office Sought <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input 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 WRCK-FM				Date of Disbursement or Obligation 10/25/2004	
Mailing Address of Payee 750 Central Ave #200				Amount 9140.00	
City Cincinnati	State OH	Zip Code 45202	Communication Date 10/25/2004		
Name of Employer N/A				Occupation N/A	
Purpose of Disbursement (including title(s) of communication(s)) Radio Ads: Choose to Fight, Not an Accident 10/25/04-11/2/04					
Name of Federal Candidate George W. Bush	Office Sought <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input 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 (optional)					
TOTAL This Period (last page this line number only) (carry total from last page to Line 10)					

SCHEDULE 9-B

Disbursement(s) Made or Obligation(s)

A. Full Name (Last, First, Middle Initial) of Payee WJRG-PM				Date of Disbursement or Obligation 10 26 2004	
Mailing Address of Payee 750 Central Ave #200				Amount 5964.00	
City Cincinnati	State OH	Zip Code 45202	Communication Date 10 25 2004		
Name of Employer N/A				Occupation N/A	
Purpose of Disbursement (including title(s) of communication(s)) Radio Ads: Choose to Fight, Not an Accident 10/25/04-11/2/04					
Name of Federal Candidate George W. Bush	Office Sought <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State _____ District _____	State OH	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 _____	State _____	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 _____	State _____	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 WRNB-PM				Date of Disbursement or Obligation 10 26 2004	
Mailing Address of Payee 750 Central Ave #200				Amount 5950.00	
City Cincinnati	State OH	Zip Code 43202	Communication Date 10 25 2004		
Name of Employer N/A				Occupation N/A	
Purpose of Disbursement (including title(s) of communication(s)) Radio Ads: Choose to Fight, Not an Accident 10/25/04-11/2/04					
Name of Federal Candidate George W. Bush	Office Sought <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State _____ District _____	State OH	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 _____	State _____	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 _____	State _____	Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) >	
SUBTOTAL of Disbursements/Obligations This Page (optional)				_____	
TOTAL This Period (last page this line number only) (carry total from last page to line 10)				_____	

SCHEDULE 9-B

Disbursement(s) Made or Obligation(s)

A. Full Name (Last, First, Middle Initial) of Payee WAMC-AM			Date of Disbursement or Obligation 10 25 2004	
Mailing Address of Payee 960 Penn Ave #200			Amount 3000.00	
City Pittsburgh	State PA	Zip Code 15222	Communication Date 10 25 2004	
Name of Employer N/A			Occupation N/A	

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

Radio Ads: Choose to Fight, Not an Accident 10/25/04-11/2/04

Name of Federal Candidate George W. Bush	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA	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 WAMC-FM			Date of Disbursement or Obligation 10 25 2004	
Mailing Address of Payee 960 Penn Ave #200			Amount 4080.00	
City Pittsburgh	State PA	Zip Code 15222	Communication Date 10 25 2004	
Name of Employer N/A			Occupation N/A	

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

Radio Ads: Choose to Fight, Not an Accident 10/25/04-11/2/04

Name of Federal Candidate George W. Bush	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: PA	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 Disbursement/Obligations This Page (optional)

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

SCHEDULE 9-B

Disbursement(s) Made or Obligation(s)

A. Full Name (Last, First, Middle Initial) of Payee NDAS-FM		Date of Disbursement or Obligation 10 25 2004
Mailing Address of Payee 23 West City Ave		Amount 31620.00
City Bala Cynwyd	State PA	Zip Code 19004
Name of Employer N/A		Occupation N/A
Purpose of Disbursement (including title(s) of communication(s)) Radio Ads: Choose to Fight, Not an Accident 10/25/04-11/2/04		
Name of Federal Candidate George W. Bush	Office Sought <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input 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	Disbursement/Obligation For
Name of Federal Candidate	Office Sought	Disbursement/Obligation For
B. Full Name (Last, First, Middle Initial) of Payee WDSL-FM		Date of Disbursement or Obligation 10 25 2004
Mailing Address of Payee 23 West City Ave		Amount 22430.00
City Bala Cynwyd	State PA	Zip Code 19004
Name of Employer N/A		Occupation N/A
Purpose of Disbursement (including title(s) of communication(s)) Radio Ads: Choose to Fight, Not an Accident 10/25/04-11/2/04		
Name of Federal Candidate George W. Bush	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	Disbursement/Obligation For
Name of Federal Candidate	Office Sought	Disbursement/Obligation For
SUBTOTAL of Disbursements/Obligations This Page (optional)		
TOTAL This Period (last page this line number only) (copy total from last page to Line 10)		

SCHEDULE 9-B

Disbursement(s) Made or Obligation(s)

A. Full Name (Last, First, Middle Initial) of Payee WEDAT-AM		Date of Disbursement or Obligation 10 25 2004
Mailing Address of Payee 10 Sturs Ln #204		Amount 7160.00
City Philadelphia	State PA	Zip Code 19127
Name of Employer N/A	Occupation N/A	Communication Date 10 25 2004
Purpose of Disbursement (including title) of communication(s) Radio Ads: Choose to Fight, Not an Accident 10/25/04-11/2/04		
Name of Federal Candidate George W. Bush	Office Sought <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State PA 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 WMCS-AM		Date of Disbursement or Obligation 10 25 2004
Mailing Address of Payee 2975 N Mayfair Rd		Amount 8000.00
City Milwaukee	State WI	Zip Code 53222
Name of Employer N/A	Occupation N/A	Communication Date 10 25 2004
Purpose of Disbursement (including title) of communication(s) Radio Ads: Choose to Fight, Not an Accident 10/25/04-11/2/04		
Name of Federal Candidate George W. Bush	Office Sought <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State PA 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 (optional)		
TOTAL This Period (on page this line number only) (carry total from last page to Line 10)		

SCHEDULE 9-B

Disbursement(s) Made or Obligation(s)

A. Full Name (Last, First Middle Initial) of Payee WKXV-FM		Date of Disbursement or Obligation 10 25 2004
Mailing Address of Payee 12100 W Howard Ave		Amount 2160.00
City Milwaukee	State WI	Zip Code 53228
Name of Employer N/A	Occupation N/A	Communication Date 10 25 2004
Purpose of Disbursement (including title(s) of communication(s)) Radio Ads: Choose to Fight, Not an Accident 10/25/04-11/2/04		
Name of Federal Candidate George W. Bush	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WI 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 WGNR-FM		Date of Disbursement or Obligation 10 25 2004
Mailing Address of Payee 8407 W McKinley		Amount 4080.00
City Milwaukee	State WI	Zip Code 53208
Name of Employer N/A	Occupation N/A	Communication Date 10 25 2004
Purpose of Disbursement (including title(s) of communication(s)) Radio Ads: Choose to Fight, Not an Accident 10/25/04-11/2/04		
Name of Federal Candidate George W. Bush	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WI 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 (optional)		
TOTAL This Period (see page one line number only) (copy total from last page to Line 10)		

SCHEDULE 9-B

Disbursement(s) Made or Obligation(s)

A. Full Name (Last, First Middle Initial) of Payee WJZI-FM				Date of Disbursement or Obligation 10 25 2004	
Mailing Address of Payee 2979 N Mayfair Rd				Amount 14280.00	
City Milwaukee	State WI	Zip Code 53222	Communication Date 10 25 2004		
Name of Employer N/A		Occupation N/A			
Purpose of Disbursement (including title(s) of communication(s)) Radio Ads: Choose to Fight, Not an Accident 10/29/04-11/2/04					
Name of Federal Candidate George W. Bush	Office Sought <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State WI	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 _____	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 _____	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 WJLB-AM				Date of Disbursement or Obligation 10 25 2004	
Mailing Address of Payee 6151 W 33rd St				Amount 1860.00	
City Milwaukee	State WI	Zip Code 53209	Communication Date 10 25 2004		
Name of Employer N/A		Occupation N/A			
Purpose of Disbursement (including title(s) of communication(s)) Radio Ads: Choose to Fight, Not an Accident 10/25/04-11/2/04					
Name of Federal Candidate George W. Bush	Office Sought <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State WI	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 _____	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 _____	Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____		
SUBTOTAL of Disbursements/Obligations This Page (optional)				_____	
TOTAL This Period (last page this line number only) (carry over from last page to Line 10)				_____	

SCHEDULE 9-B

Disbursement(s) Made or Obligation(s)

A. Full Name (Last, First, Middle Initial) of Payee WBOV-AM		Date of Disbursement or Obligation 10 25 2004	
Mailing Address of Payee 3816 N Teutonia Ave		Amount 1900.00	
City Milwaukee	State WI	Zip Code 53206	Communication Date 10 25 2004
Name of Employer N/A		Occupation N/A	
Purpose of Disbursement (including title) of communication(s) Radio Ads: Choose to Fight, Not an Accident 10/25/04-11/2/04			
Name of Federal Candidate George W. Bush	Office Sought <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State WI	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 _____	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 _____	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 NKPC-FM		Date of Disbursement or Obligation 10 25 2004	
Mailing Address of Payee 200 Stoddard St		Amount 1487.59	
City Beaver Dam	State WI	Zip Code 53916	Communication Date 10 25 2004
Name of Employer N/A		Occupation N/A	
Purpose of Disbursement (including title) of communication(s) Radio Ads: Choose to Fight, Not an Accident 10/25/04-11/2/04			
Name of Federal Candidate George W. Bush	Office Sought <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State WI	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 _____	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 _____	Disbursement/Obligation For <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
SUBTOTAL of Disbursements/Obligations This Page (optional)		_____	
TOTAL This Period (last page this line number only) (carry over from last page to Line 50)		_____	

SCHEDULE B-B

Disbursement(s) Made or Obligation(s)

A. Full Name (Last, First, Middle Initial) of Payee KVBC-FM				Date of Disbursement or Obligation 10 25 2004	
Mailing Address of Payee 3999 Las Vegas Blvd S #K				Amount 6120.00	
City Las Vegas	State NV	Zip Code 89119	Communication Date 10 25 2004		
Name of Employer N/A		Occupation N/A			
Purpose of Disbursement (including date) or communication(s) Radio Ads: Choose to Fight, Not an Accident 10/25/04-11/2/04					
Name of Federal Candidate George W. Bush	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: NV District:	Disbursement/Obligation For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
Name of Federal Candidate	Office Sought:	State:	Disbursement/Obligation For:		
Name of Federal Candidate	Office Sought:	State:	Disbursement/Obligation For:		
B. Full Name (Last, First, Middle Initial) of Payee KQAS-FM				Date of Disbursement or Obligation 10 25 2004	
Mailing Address of Payee 2726 E Desert Inn Rd				Amount 4080.00	
City Las Vegas	State NV	Zip Code 89121	Communication Date 10 25 2004		
Name of Employer N/A		Occupation N/A			
Purpose of Disbursement (including date) or communication(s) Radio Ads: Choose to Fight, Not an Accident 10/25/04-11/2/04					
Name of Federal Candidate George W. Bush	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NV District:	Disbursement/Obligation For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
Name of Federal Candidate	Office Sought:	State:	Disbursement/Obligation For:		
Name of Federal Candidate	Office Sought:	State:	Disbursement/Obligation For:		
SUBTOTAL of Disbursements/Obligations This Page (optional)					
TOTAL This Period (last page this line number only) (carry total from last page to Line 10)					

SCHEDULE B-B

Disbursement(s) Made or Obligation(s)

A. Full Name (Last, First, Middle Initial) of Payee KVG5-R14		Date of Disbursement or Obligation 10 / 25 / 2004	
Mailing Address of Payee 7725 E Desert Inn Rd		Amount 5100.00	
City Las Vegas	State NV	Zip Code 89121	Communication Date 10 / 25 / 2004
Name of Employer N/A		Occupation N/A	
Purpose of Disbursement (including type) of communication(s) Radio Ads: Choose to Fight, Not an Accident 10/25/04-11/2/04			
Name of Federal Candidate George W. Bush	Office Sought <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State NV 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 KWID-PM		Date of Disbursement or Obligation 10 / 25 / 2004	
Mailing Address of Payee 7800B Meade Ave #150		Amount 6624.00	
City Las Vegas	State NV	Zip Code 89102	Communication Date 10 / 25 / 2004
Name of Employer N/A		Occupation N/A	
Purpose of Disbursement (including type) of communication(s) Radio Ads: Choose to Fight, Not an Accident 10/25/04-11/2/04			
Name of Federal Candidate George W. Bush	Office Sought <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State NV 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 (optional)		_____	
TOTAL This Form (last page this line number only) (copy total from last page to line 10)		_____	

SCHEDULE 9-B

Disbursement(s) Made or Obligation(s)

A. Full Name (Last, First, Middle Initial) of Payee WDHT-FM		Date of Disbursement or Obligation 10 25 2004
Mailing Address of Payee 750 Central Ave #200		Amount 5950.00
City Cincinnati	State OH	Zip Code 45202
Name of Employer N/A	Occupation N/A	Communication Date 10 25 2004
Purpose of Disbursement (including date(s) of communication(s)) Radio Ads: Choose to Fight, Not an Accident 10/25/04-11/3/04		
Name of Federal Candidate George W. Bush	Office Sought <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input 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 KJZI-FM		Date of Disbursement or Obligation 10 25 2004
Mailing Address of Payee 1600 Utica Ave S		Amount 9887.00
City Minneapolis	State MN	Zip Code 55416
Name of Employer N/A	Occupation N/A	Communication Date 10 25 2004
Purpose of Disbursement (including date(s) of communication(s)) Radio Ads: Choose to Fight, Not an Accident 10/25/04-11/2/04		
Name of Federal Candidate George W. Bush	Office Sought <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input 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 (add all)		_____
TOTAL This Period (last page this line number only) (carry total from last page to Line 10)		_____

SCHEDULE 9-B

Disbursement(s) Made or Obligation(s)

A. Full Name (Last, First, Middle Initial) of Payee KPRS-FM				Date of Disbursement or Obligation 10 25 2004	
Mailing Address of Payee 111310 Colorado Ave				Amount 13995.00	
City Kansas City	State MO	Zip Code 64137	Communication Date 10 25 2004		
Name of Employer N/A				Occupation N/A	
Purpose of Disbursement (including title(s) of communication(s)) Radio Ad: Choose to Fight, Not an Accident 10/25/04-11/2/04					
Name of Federal Candidate George W. Bush	Office Sought <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State MO	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 _____	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 _____	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 KPRT-AM				Date of Disbursement or Obligation 10 25 2004	
Mailing Address of Payee 111310 Colorado Ave				Amount 3066.00	
City Kansas City	State MO	Zip Code 64137	Communication Date 10 25 2004		
Name of Employer N/A				Occupation N/A	
Purpose of Disbursement (including title(s) of communication(s)) Radio Ad: Choose to Fight, Not an Accident 10/25/04-11/2/04					
Name of Federal Candidate George W. Bush	Office Sought <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State MO	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 _____	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 _____	Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
SUBTOTAL of Disbursements/Obligations This Page (optional)					
TOTAL This Period (last page gets the number only) (carry total from last page to Line 10)					

SCHEDULE 9-B

Disbursement(s) Made or Obligation(s)

A. Full Name (Last, First, Middle Initial) of Payee KJJK-FM		Date of Disbursement or Obligation 10 25 2004
Mailing Address of Payee 4330 Blue Ridge Blvd City: Kansas City State: MO Zip Code: 63141		Amount 12175.00
Name of Employer N/A		Occupation N/A
Purpose of Disbursement (including title) of communication(s) Radio Ads: Choose to Fight, Not an Accident 10/25/04-11/2/04		
Name of Federal Candidate George W. Bush	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: MO District:
		Disbursement/Obligation For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
Name of Federal Candidate	Office Sought:	State:
		Disbursement/Obligation For:
Name of Federal Candidate	Office Sought:	State:
		Disbursement/Obligation For:
B. Full Name (Last, First, Middle Initial) of Payee KJJK-FM		Date of Disbursement or Obligation 10 25 2004
Mailing Address of Payee 10155 Corporate Square Dr City: St. Louis State: MO Zip Code: 63132		Amount 20902.50
Name of Employer N/A		Occupation N/A
Purpose of Disbursement (including title) of communication(s) Radio Ads: Choose to Fight, Not an Accident 10/25/04-11/2/04		
Name of Federal Candidate George W. Bush	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: MO District:
		Disbursement/Obligation For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
Name of Federal Candidate	Office Sought:	State:
		Disbursement/Obligation For:
Name of Federal Candidate	Office Sought:	State:
		Disbursement/Obligation For:
SUBTOTAL of Disbursements/Obligations This Page (addition)		\$ 12175.00
TOTAL This Period (last page thru 5th number only) (carry over from last page to Line 10)		\$ 12175.00

SCHEDULE 9-B

Disbursement(s) Made or Obligation(s)

A. Full Name (Last, First, Middle Initial) of Payer KATZ-PM			Date of Disbursement or Obligation 10 25 2004		
Mailing Address of Payer 10155 Corporate Square Dr			Amount 14280.00		
City	State	Zip Code	Communication Date 10 25 2004		
St. Louis	MO	63132			
Name of Employer	Occupation				
N/A	N/A				
Purpose of Disbursement (including date(s) of communication(s)) Radio Ads: Choose to Fight, Not an Accident 10/25/04-11/2/04					
Name of Federal Candidate	Office Sought:	House	State:	Disbursement/Obligation For:	
George W. Bush	<input type="checkbox"/> House	Senate	MO	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
	<input checked="" type="checkbox"/> President	District:		<input type="checkbox"/> Other (specify)	
Name of Federal Candidate	Office Sought:	House	State:	Disbursement/Obligation For:	
	<input type="checkbox"/> House	Senate		<input type="checkbox"/> Primary <input type="checkbox"/> General	
	<input type="checkbox"/> President	District:		<input type="checkbox"/> Other (specify)	
Name of Federal Candidate	Office Sought:	House	State:	Disbursement/Obligation For:	
	<input type="checkbox"/> House	Senate		<input type="checkbox"/> Primary <input type="checkbox"/> General	
	<input type="checkbox"/> President	District:		<input type="checkbox"/> Other (specify)	
B. Full Name (Last, First, Middle Initial) of Payer KATZ-JM			Date of Disbursement or Obligation 10 25 2004		
Mailing Address of Payer 10155 Corporate Square Dr			Amount 5187.05		
City	State	Zip Code	Communication Date 10 25 2004		
St. Louis	MO	63132			
Name of Employer	Occupation				
N/A	N/A				
Purpose of Disbursement (including date(s) of communication(s)) Radio Ads: Choose to Fight, Not an Accident 10/25/04-11/2/04					
Name of Federal Candidate	Office Sought:	House	State:	Disbursement/Obligation For:	
George W. Bush	<input type="checkbox"/> House	Senate	MO	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
	<input checked="" type="checkbox"/> President	District:		<input type="checkbox"/> Other (specify)	
Name of Federal Candidate	Office Sought:	House	State:	Disbursement/Obligation For:	
	<input type="checkbox"/> House	Senate		<input type="checkbox"/> Primary <input type="checkbox"/> General	
	<input type="checkbox"/> President	District:		<input type="checkbox"/> Other (specify)	
Name of Federal Candidate	Office Sought:	House	State:	Disbursement/Obligation For:	
	<input type="checkbox"/> House	Senate		<input type="checkbox"/> Primary <input type="checkbox"/> General	
	<input type="checkbox"/> President	District:		<input type="checkbox"/> Other (specify)	
SUBTOTAL of Disbursements/Obligations This Page (dollars)					
TOTAL This Period (last page this line number only) (carry total from last page to line 10)					

SCHEDULE 9-B

Disbursement(s) Made or Obligation(s)

A. Full Name (Last, First, Middle Initial) of Payee Radio One				Date of Disbursement or Obligation 10 25 2004	
Mailing Address of Payee 5900 Princess Garden Fwy				Amount 43482.00	
City Lanham	State MD	Zip Code 20706	Communication Date 10 25 2004		
Name of Employer N/A				Occupation N/A	
Purpose of Disbursement (including title(s) of communication(s)) Radio Ads: Choose to Fight, not an Accident 10/25/04-11/2/04					
Name of Federal Candidate George W. Bush	Office Sought <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State Nat: 1	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 Black Entertainment Television				Date of Disbursement or Obligation 10 25 2004	
Mailing Address of Payee P.O. Box 20026				Amount 169439.45	
City Newark	State NJ	Zip Code 07102	Communication Date 10 25 2004		
Name of Employer N/A				Occupation N/A	
Purpose of Disbursement (including title(s) of communication(s)) Radio Ads: Choose to Fight, not an Accident 10/25/04-11/2/04					
Name of Federal Candidate George W. Bush	Office Sought <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State Nat: 1	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 (optional)				_____	
TOTAL This Period (last page this line number only) (carry total from last page to Line 10)				_____	

SCHEDULE B-B

Disbursement(s) Made or Obligation(s)

A. Full Name (Last, First, Middle Initial) of Payee HBC				Date of Disbursement or Obligation 10/25/04	
Mailing Address of Payee 800 Forrest St NW				Amount 12367.57	
City Atlanta	State GA	Zip Code 30318			
Name of Employer N/A		Occupation N/A	Commission Date 10/25/2004		
Purpose of Disbursement (including title(s) of communication(s)) Radio Ads: Choose to Fight, Not an Accident 10/25/04-11/2/04					
Name of Federal Candidate George W. Bush	Office Sought <input checked="" type="checkbox"/> President	<input type="checkbox"/> House <input type="checkbox"/> Senate	State Mat #1	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	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	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				Date of Disbursement or Obligation	
Mailing Address of Payee				Amount	
City	State	Zip Code			
Name of Employer		Occupation	Commission Date		
Purpose of Disbursement (including title(s) of communication(s))					
Name of Federal Candidate	Office Sought	<input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State	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	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	Disbursement/Obligation For <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
SUBTOTAL of Disbursements/Obligations This Page (optional)				_____	
TOTAL This Period (last page this line number only) (carry total from last page to Line 10)				_____	

Federal Election Commission
**ENVELOPE REPLACEMENT PAGE
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<input type="checkbox"/> No Postmark	Shipping Date
<input type="checkbox"/> Overnight Delivery Service (Specify):	Date of Receipt
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
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