24038602310

CITIZENS FOR A STRONG SENATE
P.O. BOX 4608
WASHINGTON, DC 20044

FACSIMILE TRANSMITTAL SHEET

TO: Form 9 Reporting Dept	FROM: Lora Haggard
COMPANY: FEC	DATE: 10/26/04
FAX NUMBER: 202-219-0174	TOTAL NO. OF PAGES INCLUDING COVER: 9
PHONE NUMBER:	SENDER'S REPLY FAX NUMBER: 216-374-8493
RE: Form 9 Report	YOUR REFERENCE NUMBER:

☐ URGENT ☐ FOR REVIEW ☐ PLEASE COMMENT ☐ PLEASE REPLY ☐ PLEASE RECYCLE

NOTES/COMMENTS:

24038602311

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
Citizens For A Strong Senate

(b) Address (number and street) ☐ check if different than previously reported
P.O. Box 4008

(c) City, State and ZIP Code
Washington, DC 20044

2. FEC Identification Number
C N/A

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

(e) Occupation
N/A

3. Is This Statement ☒ New or ☐ Amended

4. Covering Period 10 / 20 / 2004 through 10 / 25 / 2004

5. (a) Date of Public Distribution(s) 10 / 25 / 2004 **(b) Communication Title** Ring

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
Lora Haggard

(b) Address (number and street)
P.O. Box 4008

(c) City, State and ZIP Code
Washington, DC 20044

(d) Name of Employer or Principal Place of Business
Citizens For A Strong Senate

(e) Occupation
Treasurer

9. Total Donations This Statement 2017500.00

10. Total Disbursements/Obligations This Statement 1063575.00

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 Lora Haggard

SIGNATURE [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. §437g

FE24N033.PDF

FEC FORM 9 (REV. 02/2003)

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

11. Person(s) Sharing/Exercising Control

A. (a) Name
Jonathan Prince
(b) Address (number and street)
P.O. Box 4008
(c) City, State and ZIP Code
Washington, DC 20044
(d) Name of Employer or Principal Place of Business
Citizens For A Strong Senate
(e) Occupation
Chairman/Executive Director

B. (a) Name
Lora Haggard
(b) Address (number and street)
P.O. Box 4008
(c) City, State and ZIP Code
Washington, DC 20044
(d) Name of Employer or Principal Place of Business
Citizens For A Strong Senate
(e) Occupation
Treasurer

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: Herb Sandler
Mailing Address of Donor: 1901 Harrison Street
City: Oakland | State: CA | Zip: 94612
Date of Receipt: 10 / 20 / 2004
Amount: 750000 00

B. Full Name of Donor: Marion Sandler
Mailing Address of Donor: 1901 Harrison Street
City: Oakland | State: CA | Zip: 94612
Date of Receipt: 10 / 20 / 2004
Amount: 750000 00

C. Full Name of Donor: ATLA PAC
Mailing Address of Donor: 1050 31st Street, NW
City: Washington | State: DC | Zip: 20007
Date of Receipt: 10 / 21 / 2004
Amount: 200000 00

D. Full Name of Donor: Ronald L. Motley
Mailing Address of Donor: P.O. Box 7
City: Mt. Pleasant | State: SC | Zip: 29465
Date of Receipt: 10 / 21 / 2004
Amount: 100000 00

E. Full Name of Donor: Marc R. Stanley
Mailing Address of Donor: 7403 Midbury Drive
City: Dallas | State: TX | Zip: 75230
Date of Receipt: 10 / 22 / 2004
Amount: 25000 00

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

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

SCHEDULE B-A
Donation(s) Received

A. Full Name of Donor: Barry Julian
Mailing Address of Donor: 10760 Lockhaven Estate
City: Godfrey | State: IL | Zip: 62035
Date of Receipt: 10 / 22 / 2004
Amount: 25000 00

B. Full Name of Donor: Elizabeth Waters
Mailing Address of Donor: 8250 Boedecker Drive
City: Dallas | State: TX | Zip: 75225
Date of Receipt: 10 / 22 / 2004
Amount: 25000 00

C. Full Name of Donor: Ann Worthington
Mailing Address of Donor: 26302 Avenida Las Palmas
City: Capo Beach | State: CA | Zip: 92624
Date of Receipt: 10 / 22 / 2004
Amount: 50000 00

D. Full Name of Donor: Peter Kraus
Mailing Address of Donor: 4906 Shadywood
City: Dallas | State: TX | Zip: 75209
Date of Receipt: 10 / 22 / 2004
Amount: 25000 00

E. Full Name of Donor: Mark H. Iola
Mailing Address of Donor: 4332 Potomac Avenue
City: Dallas | State: TX | Zip: 75205
Date of Receipt: 10 / 22 / 2004
Amount: 25000 00

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

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

SCHEDULE 9-A
Donation(s) Received

A. Full Name of Donor: Pam Fleischhaker
Mailing Address of Donor: 821 NW 41st Street
City: Oklahoma City | State: OK | Zip: 73118
Date of Receipt: 10 . 22 . 2004
Amount: 2500 00

B. Full Name of Donor: Matthew Bergman
Mailing Address of Donor: 27514 97th Avenue, SW
City: Vashon | State: WA | Zip: 98070
Date of Receipt: 10 . 22 . 2004
Amount: 40000 00

C. Full Name of Donor:
Mailing Address of Donor:
City | State | Zip
Date of Receipt:
Amount:

D. Full Name of Donor:
Mailing Address of Donor:
City | State | Zip
Date of Receipt:
Amount:

E. Full Name of Donor:
Mailing Address of Donor:
City | State | Zip
Date of Receipt:
Amount:

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

TOTAL This Period (last page this line number only) ..... ▶ 2017500 00
(carry total from last page to Line 8)

SCHEDULE 9-B
Disbursement(s) Made or Obligation(s)

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

Mailing Address of Payee: 1580 Lincoln Street, #510

City: Denver | State: CO | Zip Code: 80203

Name of Employer: N/A | Occupation: N/A

Date of Disbursement or Obligation: 10 / 21 / 2004

Amount: 1039504.26

Communication Date: 10 / 25 / 2004

Purpose of Disbursement (including title(s) of communication(s)): TV AD: 10/25 - 11/02: King

Name of Federal Candidate: Richard Burr | Office Sought: [ ] House [ ] Senate [ ] President | State: NC | District: | Disbursement/Obligation For: [ ] Primary [x] General [ ] Other (specify)

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

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

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

Mailing Address of Payee: 1580 Lincoln Street, #510

City: Denver | State: CO | Zip Code: 80202

Name of Employer: N/A | Occupation: N/A

Date of Disbursement or Obligation: 10 / 21 / 2004

Amount: 23620.74

Communication Date: 10 / 25 / 2004

Purpose of Disbursement (including title(s) of communication(s)): Commission on TV AD

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

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

Name of Federal Candidate: | Office Sought: [x] 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
Ad Crafters

Mailing Address of Payee
532 Laguardia Place, #201

City: New York | State: NY | Zip Code: 10012

Name of Employer: N/A | Occupation: N/A

Date of Disbursement or Obligation: 10 / 22 / 2004

Amount: 5600.00

Communication Date: 10 / 25 / 2004

Purpose of Disbursement (including title(s) of communication(s))
Production Fees Fox TV Ad

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

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

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

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

Mailing Address of Payee
532 Laguardia Place, #201

City: New York | State: NY | Zip Code: 10012

Name of Employer: N/A | Occupation: N/A

Date of Disbursement or Obligation: 10 / 22 / 2004

Amount: 6250.00

Communication Date: 10 / 25 / 2004

Purpose of Disbursement (including title(s) of communication(s))
Production Fees Fox TV Ad

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

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

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

SUBTOTAL of Disbursements/Obligations This Page (optional) ▶

TOTAL This Period (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: Ad Crafters

Mailing Address of Payee: 532 Laguardia Place, #201

City: New York | State: NY | Zip Code: 10012

Name of Employer: N/A | Occupation: N/A

Date of Disbursement or Obligation: 10 / 25 / 2004

Amount: 11600.00

Communication Date: 10 / 25 / 2004

Purpose of Disbursement (including title(s) of communication(s)): Production Fees For TV Ad

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

Name of Federal Candidate | Office Sought: [ ] House [x] 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:

Mailing Address of Payee:

City: | State: | Zip Code:

Name of Employer: | Occupation:

Date of Disbursement or Obligation:

Amount:

Communication Date:

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

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

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

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

SUBTOTAL of Disbursements/Obligations This Page (optional):

TOTAL This Period (last page this line number only) (carry total from last page to Line 10): 1088575.00

24038602319

Federal Election Commission

ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS

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