

Fax Cover Sheet

FROM: Progress for America Voter Fund
Ralph R. Brown, Secretary

TO: Federal Election Commission
Fax: (202) 219-0174

DATE: September 29, 2004

PAGES: 13 (including fax cover sheet)

The following is being transmitted by facsimile by the required due date:

Progress for America Voter Fund FEC Form 9

For the period from September 27, 2004, through September 29, 2004.

FEC FORM 9

24 HOUR NOTICE OF DISBURSEMENTS/OBLIGATIONS FOR ELECTIONEERING COMMUNICATIONS

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

(b) Name: Progress for America Voter Fund

(c) Address (Number and Street) Check if different than previously reported: P.O. Box 57167

(d) City, State and ZIP Code: Washington, DC 20037

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

(f) Description: _____

2. FEC Identification Number: C N/A

3. Is This Statement New or Amended

4. Covering Period: 09 27 2004 through 09 29 2004

5. (a) Date of Public Distribution(s): 09 29 2004 (b) Communication Title: "Finish It"

6. Is the filer a Qualified Nonprofit Corporation under 11 CFR 114.109? 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: Mary Anne Carter

(b) Address (Number and Street): P.O. Box 57167

(c) City, State and ZIP Code: Washington, DC 20037

(d) Name of Employer or Principal Place of Business: MAC Research

(e) Occupation: Consultant

9. Total Donations This Statement: 550,000.00

10. Total Disbursements/Obligations This Statement: 579,345.91

Under penalty of perjury, I certify that this statement is true, correct and complete. In addition, if the electioneering communications reported herein were made by a corporation, I certify that the corporation is a qualified nonprofit corporation under the Commission's regulations.

TYPE OR PRINT NAME OF PERSON COMPLETING FORM: Ralph R. Brown, Secretary

SIGNATURE: *Ralph R. Brown* DATE: 09/30/2004

NOTE: Submission of false, erroneous or incomplete information may subject the person signing this statement to the penalties of 2 U.S.C. §4979

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

PAGE 2 OF 12

11. Person(s) Sharing/Exercising Control

A. (a) Name Brian McCabe	
(b) Address (number and street) P.O. Box 57167	
(c) City, State and ZIP Code Washington, DC 20037	
(d) Name of Employer or Principal Place of Business DCI Group, L.L.C.	(e) Occupation Partner
B. (a) Name Mary Anne Carter	
(b) Address (number and street) P.O. Box 57167	
(c) City, State and ZIP Code Washington, DC 20037	
(d) Name of Employer or Principal Place of Business MAC Research	(e) Occupation Consultant
C. (a) Name Ralph R. Brown	
(b) Address (number and street) P.O. Box 57167	
(c) City, State and ZIP Code Washington, DC 20037	
(d) Name of Employer or Principal Place of Business McDonald, Brown & Hagan	(e) Occupation Attorney
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

<p>A. Full Name of Donor E. G. Kondrack, Jr. Mailing Address of Donor 3964 Paradise View Drive City State Zip Paradise Valley AZ 85253</p>	<p>Date of Receipt 09 27 2004 Amount 25000000</p>
<p>B. Full Name of Donor Carl E. Lindner Mailing Address of Donor 8555 Shannoe Run Road City State Zip Cincinnati OH 45243</p>	<p>Date of Receipt 09 27 2004 Amount 25000000</p>
<p>C. Full Name of Donor Manuel N. Stamatakis Mailing Address of Donor 111 W Deicalb Pike City State Zip Wayne PA 19087</p>	<p>Date of Receipt 09 27 2004 Amount 25000000</p>
<p>D. Full Name of Donor James Bochnowski Mailing Address of Donor 28 Camino Por Los Arboles City State Zip Atherton CA 94027</p>	<p>Date of Receipt 09 29 2004 Amount 10000000</p>
<p>E. Full Name of Donor Norman Byrne Mailing Address of Donor P.O. Box 306 City State Zip Rockford MI 49341</p>	<p>Date of Receipt 09 29 2004 Amount 10000000</p>

<p>SUBTOTAL of Donations This Page (optional)</p>	<p>54500000</p>
<p>TOTAL This Period (see page 11a line number only) (carry total from last page to Line B)</p>	<p></p>

SCHEDULE 9-A
Donation(s) Received

<p>A. Full Name of Donor David Cusano</p> <p>Mailing Address of Donor 2998 Douglas, Suite 120</p> <p>City State Zip Roseville CA 95661</p>	<p>Date of Receipt 09 / 29 / 2004</p> <p>Amount 5,000.00</p>
<p>B. Full Name of Donor</p> <p>Mailing Address of Donor</p> <p>City State Zip</p>	<p>Date of Receipt</p> <p>Amount</p>
<p>C. Full Name of Donor</p> <p>Mailing Address of Donor</p> <p>City State Zip</p>	<p>Date of Receipt</p> <p>Amount</p>
<p>D. Full Name of Donor</p> <p>Mailing Address of Donor</p> <p>City State Zip</p>	<p>Date of Receipt</p> <p>Amount</p>
<p>E. Full Name of Donor</p> <p>Mailing Address of Donor</p> <p>City State Zip</p>	<p>Date of Receipt</p> <p>Amount</p>
<p>SUBTOTAL of Donations This Page (optional) → 5,000.00</p> <p>TOTAL This Period (last page this line number only) → 5,500.00 Carry total from last page to line 9g</p>	

SCHEDULE B-B

PAGE 5 OF 12

Disbursement(s) Made or Obligation(s)

A. Full Name (Last, First, Middle Initial) of Payee KARE-TV		Date of Disbursement or Obligation 09 / 27 / 2004	
Mailing Address of Payee 8811 Olson Memorial Hwy		Amount 81,430.00	
City Minneapolis	State MN	Zip Code 55427	Communication Date 09 / 29 / 2004
Name of Employer N/A		Occupation N/A	
Purpose of Disbursement (including title(s) of communication(s)) TV Advertising Time [09/25 - 10/05] "Finish It"			
Name of Federal Candidate Pres. George W. Bush	Office Sought <input checked="" type="checkbox"/> President	House State: MN, WI District: _____	Disbursement/Obligation For <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
Name of Federal Candidate Sen. John Kerry	Office Sought <input checked="" type="checkbox"/> Senator	House State: MN, 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	House 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 KNSP-TV		Date of Disbursement or Obligation 09 / 27 / 2004	
Mailing Address of Payee 1701 Broadway Street, NW		Amount 1,279,250	
City Minneapolis	State MN	Zip Code 55413	Communication Date 09 / 29 / 2004
Name of Employer N/A		Occupation N/A	
Purpose of Disbursement (including title(s) of communication(s)) TV Advertising Time [09/25 - 10/05] "Finish It"			
Name of Federal Candidate Pres. George W. Bush	Office Sought <input checked="" type="checkbox"/> President	House State: MN, WI District: _____	Disbursement/Obligation For <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
Name of Federal Candidate Sen. John Kerry	Office Sought <input checked="" type="checkbox"/> Senator	House State: MN, 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	House 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)		84,222.50	
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 ESTP-TV				Date of Disbursement or Obligation 09 / 27 / 2004	
Mailing Address of Payee 3415 University Avenue				Amount 1,623,500	
City St. Paul	State MN	Zip Code 55114	Communication Date 09 / 29 / 2004		
Name of Employer N/A				Occupation N/A	
Purpose of Disbursement (including date(s) of communication(s)) TV Advertising Time [09/25 - 10/05] "Finish It"					
Name of Federal Candidate Pres. George W. Bush	Office Sought <input checked="" type="checkbox"/> President	House Senate	State MN, WI	Disbursement/Obligation For <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Name of Federal Candidate Sen. John Kerry	Office Sought <input checked="" type="checkbox"/> President	House Senate	State MN, WI	Disbursement/Obligation For <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Name of Federal Candidate N/A				Office Sought N/A	
Purpose of Disbursement (including date(s) of communication(s)) TV Advertising Time [09/25 - 10/05] "Finish It"					
B. Full Name (Last, First, Middle Initial) of Payee WCCO-TV				Date of Disbursement or Obligation 09 / 27 / 2004	
Mailing Address of Payee 90 S 11th Street				Amount 922,800.00	
City Minneapolis	State MN	Zip Code 55403	Communication Date 09 / 29 / 2004		
Name of Employer N/A				Occupation N/A	
Purpose of Disbursement (including date(s) of communication(s)) TV Advertising Time [09/25 - 10/05] "Finish It"					
Name of Federal Candidate Pres. George W. Bush	Office Sought <input checked="" type="checkbox"/> President	House Senate	State MN, WI	Disbursement/Obligation For <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Name of Federal Candidate Sen. John Kerry	Office Sought <input checked="" type="checkbox"/> President	House Senate	State MN, WI	Disbursement/Obligation For <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Name of Federal Candidate N/A				Office Sought N/A	
Summary of Disbursements/Obligations This Page (optional)					
				1,155,150.00	
TOTAL This Period (add page this the number only) (carry label from last page to Line 10)					

SCHEDULE B-B

Disbursement(s) Made or Obligation(s)

A. Full Name (Last, First, Middle Initial) of Payee KRXC-TV		Date of Disbursement or Obligation 09 / 27 / 2004	
Mailing Address of Payee 1570 Lookout Drive		Amount 2,017,390	
City Mankato	State MN	Zip Code 56003	Communication Date 09 / 29 / 2004
Name of Employer N/A		Occupation N/A	
Purpose of Disbursement (including title(s) of communication(s)) TV Advertising Time (09/25 - 10/05) "Finish It"			
Name of Federal Candidate Pres. George W. Bush	Office Sought <input checked="" type="checkbox"/> President	House <input type="checkbox"/> Senate	State MN, IA
		Disbursement/Obligation For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Name of Federal Candidate Sen. John Kerry	Office Sought <input checked="" type="checkbox"/> President	House <input type="checkbox"/> Senate	State MN, IA
		Disbursement/Obligation For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Name of Federal Candidate N/A	Office Sought <input type="checkbox"/> President	House <input type="checkbox"/> Senate	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 KASA-TV		Date of Disbursement or Obligation 09 / 27 / 2004	
Mailing Address of Payee 1377 University Blvd., NE		Amount 3,633,75	
City Albuquerque	State NM	Zip Code 87102	Communication Date 09 / 29 / 2004
Name of Employer N/A		Occupation N/A	
Purpose of Disbursement (including title(s) of communication(s)) TV Advertising Time (09/25 - 10/05) "Finish It"			
Name of Federal Candidate Pres. George W. Bush	Office Sought <input checked="" type="checkbox"/> President	House <input type="checkbox"/> Senate	State NM
		Disbursement/Obligation For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Name of Federal Candidate Sen. John Kerry	Office Sought <input checked="" type="checkbox"/> President	House <input type="checkbox"/> Senate	State NM
		Disbursement/Obligation For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Name of Federal Candidate N/A	Office Sought <input type="checkbox"/> President	House <input type="checkbox"/> Senate	State _____
		Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
SUBTOTAL of Disbursements/Obligations This Page (optional)		2,380,765	
TOTAL This Page (last page with line numbers only) (carry total from last page to Line 10)		2,380,765	

SCHEDULE B-B

Disbursement(s) Made or Obligation(s)

A. Full Name (Last, First, Middle Initial) of Payor KOAT-TV		Date of Disbursement or Obligation 09 / 27 / 2004	
Mailing Address of Payor 3901 Carlisle NE		Amount 43,031.25	
City Albuquerque	State NM	Zip Code 87125	
Name of Employer N/A	Occupation N/A		
Purpose of Disbursement (including State) of communication(s) TV Advertising Time [09/25 - 10/05] "Finish It"			
Name of Federal Candidate Pres. George W. Bush	Office Sought <input checked="" type="checkbox"/> President	House State: NM District: _____	Disbursement/Obligation For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): _____
Name of Federal Candidate Sen. John Kerry	Office Sought <input checked="" type="checkbox"/> President	House 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"/> Senate <input type="checkbox"/> President	House 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 Payor KOB-TV		Date of Disbursement or Obligation 09 / 27 / 2004	
Mailing Address of Payor 4 Broadcast Plaza SW		Amount 35,643.20	
City Albuquerque	State NM	Zip Code 87103	
Name of Employer N/A	Occupation N/A		
Purpose of Disbursement (including State) of communication(s) TV Advertising Time [09/25 - 10/05] "Finish It"			
Name of Federal Candidate Pres. George W. Bush	Office Sought <input checked="" type="checkbox"/> President	House State: NM District: _____	Disbursement/Obligation For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): _____
Name of Federal Candidate Sen. John Kerry	Office Sought <input checked="" type="checkbox"/> President	House 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"/> Senate <input type="checkbox"/> President	House State: _____ District: _____	Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): _____
SUBTOTAL of Disbursements/Obligations This Page (opposed)		78,674.45	
TOTAL This Period (last page but one number only) (carry over from last page to Line 10)		_____	

SCHEDULE B-B

Disbursement(s) Made or Obligation(s)

A. Full Name (Last, First, Middle Initial) of Payee KRQE-TV				Date of Disbursement or Obligation 09 27 2004	
Mailing Address of Payee 13 Broadcast Plaza SW				Amount 5,792,750	
City Albuquerque	State NM	Zip Code 87103		Communication Date 09 27 2004	
Name of Employer N/A		Occupation N/A			
Purpose of Disbursement (including title) of communication(s) TV Advertising Time [09/25 - 10/05] "Finish It"					
Name of Federal Candidate Pres. George W. Bush	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: NM	Disbursement/Obligation For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
Name of Federal Candidate Sen. John Kerry	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NM	Disbursement/Obligation For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
Name of Federal Candidate N/A	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: NM	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 Minnesota - National Cable Communications				Date of Disbursement or Obligation 09 27 2004	
Mailing Address of Payee 5454 Wisconsin Avenue, Suite 625				Amount 2,311,320	
City Chevy Chase	State MD	Zip Code 20815		Communication Date 09 29 2004	
Name of Employer N/A		Occupation N/A			
Purpose of Disbursement (including title) of communication(s) TV Advertising Time [09/25 - 10/05] "Finish It"					
Name of Federal Candidate Pres. George W. Bush	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: MD	Disbursement/Obligation For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
Name of Federal Candidate Sen. John Kerry	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: MD	Disbursement/Obligation For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
Name of Federal Candidate N/A	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: MD	Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
SUBTOTAL of Disbursements/Obligations This Page (optional)				8,104,070	
TOTAL This Period (last page enter the number only) (carry total from last page to line 10)				8,104,070	

SCHEDULE 9-B

Disbursement(s) Made or Obligation(s)

PAGE 10 OF 12

A. Full Name (Last, First, Middle Initial) of Payee New Mexico - National Cable Communications				Date of Disbursement or Obligation 09 / 27 / 2004	
Mailing Address of Payee 5454 Wisconsin Avenue, Suite 625				Amount 1,826,000	
City Chevy Chase	State MD	Zip Code 20815			
Name of Employer N/A			Occupation N/A		
Purpose of Disbursement (including title(s) of communication(s)) TV Advertising Time (09/29 - 10/05) "Finish It"					
Name of Federal Candidate Pres. George W. Bush		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: NM	Disbursement/Obligation For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Name of Federal Candidate Sen. John Kerry		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NM	Disbursement/Obligation For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Name of Federal Candidate N/A		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 Metzger Media Services, Inc.				Date of Disbursement or Obligation 09 / 27 / 2004	
Mailing Address of Payee 600 Fairmount Avenue, Suite 306				Amount 27,645.40	
City Towson	State MD	Zip Code 21286			
Name of Employer N/A			Occupation N/A		
Purpose of Disbursement (including title(s) of communication(s)) Media Placement: Fee - TV Ad - "Finish It"					
Name of Federal Candidate Pres. George W. Bush		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: NM, WI, IA, NM	Disbursement/Obligation For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Name of Federal Candidate Sen. John Kerry		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: MI, WI, IA, NM	Disbursement/Obligation For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Name of Federal Candidate N/A		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)				56,003.40	
TOTAL This Period (last page title 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 Payor MSNBC				Date of Disbursement or Obligation 09 / 27 / 2004	
Mailing Address of Payor 1 MSNBC Plaza				Amount 2,394,960	
City Secaucus	State NJ	Zip Code 07094			
Name of Employer N/A			Occupation N/A		
Purpose of Disbursement (including title(s) of communication(s)) TV Advertising Time [09/29 - 09/30] "Finish It"					
Name of Federal Candidate Pres. George W. Bush	Office Sought <input checked="" type="checkbox"/> House	State all 50 states	Disbursement/Obligation For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____		
Name of Federal Candidate Sen. John Kerry	Office Sought <input checked="" type="checkbox"/> Senate	State all 50 states	Disbursement/Obligation For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____		
Name of Federal Candidate N/A	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 Payor FOX NEWS				Date of Disbursement or Obligation 09 / 27 / 2004	
Mailing Address of Payor 1211 Avenue of the Americas				Amount 5,520,195	
City New York	State NY	Zip Code 10036			
Name of Employer N/A			Occupation N/A		
Purpose of Disbursement (including title(s) of communication(s)) TV Advertising Time [09/29 - 09/30] "Finish It"					
Name of Federal Candidate Pres. George W. Bush	Office Sought <input checked="" type="checkbox"/> House	State all 50 states	Disbursement/Obligation For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____		
Name of Federal Candidate Sen. John Kerry	Office Sought <input checked="" type="checkbox"/> Senate	State all 50 states	Disbursement/Obligation For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____		
Name of Federal Candidate N/A	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)				7,915,115	
TOTAL This Period (last page tab 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 CNN		Date of Disbursement or Obligation 09 / 27 / 2004	
Mailing Address of Payee One CNN Center		Address 3614 200	
City Atlanta	State GA	Zip Code 30303	Communication Date 09 / 29 / 2004
Name of Employer N/A		Occupation N/A	
Purpose of Disbursement (including title) of communication(s) TV Advertising Time (09/29 - 09/30) "Finish It"			
Name of Federal Candidate Pres. George W. Bush	Office Sought <input checked="" type="checkbox"/> President	House State: all 50 <input type="checkbox"/> Senate District: states	Disbursement/Obligation For <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):
Name of Federal Candidate Sen. John Kerry	Office Sought <input checked="" type="checkbox"/> President	House State: all 50 <input type="checkbox"/> Senate District: states	Disbursement/Obligation For <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):
Name of Federal Candidate	Office Sought	House State: _____ <input type="checkbox"/> Senate District: _____ <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 Menzler Media Services, Inc.		Date of Disbursement or Obligation 09 / 27 / 2004	
Mailing Address of Payee 600 Fairmount Avenue, Suite 306		Address 1498526	
City Towson	State MD	Zip Code 21286	Communication Date 09 / 29 / 2004
Name of Employer N/A		Occupation N/A	
Purpose of Disbursement (including title) of communication(s) Media Placement Fee - TV Ad - "Finish It"			
Name of Federal Candidate Pres. George W. Bush	Office Sought <input checked="" type="checkbox"/> President	House State: all 50 <input type="checkbox"/> Senate District: states	Disbursement/Obligation For <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):
Name of Federal Candidate Sen. John Kerry	Office Sought <input checked="" type="checkbox"/> President	House State: all 50 <input type="checkbox"/> Senate District: states	Disbursement/Obligation For <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):
Name of Federal Candidate	Office Sought	House State: _____ <input type="checkbox"/> Senate District: _____ <input type="checkbox"/> President	Disbursement/Obligation For <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):
SUBTOTAL of Disbursements/Obligations This Page (optional)		5112726	
TOTAL This Period (last page this line number only) (only total from last page to Line 10)		51934591	

Federal Election Commission
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