

F A X



To: Federal Election Commission
Fax number: 202-219-0174

From: Windows 2000
Fax number:
Business phone:
Home phone:

Date & Time: 5/6/2004 9:07:18 PM
Pages: 14
Re: The Media Fund -- FEC Form 9

FEC FORM 9

24 HOUR NOTICE OF DISBURSEMENTS/OBLIGATIONS FOR ELECTIONEERING COMMUNICATIONS

1. Individual, Organization or Qualified Nonprofit Corporation Making the Disbursements/Obligations			
(a) Name The Media Fund			
(b) Address (number and street) <input type="checkbox"/> Check if different than previously reported 1120 Connecticut Avenue NW #1140		2. FEC Identification Number C N/A	
(c) City, State and ZIP Code Washington, DC 20036			
(d) Name of Employer or Principal Place of Business N/A		(e) Occupation N/A	
3. Is This Statement	<input checked="" type="checkbox"/> New	4. Covering Period	05 09 2004
	<input type="checkbox"/> Amended		05 05 2004
5. (a) Date of Public Distribution(s) 05 05 2004		(b) Communication Title "Amen-EC"	
6. Is the Filer a Qualified Nonprofit Corporation under 11 CFR 114.10?		Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
7. Were the disbursements for the electioneering communication made exclusively from donations to a segregated bank account?		Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
8. Custodian of Records			
(a) Name Janice Ann Enright			
(b) Address (number and street) 1120 Connecticut Avenue NW #1140			
(c) City, State and ZIP Code Washington, DC 20036			
(d) Name of Employer or Principal Place of Business The Johns & Enright Group, Inc.		(e) Occupation Principal	
9. Total Contributions This Statement		280000.00	
10. Total Disbursements/Obligations This Statement		241627.80	

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 Janice Ann Enright

SIGNATURE *Janice Ann Enright* DATE 05/05/2004

NOTE: Submission of this statement or disclosure statement may subject the person signing the statement to the penalties of 18 U.S.C. 943(g)

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

1. Person(s) Sharing/Exercising Control

A. (a) Name Erik Smith	
(b) Address (number and street) 888 16th Street NW 7th Fl.	
(c) City, State and ZIP Code Washington, DC 20006	
(d) Name of Employer or Principal Place of Business The Media Fund	(e) Occupation Executive Director
B. (a) Name Harold Ickes	
(b) Address (number and street) 1120 Connecticut Avenue NW #1140	
(c) City, State and ZIP Code Washington, DC 20036	
(d) Name of Employer or Principal Place of Business The Media Fund	(e) Occupation President
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

24038403342

SCHEDULE 9-A
Donation(s) Received

<p>A. Full Name of Donor Lisa M. Goldman</p> <p>Mailing Address of Donor 2520 Union Street</p> <p>City State Zip San Francisco, CA 94123</p>	<p>Date of Receipt 05 05 2004</p> <p>Amount 12,500.00</p> <p>(MEMO)</p>
<p>B. Full Name of Donor Douglas E. Goldman</p> <p>Mailing Address of Donor 2520 Union Street</p> <p>City State Zip San Francisco, CA 94123</p>	<p>Date of Receipt 05 05 2004</p> <p>Amount 12,500.00</p> <p>(MEMO)</p>
<p>C. Full Name of Donor Jon Landau</p> <p>Mailing Address of Donor 1990 S. Bundy Drive #200</p> <p>City State Zip Los Angeles, CA 90525</p>	<p>Date of Receipt 05 05 2004</p> <p>Amount 5,000.00</p> <p>(MEMO)</p>
<p>D. Full Name of Donor Victory Campaign 2004</p> <p>Mailing Address of Donor 1120 Connecticut Avenue NW #1100</p> <p>City State Zip Washington, DC 20036</p>	<p>Date of Receipt 05 03 2004</p> <p>Amount 250,000.00</p> <p>Joint Fundraising Proceeds</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) ▶</p> <p>TOTAL This Period (last page this line number only) ▶ (carry total from last page to Line 9)</p> <p style="text-align: right;">250,000.00</p>	

SCHEDULE 9-B

Disbursement(s) Made or Obligation(s)

A. Full Name (Last, First, Middle Initial) of Payee KDEB-TV				Date of Disbursement or Obligation 05 03 2004	
Mailing Address of Payee 2650 E. DIVISION STREET				Amount 4,358.25	
City SPRINGFIELD, MO 65801		State MO		Communication Date 05 05 2004	
Name of Employer N/A		Occupation N/A			
Purpose of Disbursement (including title(s) of communication(s)) TV Advertisement 05/03/04 - 05/11/04 "Alone-EC"					
Name of Federal Candidate George W. Bush		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement/Obligation For: <input checked="" type="checkbox"/> Treasury <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) >	
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 KOLR-TV				Date of Disbursement or Obligation 05 03 2004	
Mailing Address of Payee 2650 E. DIVISION STREET				Amount 30,710.30	
City SPRINGFIELD, MO 65801		State MO		Communication Date 05 05 2004	
Name of Employer N/A		Occupation N/A			
Purpose of Disbursement (including title(s) of communication(s)) _____					
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 checked="" 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) >	
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 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 KSPR-TV				Date of Disbursement or Obligation 05 03 2004	
Mailing Address of Payee 1369 E. ST. LOUIS ST.				Amount \$ 160.00	
City SPRINGFIELD, MO 65802	State	Zip Code		Communication Date 05 03 2004	
Name of Employer N/A		Occupation N/A			
Purpose of Disbursement (including title(s) of communication(s)) TV Advertisement 05/05/04 - 05/11/04 "Alone-EC"					
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 checked="" 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)		
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 KOAM-TV				Date of Disbursement or Obligation 05 03 2004	
Mailing Address of Payee 2850 NE HIGHWAY 63				Amount \$ 4,726.00	
City PITTSBURG, KS 66762	State	Zip Code		Communication Date 05 03 2004	
Name of Employer N/A		Occupation N/A			
Purpose of Disbursement (including title(s) of communication(s)) TV Advertisement 05/05/04 - 05/11/04 "Alone-EC"					
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 checked="" 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)		
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 over from last page to Line 10)					

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SCHEDULE B-B

Disbursement(s) Made or Obligation(s)

A. Full Name (Last, First, Middle Initial) of Payee KOBE-TV		Date of Disbursement or Obligation 05 03 2004	
Mailing Address of Payee 1928 W. 13TH STREET		Amount 4,365.25	
City JOPLIN, MO 64801	State	Zip Code	Communication Date 05 05 2004
Name of Employer N/A	Occupation N/A		
Purpose of Disbursement (including title(s) of communication(s)) TV Advertisement 05/05/04 - 05/11/04 "Alone-EC"			
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 checked="" 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)
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 KSNP-TV		Date of Disbursement or Obligation 05 03 2004	
Mailing Address of Payee 1502 S. CLEVELAND AVENUE		Amount 3,873.75	
City JOPLIN, MO 64801	State	Zip Code	Communication Date 05 05 2004
Name of Employer N/A	Occupation N/A		
Purpose of Disbursement (including title(s) of communication(s)) TV Advertisement 05/05/04 - 05/11/04 "Alone-EC"			
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 checked="" 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)
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 KBSI-TV				Date of Disbursement or Obligation 05 05 2004	
Mailing Address of Payee 806 ENTERPRISE STREET				Amount 289.00	
City CAPE GIRARDEAU, MO 63703	State	Zip Code	Communication Date 05 05 2004		
Name of Employer N/A	Occupation N/A		Purpose of Disbursement (including title(s) of communication(s)) TV Advertisement 05/05/04 - 05/11/04 "Aionn-EC"		
Name of Federal Candidate George W. Bush	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: KY District:	Disbursement/Obligation For <input checked="" type="checkbox"/> Primary <input 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 KFY8-TV				Date of Disbursement or Obligation 05 05 2004	
Mailing Address of Payee 310 BROADWAY STREET				Amount 24,433.20	
City CAPE GIRARDEAU, MO 63701	State	Zip Code	Communication Date 05 05 2004		
Name of Employer N/A	Occupation N/A		Purpose of Disbursement (including title(s) of communication(s)) TV Advertisement 05/05/04 - 05/11/04 "Aionn-EC"		
Name of Federal Candidate George W. Bush	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: KY District:	Disbursement/Obligation For <input checked="" type="checkbox"/> Primary <input 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 (see page one 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 WPSD-TV		Date of Disbursement or Obligation 05 08 2004	
Mailing Address of Payer 100 TELEVISION LANE		Amount 3,391.25	
City PADUCAH, KY 42003	State KY	Zip Code 42003	Communication Date 05 05 2004
Name of Employer N/A	Occupation N/A		
Purpose of Disbursement (including title(s) of communication(s)) TV Advertisement 05/05/04 - 05/11/04 "Ain't-EC"			
Name of Federal Candidate George W. Bush	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: KY District:	Disbursement/Obligation For <input checked="" 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)
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 WSIL-TV		Date of Disbursement or Obligation 05 08 2004	
Mailing Address of Payer 1416 COUNTRY AIRE DRIVE		Amount 1,497.50	
City CARTERSVILLE, IL 62918	State IL	Zip Code 62918	Communication Date 05 05 2004
Name of Employer N/A	Occupation N/A		
Purpose of Disbursement (including title(s) of communication(s)) TV Advertisement 05/05/04 - 05/11/04 "Ain't-EC"			
Name of Federal Candidate George W. Bush	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: KY District:	Disbursement/Obligation For <input checked="" 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)
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 has 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 KEZI-TV				Date of Disbursement or Obligation 05 03 2004	
Mailing Address of Payee 2975 CHAD DRIVE				Amount 10,514.50	
City EUGENE, OR 97408	State	Zip Code		Communication Date 05 05 2004	
Name of Employer N/A				Occupation N/A	
Purpose of Disbursement (including title(s) or communication(s)) TV Advertisement 05/05/04 - 05/11/04 "Alone-EC"					
Name of Federal Candidate George W. Bush	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: OR	District:	Disbursement/Obligation For: <input checked="" type="checkbox"/> Primary <input 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 KLSR-TV				Date of Disbursement or Obligation 05 03 2004	
Mailing Address of Payee 2940 CHAD DRIVE				Amount 1,491.75	
City EUGENE, OR 97408	State	Zip Code		Communication Date 05 05 2004	
Name of Employer N/A				Occupation N/A	
Purpose of Disbursement (including title(s) or communication(s)) TV Advertisement 05/05/04 - 05/11/04 "Alone-EC"					
Name of Federal Candidate George W. Bush	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: OR	District:	Disbursement/Obligation For: <input checked="" type="checkbox"/> Primary <input 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(s)/Obligation(s) This Page (addend):				241627.00	
TOTAL This Period (last page 9 is 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 Payer KMTR-TV				Date of Disbursement or Obligation 05 03 2004	
Mailing Address of Payer 1550 MOFFETT STREET				Amount 12,397.00	
City SALINAS, CA 93905		State CA		Contribution Date 05 05 2004	
Name of Employer N/A		Occupation N/A			
Purpose of Disbursement (including title(s) of communication(s)) TV Advertisement 05/03/04 - 05/11/04 "A-Jone-EC"					
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 checked="" 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) _____	
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 Payer KVAL-TV				Date of Disbursement or Obligation 05 03 2004	
Mailing Address of Payer 4578 BLANTON ROAD				Amount 16,723.75	
City EUGENE, OR 97405		State OR		Contribution Date 05 05 2004	
Name of Employer N/A		Occupation N/A			
Purpose of Disbursement (including title(s) of communication(s)) TV Advertisement 05/05/04 - 05/11/04 "A-Jone-EC"					
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 checked="" 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) _____	
Name of Federal Candidate _____		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
SUBTOTAL of Disbursements/Obligations This Page (optional)				_____	
TOTAL This Period (last page this and 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 KATU-TV			Date of Disbursement or Obligation 05 05 2004	
Mailing Address of Payee 2133 NE SANDY BLVD.			Amount 35,238.75	
City PORTLAND, OR 97232	State	Zip Code	Communication Date 05 05 2004	
Name of Employer N/A			Occupation N/A	
Purpose of Disbursement (including title(s) of communication(s)) TV Advertisement 05/05/04 - 05/11/04 "Alone-EC"				
Name of Federal Candidate George W. Bush	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: OR District:	Disbursement/Obligation For: <input checked="" 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)	
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 KGW-TV			Date of Disbursement or Obligation 05 05 2004	
Mailing Address of Payee 1501 SW JEFFERSON STREET			Amount 30,635.00	
City PORTLAND, OR 97201	State	Zip Code	Communication Date 05 05 2004	
Name of Employer N/A			Occupation N/A	
Purpose of Disbursement (including title(s) of communication(s)) TV Advertisement 05/05/04 - 05/11/04 "Alone-EC"				
Name of Federal Candidate George W. Bush	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: OR District:	Disbursement/Obligation For: <input checked="" 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)	
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 info from last page to Line 4D)			_____	

SCHEDULE 9-B

Disbursement(s) Made or Obligation(s)

A. Full Name (Last, First, Middle Initial) of Payee KCHN-TV				Date of Disbursement or Obligation 05 03 2004	
Mailing Address of Payee 222 SW COLUMBIA STREET				Amount 29,877.50	
City	State	Zip Code		Communication Date	
PORTLAND, OR	97201			05 05 2004	
Name of Employer		Occupation			
N/A		N/A			
Purpose of Disbursement (including title(s) of communication(s)) TV Advertisement 05/05/04 - 05/11/04 "Alone-EC"					
Name of Federal Candidate	Office Sought:	House	State: OR	Disbursement/Obligation For:	
George W. Bush	<input type="checkbox"/> House	<input type="checkbox"/> Senate	District: _____	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
	<input checked="" type="checkbox"/> President	<input type="checkbox"/> President		<input type="checkbox"/> Other (specify) _____	
Name of Federal Candidate	Office Sought:	House	State: _____	Disbursement/Obligation For:	
	<input type="checkbox"/> House	<input type="checkbox"/> Senate	District: _____	<input type="checkbox"/> Primary <input type="checkbox"/> General	
	<input type="checkbox"/> President	<input type="checkbox"/> President		<input type="checkbox"/> Other (specify) _____	
Name of Federal Candidate	Office Sought:	House	State: _____	Disbursement/Obligation For:	
	<input type="checkbox"/> House	<input type="checkbox"/> Senate	District: _____	<input type="checkbox"/> Primary <input type="checkbox"/> General	
	<input type="checkbox"/> President	<input type="checkbox"/> President		<input type="checkbox"/> Other (specify) _____	
B. Full Name (Last, First, Middle Initial) of Payee KPTV-TV				Date of Disbursement or Obligation 05 03 2004	
Mailing Address of Payee 211 SE CARUTHERS STREET				Amount 14,798.00	
City	State	Zip Code		Communication Date	
PORTLAND, OR	97214			05 05 2004	
Name of Employer		Occupation			
N/A		N/A			
Purpose of Disbursement (including title(s) of communication(s)) TV Advertisement 05/05/04 - 05/11/04 "Alone-EC"					
Name of Federal Candidate	Office Sought:	House	State: OR	Disbursement/Obligation For:	
George W. Bush	<input type="checkbox"/> House	<input type="checkbox"/> Senate	District: _____	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
	<input checked="" type="checkbox"/> President	<input type="checkbox"/> President		<input type="checkbox"/> Other (specify) _____	
Name of Federal Candidate	Office Sought:	House	State: _____	Disbursement/Obligation For:	
	<input type="checkbox"/> House	<input type="checkbox"/> Senate	District: _____	<input type="checkbox"/> Primary <input type="checkbox"/> General	
	<input type="checkbox"/> President	<input type="checkbox"/> President		<input type="checkbox"/> Other (specify) _____	
Name of Federal Candidate	Office Sought:	House	State: _____	Disbursement/Obligation For:	
	<input type="checkbox"/> House	<input type="checkbox"/> Senate	District: _____	<input type="checkbox"/> Primary <input type="checkbox"/> General	
	<input type="checkbox"/> President	<input type="checkbox"/> President		<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 MEDIA STRATEGIES & RESEARCH				Date of Disbursement or Obligation 05 05 2004	
Mailing Address of Payee 1680 LINCOLN STREET #518				Amount 3,570.89	
City DENVER, CO	State CO	Zip Code 80203		Communication Date 05 05 2004	
Name of Employer N/A		Occupation N/A			
Purpose of Disbursement (including title(s) of communication(s)) TV Advertisement 05/05/04 - 05/11/04 "Alans-EC"					
Name of Federal Candidate George W. Bush	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: AR KY OR District:	Disbursement/Obligation For: <input checked="" 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)		
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				Date of Disbursement or Obligation	
Mailing Address of Payee				Amount	
City	State	Zip Code		Communication Date	
Name of Employer		Occupation			
Purpose of Disbursement (including title(s) of communication(s))					
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)		
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)				241627.80	
TOTAL (this Period (last page this line number only)) (carry total from last page to Line 10)					

Federal Election Commission
**ENVELOPE REPLACEMENT PAGE
 FOR INCOMING DOCUMENTS**

The FEC added this page to the end of this filing to indicate how it was received.

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> USPS First Class Mail	Postmarked
<input type="checkbox"/> USPS Registered/Certified/Priority/Express Mail	Postmarked (R/C)
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input checked="" type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked
<p>The document preceding this page was received by FAX at the FEC. The receiving FAX machine has printed at the bottom of each page the date and time of receipt, the phone number of the transmitting machine and the sequential page numbers.</p>	
N/A	N/A
PREPARER	DATE PREPARED