

POLITICAL COMPLIANCE SERVICES INC.

703/250-0496
703/425-8352 (fax)

TO: FEC.

FROM: Susan Ardencaat

FAX NUMBER:

202 219 0174

NUMBER OF PAGES (including cover): 26

MESSAGE:

SWIFT B DAT
Form 9 #2

If you do not receive all pages of this facsimile or have received it in error, please contact me at the number listed above.

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 Swift Boat Vets and POWs for Truth		2. FEC Identification Number C
(b) Address (number and street) <input type="checkbox"/> check if different than previously reported P.O. Box 28184		
(c) City, State and ZIP Code Alexandria, VA 22313		
(d) Name of Employer or Principal Place of Business		(e) Occupation

3. Is This Statement or Amended	<input type="checkbox"/> New <input type="checkbox"/> Amended	4. Covering Period
		10/01/2004 through 10/04/2004

5. (a) Date of Public Distribution 10/03/2004 (b) Communication Type Over Head

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 Weymouth D. Symmes	(e) Occupation Retired
(b) Address (number and street) P.O. Box 28184	
(c) City, State and ZIP Code Alexandria, VA 22313	
(d) Name of Employer or Principal Place of Business Retired	

9. Total Donations This Statement 130,755.00

10. Total Disbursements/Obligations This Statement 443,168.50

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 Weymouth D. Symmes

SIGNATURE Weymouth D. Symmes DATE 10-06-04

NOTE: Submission of false, corrected or incomplete information may subject the person signing this statement to the penalties of 18 U.S.C. 5437a.

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

PAGE 2 OF 27

11. Person(s) Sharing/Exercising Control

A. (a) Name
Rear Admiral Roy Huffman, USN (Ret.)

(b) Address (number and street)
P.O. Box 26184

(c) City, State and ZIP Code
Alexandria, VA 22313

(d) Name of Employer or Principal Place of Business
Retired

(e) Occupation
Retired

B. (a) Name
John O'Neill

(b) Address (number and street)
P.O. Box 26184

(c) City, State and ZIP Code
Alexandria, VA 22313

(d) Name of Employer or Principal Place of Business
Clements O'Neill Pierce

(e) Occupation
Attorney

C. (a) Name
Arvin A. Heintz

(b) Address (number and street)
P.O. Box 26184

(c) City, State and ZIP Code
Alexandria, VA 22313

(d) Name of Employer or Principal Place of Business
Self Employed

(e) Occupation
Attorney

D. (a) Name
Weymouth D Symmes

(b) Address (number and street)
P.O. Box 26184

(c) City, State and ZIP Code
Alexandria, VA 22313

(d) Name of Employer or Principal Place of Business
Retired

(e) Occupation
Retired

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 B-A
Donation(s) Received

A. Full Name of Donor

Lonnie L Abernethy

Mailing Address of Donor

4301 Santa Rita

City State Zip
El Paso TX 79902

Date of Receipt

10/02/2004

Amount

50000

B. Full Name of Donor

THOMAS ALLISON

Mailing Address of Donor

PO BOX 10220

City State Zip
ST PETERSBURG FL 33733

Date of Receipt

10/12/2004

Amount

50000

C. Full Name of Donor

THOMAS ALLISON

Mailing Address of Donor

PO BOX 10220

City State Zip
ST PETERSBURG FL 33733

Date of Receipt

10/24/2004

Amount

50000

D. Full Name of Donor

Steven Apple

Mailing Address of Donor

800 Liberty Bldg

City State Zip
Buffalo NY 14202

Date of Receipt

10/12/2004

Amount

100000

E. Full Name of Donor

David Baird

Mailing Address of Donor

1901 60th Place E, #L3147

City State Zip
Bradenton FL 34203

Date of Receipt

10/04/2004

Amount

100000

SUBTOTAL of Donations This Page (optional)

350000

TOTAL This Period (last page (if two number only)
(carry total from last page to Line 9)

350000

SCHEDULE 9-A
Donation(s) Received

A. Full Name of Donor
Marc Benitez

Date of Receipt
10/04/04 2004
Amount
100000

Mailing Address of Donor
44450 Ocotillo Drive

City State Zip
La Quinta CA 92253

B. Full Name of Donor
Donald E. Benkert

Date of Receipt
10/04/04 2004
Amount
100000

Mailing Address of Donor
1234 Blair Ave.

City State Zip
South Pasadena CA 91030

C. Full Name of Donor
George Bitting

Date of Receipt
10/04/04 2004
Amount
100000

Mailing Address of Donor
120 Sachuest Way

City State Zip
Middletown RI 02842

D. Full Name of Donor
George C Bitting

Date of Receipt
10/04/04 2004
Amount
100000

Mailing Address of Donor
120 Sachuest Way

City State Zip
Middletown RI 02842

E. Full Name of Donor
George C Bitting

Date of Receipt
10/04/04 2004
Amount
100000

Mailing Address of Donor
120 Sachuest Way

City State Zip
Middletown RI 02842

SUBTOTAL of Donations This Page (optional) 230000

TOTAL This Period (add page this line number only) 560000
(carry total from last page to line 9)

SCHEDULE 9-A
Donation(s) Received

<p>A. Full Name of Donor George C Bitting</p> <p>Mailing Address of Donor 120 Sachuest Way</p> <p>City State Zip Middletown RI 02842</p>	<p>Date of Receipt 10/09/04 11:41 2004</p> <p>Amount 10000</p>
<p>B. Full Name of Donor George C Bitting</p> <p>Mailing Address of Donor 120 Sachuest Way</p> <p>City State Zip Middletown RI 02842</p>	<p>Date of Receipt 10/09/04 11:41 2004</p> <p>Amount 10000</p>
<p>C. Full Name of Donor George C Bitting</p> <p>Mailing Address of Donor 120 Sachuest Way</p> <p>City State Zip Middletown RI 02842</p>	<p>Date of Receipt 10/09/04 11:41 2004</p> <p>Amount 10000</p>
<p>D. Full Name of Donor George C. Bitting</p> <p>Mailing Address of Donor 120 Sachuest Way</p> <p>City State Zip Middletown RI 02842</p>	<p>Date of Receipt 10/09/04 11:41 2004</p> <p>Amount 50000</p>
<p>E. Full Name of Donor George C. Bitting</p> <p>Mailing Address of Donor 120 Sachuest Way</p> <p>City State Zip Middletown RI 02842</p>	<p>Date of Receipt 10/09/04 12:33 2004</p> <p>Amount 10000</p>
<p>SUBTOTAL of Donations This Page (optional)</p> <p>TOTAL This Period (add page into this number only) (carry total from last page to Line B)</p>	<p>90000</p> <p>670000</p>

SCHEDULE 9-A
Donation(s) Received

<p>A. Full Name of Donor George C. Bitting</p> <p>Mailing Address of Donor 120 Sachuest Way</p> <p>City State Zip Middletown RI 02842</p>	<p>Date of Receipt 10/5/04 Amount 1000.00</p>
<p>B. Full Name of Donor George C. Bitting</p> <p>Mailing Address of Donor 120 Sachuest Way</p> <p>City State Zip Middletown RI 02842</p>	<p>Date of Receipt 10/3/04 Amount 1000.00</p>
<p>C. Full Name of Donor Tikoos Blankenburg</p> <p>Mailing Address of Donor 15572 Middletown Park Dr.</p> <p>City State Zip Redding CA 96001</p>	<p>Date of Receipt 10/4/04 Amount 2500.00</p>
<p>D. Full Name of Donor Stephen F. Brauer</p> <p>Mailing Address of Donor 11250 Hunter Dr.</p> <p>City State Zip Bridgeton MO 63044</p>	<p>Date of Receipt 10/4/04 Amount 10000.00</p>
<p>E. Full Name of Donor Greg Brown</p> <p>Mailing Address of Donor 11921 Grandview</p> <p>City State Zip Columbus IN 47201</p>	<p>Date of Receipt 10/4/04 Amount 5000.00</p>

SUBTOTAL of Donations This Page (optional)

13200.00

TOTAL Tax Excess (last page this line number only)
(carry total from last page to Line 9)

19300.00

SCHEDULE 9-A
Donation(s) Received

A. Full Name of Donor
Rodney Chadwick

Mailing Address of Donor
109 Golf View Drive

City State Zip
Cohutta GA 30710

Date of Receipt
10/04/2004

Amount
100000

B. Full Name of Donor
J. W. Childs

Mailing Address of Donor
111 Huntington Ave., Ste. 2900

City State Zip
Boston MA 02199

Date of Receipt
10/04/2004

Amount
100000

C. Full Name of Donor
david clement

Mailing Address of Donor
7 charles street #3

City State Zip
new york NY 10014

Date of Receipt
10/04/2004

Amount
50000

D. Full Name of Donor
david clement

Mailing Address of Donor
7 charles street #3

City State Zip
new york NY 10014

Date of Receipt
10/04/2004

Amount
50000

E. Full Name of Donor
Robert R. Cleveland

Mailing Address of Donor
P.O. Box 681400

City State Zip
Kansas City MO 64168

Date of Receipt
10/04/2004

Amount
250000

SUBTOTAL of Donations This Page (printed) **1450000**

TOTAL This Period (last page of this form only) **3440000**
(carry total from last page to Line 9)

1450000

3440000

SCHEDULE 9-A
Donation(s) Received

A. Full Name of Donor
Paul E. Crow

Mailing Address of Donor
2731 Timberleaf Dr.

City State Zip
Carrollton TX 75006

Date of Receipt
09/22/04

Amount
5000.00

B. Full Name of Donor
George G. Daniels

Mailing Address of Donor
P.O. Box 590007

City State Zip
Orlando FL 32859

Date of Receipt
10/04/04

Amount
5001.00

C. Full Name of Donor
Dick Davis

Mailing Address of Donor
39 Evening Star Dr.

City State Zip
Rancho Mirage CA 92270

Date of Receipt
11/04/04

Amount
1900.00

D. Full Name of Donor
Richard Deprospero

Mailing Address of Donor
7366 Big Cypress Dr

City State Zip
Miami Lakes FL 33014

Date of Receipt
10/04/04

Amount
1000.00

E. Full Name of Donor
Greg Dodds

Mailing Address of Donor
31 Whitcomb Drive

City State Zip
Grosse Pointe Farms MI 48236

Date of Receipt
10/04/04

Amount
1000.00

SUBTOTAL of Donations This Page (optional)

TOTAL This Period (last page this line number only)
(carry 100% from last page to Line 4)

8501.00

42901.00

SCHEDULE B-A
Donation(s) Received

<p>A. Full Name of Donor Tom Erickson</p> <p>Mailing Address of Donor 12353 Whitefish Ave.</p> <p>City State Zip Crosstake MN 56442</p>	<p>Date of Receipt 10/01/2004</p> <p>Amount 190000</p>
<p>B. Full Name of Donor Katherine Ernst</p> <p>Mailing Address of Donor 4500 Viejo Road</p> <p>City State Zip Carmel CA 93923</p>	<p>Date of Receipt 10/02/2004</p> <p>Amount 50000</p>
<p>C. Full Name of Donor brian follett</p> <p>Mailing Address of Donor BOX 01717095</p> <p>City State Zip SIOUX FALLS SD 57186</p>	<p>Date of Receipt 10/01/2004</p> <p>Amount 250000</p>
<p>D. Full Name of Donor Clark Frankel</p> <p>Mailing Address of Donor 65 West 13 St.</p> <p>City State Zip New York NY 10011</p>	<p>Date of Receipt 10/04/2004</p> <p>Amount 50000</p>
<p>E. Full Name of Donor Michael Futrell</p> <p>Mailing Address of Donor 10875 Belle Cour Way</p> <p>City State Zip Shreveport LA 71106</p>	<p>Date of Receipt 10/04/2004</p> <p>Amount 100000</p>
<p>SUB-TOTAL of Donations This Page (colored)</p> <p>TOTAL This Period (add page this line number only) (carry over from last page to Line B)</p>	<p>550000</p> <p>4840100</p>

SCHEDULE 9-A
Donation(s) Received

<p>A. Full Name of Donor Richard Gable</p> <p>Mailing Address of Donor 4515 Willard Ave, Apt. 2318</p> <p>City State Zip Chevy Chase MD 20815</p>	<p>Date of Receipt 10/03/04</p> <p>Amount 60000</p>
<p>B. Full Name of Donor Mike Gerawan</p> <p>Mailing Address of Donor 21249 E. Jefferson</p> <p>City State Zip Reedley CA 93654</p>	<p>Date of Receipt 10/01/04</p> <p>Amount 250000</p>
<p>C. Full Name of Donor Kenneth R. Gill, Jr.</p> <p>Mailing Address of Donor 817 Waterfall Way</p> <p>City State Zip Chesapeake VA 23320</p>	<p>Date of Receipt 10/05/04</p> <p>Amount 1000000</p>
<p>D. Full Name of Donor Robert M. Ginnings</p> <p>Mailing Address of Donor P.O. Box 6870</p> <p>City State Zip McLean VA 22106</p>	<p>Date of Receipt 10/04/04</p> <p>Amount 1000000</p>
<p>E. Full Name of Donor Jerry Glenn</p> <p>Mailing Address of Donor 54 Fairway Dr.</p> <p>City State Zip Southgate KY 41071</p>	<p>Date of Receipt 10/03/04</p> <p>Amount 500000</p>

SUBTOTAL of Donations This Page (optional) _____

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

600000

5440100

SCHEDULE B-A
Donation(s) Received

A. Full Name of Donor
Tom Gumprecht

Mailing Address of Donor
7445 S.E. 71st St

City Mercer Island **State** WA **Zip** 98040

Date of Receipt
10/01/2004

Amount
250000

B. Full Name of Donor
Joseph E. Hackett

Mailing Address of Donor
44 W. Saddle River Rd.

City Saddle River **State** NJ **Zip** 07458

Date of Receipt
10/04/2004

Amount
100000

C. Full Name of Donor
James A. Hartman

Mailing Address of Donor
4512 Newlands St.

City Metairie **State** LA **Zip** 70006

Date of Receipt
10/04/2004

Amount
200000

D. Full Name of Donor
James A. Hartman

Mailing Address of Donor
4512 Newlands St

City Metairie **State** LA **Zip** 70006

Date of Receipt
10/02/2004

Amount
200000

E. Full Name of Donor
William J. Hayes

Mailing Address of Donor
P.O. Box 25

City W. Barnstable **State** MA **Zip** 02668

Date of Receipt
10/04/2004

Amount
100000

SUBTOTAL of Donations This Page (optional) _____

TOTAL This Period (last page this line number only) _____
(carry total from last page to Line 8)

455000

5895100

SCHEDULE 9-A
Donation(s) Received

A. Full Name of Donor
Roberta Hazlett

Date of Receipt
10/01/2004

Amount
50000

Mailing Address of Donor
2614 Tamiami Tr. No.

City State Zip
Naples FL 34103

B. Full Name of Donor
Roberta Hazlett

Date of Receipt
10/01/2004

Amount
10000

Mailing Address of Donor
2614 Tamiami Trail No.

City State Zip
Naples FL 34103

C. Full Name of Donor
Ron Hazlett

Date of Receipt
10/01/2004

Amount
50000

Mailing Address of Donor
2614 Tamiami Tr. N.

City State Zip
Naples FL 34103

D. Full Name of Donor
Ron Hazlett

Date of Receipt
10/01/2004

Amount
50000

Mailing Address of Donor
2614 Tamiami Trail N.

City State Zip
Naples FL 34103

E. Full Name of Donor
MARK HEALY

Date of Receipt
10/03/2004

Amount
100000

Mailing Address of Donor
207 BLACKJACK OAK

City State Zip
SAN ANTONIO TX 78230

SUBTOTAL of Donations This Page (optional) 280000

TOTAL This Period (last page this line number only) 61551000
(carry total over last page to Line 9)

SCHEDULE 9-A
Donation(s) Received

<p>A. Full Name of Donor Jeff Hill</p> <p>Mailing Address of Donor 104 reagan Ct.</p> <p>City State Zip Ventura CA 93003</p>	<p>Date of Receipt 10/04/2004</p> <p>Amount 1 000 00</p>
<p>B. Full Name of Donor Paul isaac</p> <p>Mailing Address of Donor 75 Prospect Avenue</p> <p>City State Zip Larchmont NY 10538</p>	<p>Date of Receipt 10/04/2004</p> <p>Amount 1 000 00</p>
<p>C. Full Name of Donor Thomas E. Jeckering</p> <p>Mailing Address of Donor 7720 Mayfield Rd.</p> <p>City State Zip Gates Mills OH 44040</p>	<p>Date of Receipt 10/04/2004</p> <p>Amount 5 000 00</p>
<p>D. Full Name of Donor JIMMY JONES</p> <p>Mailing Address of Donor 4406 FLEXER DR.</p> <p>City State Zip HERNANDO BEACH FL 34607</p>	<p>Date of Receipt 10/04/2004</p> <p>Amount 5 000 00</p>
<p>E. Full Name of Donor JIMMY JONES</p> <p>Mailing Address of Donor 4406 FLEXER DR.</p> <p>City State Zip HERNANDO BEACH FL 34607</p>	<p>Date of Receipt 10/04/2004</p> <p>Amount 5 000 00</p>

<p>SUBTOTAL of Donations This Page (optional)</p>	<p>8 000 00</p>
<p>TOTAL This Period (last page this line number only) (carry total from last page to line 9)</p>	<p>8 955 100</p>

SCHEDULE 9-A
Donation(s) Received

A. Full Name of Donor
JIMMY JONES

Mailng Address of Donor
4406 FLEXER DR.
City: HERNANDO BEACH FL State: FL Zip: 34607

Date of Receipt
10/03/04
Amount: 25000

B. Full Name of Donor
Ronald Kelsey

Mailng Address of Donor
1314 College Avenue
City: VA State: VA Zip: 22401

Date of Receipt
10/09/04
Amount: 100000

C. Full Name of Donor
Mark Kendrat

Mailng Address of Donor
835 Crest Dr
City: Cary IL State: IL Zip: 60013

Date of Receipt
10/04/04
Amount: 100000

D. Full Name of Donor
William Knight

Mailng Address of Donor
6195 Green Meadows
City: Memphis TN State: TN Zip: 38120

Date of Receipt
10/04/04
Amount: 56000

E. Full Name of Donor
William Knight

Mailng Address of Donor
6195 Green Meadows
City: Memphis TN State: TN Zip: 38120

Date of Receipt
10/01/04
Amount: 50000

SUBTOTAL of Donations This Page (optional) 325000

TOTAL This Period (last page this line number only) 7280100
(carry total from last page to Line 6)

SCHEDULE 9-A
Donation(s) Received

A. Full Name of Donor

Kenneth Lee

Mailing Address of Donor

1660 Jamington Street

City State Zip
Mt Pleasant SC 29466

Date of Receipt

10/01/04

Amount

60000

B. Full Name of Donor

Darryl Leifheit

Mailing Address of Donor

3820 Huffman Mill Pike

City State Zip
Lexington KY 40511

Date of Receipt

10/01/04

Amount

100000

C. Full Name of Donor

Edward Lewandowski

Mailing Address of Donor

805 Darrell Road

City State Zip
Hillsborough CA 94010

Date of Receipt

10/02/04

Amount

100000

D. Full Name of Donor

Cris Mandry

Mailing Address of Donor

3223 8th St

City State Zip
Metairie LA 70002

Date of Receipt

10/04/04

Amount

100000

E. Full Name of Donor

Ken Marcus

Mailing Address of Donor

12494 Palos Tierra Road

City State Zip
Valley Center CA 92082

Date of Receipt

10/09/04

Amount

10000

SUBTOTAL of Donations This Page (optional)

380000

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

8950100

SCHEDULE 9-A

Donation(s) Received

A. Full Name of Donor

Duncan L. Matteson

Mailing Address of Donor

1991 Broadway, Ste 300

City State Zip
Redwood City CA 64063

Date of Receipt

10/04/04 2004

Amount

100000

B. Full Name of Donor

Peter H. McCann

Mailing Address of Donor

P.O. Box 416

City State Zip
Groveport OH 43125

Date of Receipt

10/04/04 2004

Amount

200000

C. Full Name of Donor

Lisa Meaney

Mailing Address of Donor

45 Avila Street

City State Zip
San Francisco CA 94123

Date of Receipt

10/04/04 2004

Amount

500000

D. Full Name of Donor

Lisa Meaney

Mailing Address of Donor

45 Avila Street

City State Zip
San Francisco CA 94123

Date of Receipt

10/04/04 2004

Amount

500000

E. Full Name of Donor

Judy Miller

Mailing Address of Donor

P.O. Box 7140

City State Zip
Quincy IL 62305

Date of Receipt

10/10/04 2004

Amount

500000

SUBTOTAL of Donations This Page (optional)

800000

TOTAL This Period (see page 11a for details only)
(carry total from last page in Line 9)

9750100

SCHEDULE B-A
Donation(s) Received

A. Full Name of Donor

H. Dewitt Mitchell

Mailing Address of Donor

3034 The Oaks

City

Destin

State

FL

Zip

32550

Date of Receipt

10/08/04 2004

Amount

50000

B. Full Name of Donor

H. Dewitt Mitchell

Mailing Address of Donor

3034 The Oaks

City

Destin

State

FL

Zip

32550

Date of Receipt

09/08/04 2004

Amount

50000

C. Full Name of Donor

Howard Mitnick

Mailing Address of Donor

65 Madison Ave.

City

Morristown

State

NJ

Zip

07960

Date of Receipt

10/01/04 2004

Amount

25000

D. Full Name of Donor

Howard Mitnick

Mailing Address of Donor

65 Madison Ave.

City

Morristown

State

NJ

Zip

07960

Date of Receipt

10/02/04 2004

Amount

100000

E. Full Name of Donor

David Morgan

Mailing Address of Donor

18922 76th Ave SE

City

Snohomish

State

WA

Zip

98296

Date of Receipt

10/08/04 2004

Amount

50000

SUBTOTAL of Donations This Page (optional)

275000

TOTAL This Period (last page this line number only)
(carry over from last page to line 9)

10025100

SCHEDULE 3-A

Donation(s) Received

<p>A. Full Name of Donor Robert C. Myers</p> <p>Mailing Address of Donor Box 79 Bertha Place</p> <p>City State Zip Ardsley-on-Hudson NY 10503</p>	<p>Date of Receipt 10/04/2004</p> <p>Amount 1500.00</p>
<p>B. Full Name of Donor stephen oxley</p> <p>Mailing Address of Donor P.O. box 909</p> <p>City State Zip Fort Smith AR 83002</p>	<p>Date of Receipt 10/03/2004</p> <p>Amount 1000.00</p>
<p>C. Full Name of Donor Joseph J. Panna</p> <p>Mailing Address of Donor 7882 Weedsport Sennett Rd.</p> <p>City State Zip Weedsport NY 13166</p>	<p>Date of Receipt 10/04/2004</p> <p>Amount 1000.00</p>
<p>D. Full Name of Donor George Parker</p> <p>Mailing Address of Donor 221 Chesley Lane</p> <p>City State Zip Chapel Hill NC 27514</p>	<p>Date of Receipt 10/04/2004</p> <p>Amount 500.00</p>
<p>E. Full Name of Donor George Parker</p> <p>Mailing Address of Donor 221 Chesley Lane</p> <p>City State Zip Chapel Hill NC 27514</p>	<p>Date of Receipt 10/08/2004</p> <p>Amount 500.00</p>

<p>SUBTOTAL of Donations This Page (optional)</p>	<p>4500.00</p>
<p>TOTAL This Period (last page (Use number only) carry over from last page to Line 9)</p>	<p>10475.00</p>

SCHEDULE 9-A

Donation(s) Received

A. Full Name of Donor

GREGORY PATTAKOS

Mailing Address of Donor

4040 North Shore Drive

City State Zip
Akron OH 44333

Date of Receipt

10/04/2004

Amount

50000

B. Full Name of Donor

GREGORY PATTAKOS

Mailing Address of Donor

4040 North Shore Drive

City State Zip
AKRON OH 44333

Date of Receipt

10/04/2004

Amount

50000

C. Full Name of Donor

Jan Pillar

Mailing Address of Donor

3825 Bluffview Dr.

City State Zip
Marietta GA 30062

Date of Receipt

10/04/2004

Amount

100000

D. Full Name of Donor

ABE PODOLSKY

Mailing Address of Donor

4815 AVE N

City State Zip
BROOKLYN NY 11234

Date of Receipt

10/04/2004

Amount

25000

E. Full Name of Donor

Richard Porter

Mailing Address of Donor

875 Bryant Ave

City State Zip
Winnetka IL 60093

Date of Receipt

10/04/2004

Amount

100000

SUBTOTAL of Donations This Page (optional)

325000

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

10800100

SCHEDULE 9-A
Donation(s) Received

A. Full Name of Donor
Robert W. Rust

Date of Receipt
10/4/04
Amount: 5000.00

Mailing Address of Donor
P.O. Box 7339

City State Zip
Breckenridge CO 80424

B. Full Name of Donor
thomas p. sartweile

Date of Receipt
10/3/04
Amount: 2500.00

Mailing Address of Donor
1300 post oak blvd suite 2500

City State Zip
Houston TX 77055

C. Full Name of Donor
Fred N. Sauer

Date of Receipt
10/4/04
Amount: 1000.00

Mailing Address of Donor
454 Hammersmith

City State Zip
St. Louis MO 63141

D. Full Name of Donor
Floyd E. Scales

Date of Receipt
10/20/04
Amount: 1000.00

Mailing Address of Donor
12580 Durbin Dr.

City State Zip
St. Louis MO 63141

E. Full Name of Donor
charles g. schappert

Date of Receipt
10/4/04
Amount: 5000.00

Mailing Address of Donor
c/o hps inc 1224 forest pkwy

City State Zip
paulsboro NJ 08066

SUBTOTAL of Donations This Page (optional) 7750.00

TOTAL This Period (last page lists line number only) 11575.00
(carry total from last page to Line 9)

SCHEDULE 9-A
Donation(s) Received

A. Full Name of Donor
charles g. schappert

Date of Receipt
10/04/2004

Amount
5000.00

Mailing Address of Donor
c/o hps inc 1224 forest pkwy

City State Zip
paulsboro NJ 08066

B. Full Name of Donor
Jeffrey M. Scott

Date of Receipt
10/04/2004

Amount
10000.00

Mailing Address of Donor
5800 Hunters Gate

City State Zip
Troy MI 48098

C. Full Name of Donor
Duane Siebert

Date of Receipt
10/04/2004

Amount
5000.00

Mailing Address of Donor
200 Park Central Blvd. South - Suite 2

City State Zip
Pompano Beach FL 33064

D. Full Name of Donor
Sigmund Silber

Date of Receipt
10/03/2004

Amount
10000.00

Mailing Address of Donor
22B San Marcos Road E

City State Zip
Santa Fe NJ 87508

E. Full Name of Donor
Paul Thomas

Date of Receipt
10/01/2004

Amount
10000.00

Mailing Address of Donor
PO Box 11085

City State Zip
Truckee CA 96162

SUBTOTAL of Donations This Page (optional) 40000.00

TOTAL This Period (see page this line number only) 119751.00
(carry total from last page to Line 9)

SCHEDULE 9-A
Donation(s) Received

<p>A. Full Name of Donor Mike & Cindy Tipton</p> <p>Mailing Address of Donor 19215 Sterling Hwy</p> <p>City Nimilchik State AK Zip 99639</p>	<p>Date of Receipt 10/04/2004</p> <p>Amount 200400</p>
<p>B. Full Name of Donor Jim Tonyan</p> <p>Mailing Address of Donor 3709 W. Clover Ave.</p> <p>City McHenry State IL Zip 60050</p>	<p>Date of Receipt 10/04/2004</p> <p>Amount 100000</p>
<p>C. Full Name of Donor Timothy Unger</p> <p>Mailing Address of Donor 4200 JPMorgan Chase Tower</p> <p>City Houston State TX Zip 77024</p>	<p>Date of Receipt 10/03/2004</p> <p>Amount 250000</p>
<p>D. Full Name of Donor Mark Wetmore</p> <p>Mailing Address of Donor 1215 Valley View Drive</p> <p>City Vermillion State SD Zip 57069</p>	<p>Date of Receipt 10/01/2004</p> <p>Amount 100000</p>
<p>E. Full Name of Donor John wheatleyjp@Eitel.net</p> <p>Mailing Address of Donor 1730 Thorp Cemetery Rd</p> <p>City Thorp State WA Zip 98926</p>	<p>Date of Receipt 10/02/2004</p> <p>Amount 250000</p>
<p>SUBTOTAL of Donations This Page (optional)</p>	<p>900400</p>
<p>TOTAL This Period (next page this line number only) (carry total from last page to line 8)</p>	<p>12875500</p>

SCHEDULE 9-A
Donation(s) Received

A. Full Name of Donor
Doug White

Mailing Address of Donor
PO Box 104

City: Archibald State: LA Zip: 71218

Date of Receipt
10/04/2004

Amount
50000

B. Full Name of Donor
Doug White

Mailing Address of Donor
PO Box 104

City: Archibald State: LA Zip: 71218

Date of Receipt
09/02/2004

Amount
50000

C. Full Name of Donor
william young

Mailing Address of Donor
10 eliot rd

City: lexington State: MA Zip: 02421

Date of Receipt
10/04/2004

Amount
50000

D. Full Name of Donor
william young

Mailing Address of Donor
10 eliot rd

City: lexington State: MA Zip: 02421

Date of Receipt
09/27/2004

Amount
50000

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 of this line number only)
carry total from last page to Line 5)

200000

13075600

SCHEDULE B-B

Disbursement(s) Made or Obligation(s)

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

Mailing Address of Payee
13604 Timberlake Court

City **Midlothian** **State** **VA** **Zip Code** **23111**

Name of Employer _____ **Occupation** _____

Date of Disbursement or Obligation
 10/9/2004

Amount
 333300

Communication Date
 10/5/2004

Purpose of Disbursement (including title(s) of communication)
Media Copywriting & Production

Name of Federal Candidate **Office Sought** **House** **State** **Disbursement/Obligation For**
John F. Kerry **President** **Primary** **General**
 Other (specify) _____

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

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

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

Mailing Address of Payee
600 Fairmount Avenue, Suite 306

City **Towson** **State** **MD** **Zip Code** **21286**

Name of Employer _____ **Occupation** _____

Date of Disbursement or Obligation
 10/30/2004

Amount
 8954350

Communication Date
 10/5/2004

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

Name of Federal Candidate **Office Sought** **House** **State** **Disbursement/Obligation For**
John F. Kerry **President** **Primary** **General**
 Other (specify) _____

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

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

SUBTOTAL of Disbursements/Obligations This Page (optional) **9287650**

TOTAL This Form (see page title for number only) **9287650**
 (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 Payer

MSNBC

Mailing Address of Payer

1 MSNBC Plaza

City: Secaucus

State: NJ Zip Code: 07094

Name of Employer

Occupation

Date of Disbursement or Obligation

10/04/2004

Amount

289000

Communication Date

10/05/2004

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

Media Buy

Name of Federal Candidate

Office Sought

House

State

Senate

District

President

Disbursement/Obligation For

Primary General

Other (specify)

John F. Kerry

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 Payer

CNN

Mailing Address of Payer

One CNN Center

City: Atlanta

State: GA Zip Code: 30303

Name of Employer

Occupation

Date of Disbursement or Obligation

10/04/2004

Amount

20077000

Communication Date

10/05/2004

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

Media Buy

Name of Federal Candidate

Office Sought

House

State

Senate

District

President

Disbursement/Obligation For

Primary General

Other (specify)

John F. Kerry

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)

30316000

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

39603650

SCHEDULE 9-B

Disbursement(s) Made or Obligation(s)

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

HEADLINE

Mailing Address of Payee

One CNN Center

City

Atlanta

State

GA

Zip Code

30303

Name of Employer

Occupation

Date of Disbursement or Obligation

10/04/2004

Amount

4713000

Communication Date

10/05/2004

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

Media Buy

Name of Federal Candidate

Office Sought:

House

State:

Senate

District:

President

Disbursement/Obligation For:

Primary

General

Other (specify):

John F. Kerry

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

Mailing Address of Payee

City

State

Zip Code

Name of Employer

Occupation

Date of Disbursement or Obligation

Amount

Communication Date

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

Name of Federal Candidate

Office Sought:

House

State:

Senate

District:

President

Disbursement/Obligation For:

Primary

General

Other (specify):

John F. Kerry

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 Disbursement/Obligations this Page (optional)

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

4713000

44316850

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.

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<input type="checkbox"/> USPS Priority Mail	Postmarked
	Delivery Confirmation™ Label <input type="checkbox"/>
<input type="checkbox"/> USPS Express Mail	Postmarked
<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
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<input checked="" type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked
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