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| Federal Election Commission | | 202-219-0174 |

From : Cleta Mitchell, Esq.
Email Address : ctmitchell@foley.com
Sender's Direct Dial : 202.295.4081
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| | | Linda Morrison |

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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

Softer Voices

(b) Address (number and street) check if different than previously reported

P.O. Box 3588

(c) City, State and ZIP Code

Washington, DC 20007

(d) Name of Employer or Principal Place of Business

N/A

(e) Occupation

2. FEC Identification Number

C

3. Is This Statement

New
or
 Amended

4. Covering Period

10/15/2004
through
10/13/2004

5. (a) Date of Public Distribution(s)

10/14/2004

(b) Communication Title "BIG"

6. Is the Filer a Qualified Nonprofit Corporation under 11 CFR 114.107

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

Cleta Mitchell

(b) Address (number and street)

3000 K Street, N.W., #500

(c) City, State and ZIP Code

Washington, DC 20007

(d) Name of Employer or Principal Place of Business

Foley & Lardner, LLC

(e) Occupation

Attorney

9. Total Donations This Statement

3,276,000.00

10. Total Disbursements/Obligations This Statement

2,445,700.00

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

Cleta Mitchell, Esq.

SIGNATURE

Cleta Mitchell, Esq.

DATE 10/14/04

NOTE: Submission of false, corrected or incomplete information may subject the person signing this statement to the penalties of 2 U.S.C. § 437g.

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

PAGE 2 OF 5

11. Person(s) Sharing/Exercising Control

| | |
|---|---|
| A. (a) Name Heather Higgins | |
| (b) Address (number and street) P.O. Box 3588 | |
| (c) City, State and ZIP Code Washington, DC 20007 | |
| (d) Name of Employer or Principal Place of Business The Randolph Foundation | (e) Occupation President |
| B. (a) Name Michale Mirals | |
| (b) Address (number and street) P.O. Box 3588 | |
| (c) City, State and ZIP Code Washington, DC 20007 | |
| (d) Name of Employer or Principal Place of Business Self William Reveis Real Estate and Home Services | (e) Occupation Consultant Realtor |
| C. (a) Name Midge Deckler | |
| (b) Address (number and street) P.O. Box 3588 | |
| (c) City, State and ZIP Code Washington, DC 20007 | |
| (d) Name of Employer or Principal Place of Business Self | (e) Occupation Free lance writer |
| D. (a) Name Lisa Schiffren Mann | |
| (b) Address (number and street) P.O. Box 3588 | |
| (c) City, State and ZIP Code Washington, DC 20007 | |
| (d) Name of Employer or Principal Place of Business Self | (e) Occupation Writer/speechwriter |
| E. (a) Name Kira Rosenwald | |
| (b) Address (number and street) P.O. Box 3588 | |
| (c) City, State and ZIP Code Washington, DC 20007 | |
| (d) Name of Employer or Principal Place of Business American Securities, LP | (e) Occupation Principal |

SCHEDULE 9-A

Donation(s) Received

A. Full Name of Donor

Randy Kendrick

Mailing Address of Donor

3964 E. Paradise View Drive

City State Zip
Paradise Valley AZ 85253

Date of Receipt

10/20/2004

Amount

3,500.00

B. Full Name of Donor

Charles E. Brunie

Mailing Address of Donor

600 Third Avenue, 17th Floor

City State Zip
New York NY 10016

Date of Receipt

10/04/2004

Amount

25,000.00

C. Full Name of Donor

Michael J. Pedak

Mailing Address of Donor

655 Park Avenue

City State Zip
New York NY 10021

Date of Receipt

10/04/2004

Amount

10,000.00

D. Full Name of Donor

Poster Friess

Mailing Address of Donor

P.O. Box 9790

City State Zip
Jackson Hole WY 83002

Date of Receipt

10/04/2004

Amount

10,000.00

E. Full Name of Donor

Frank E. Baxter

Kathrine F. Baxter

Mailing Address of Donor

City State Zip

Date of Receipt

10/07/2004

Amount

5,000.00

SUBTOTAL of Donations This Page (optional)

17,500.00

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

SCHEDULE 9-A
Donation(s) Received

| | |
|--|---|
| <p>A. Full Name of Donor Richard Gilder</p> <p>Mailing Address of Donor 1775 Broadway</p> <p>City State Zip New York NY 10021</p> | <p>Date of Receipt 10 07 2004</p> <p>Amount 35 000 00</p> |
| <p>B. Full Name of Donor T.N. Jordan, Jr.</p> <p>Mailing Address of Donor P.O. Box 1919</p> <p>City State Zip Heraldsgurg, CA 95448</p> | <p>Date of Receipt 10 12 2004</p> <p>Amount 20 000 00</p> |
| <p>C. Full Name of Donor Lovett C. Peters</p> <p>Mailing Address of Donor 81 Old Orchard Rd.</p> <p>City State Zip Chestnut Hill MA 02467</p> | <p>Date of Receipt 10 12 2004</p> <p>Amount 25 000 00</p> |
| <p>D. Full Name of Donor Robert E. Malott</p> <p>Mailing Address of Donor 200 East Randolph</p> <p>City State Zip Chicago IL 60601</p> | <p>Date of Receipt 10 12 2004</p> <p>Amount 3 000 00</p> |
| <p>E. Full Name of Donor Bruce Kovner</p> <p>Mailing Address of Donor 500 Park Avenue</p> <p>City State Zip New York NY 10022</p> | <p>Date of Receipt 10 12 2004</p> <p>Amount 35 000 00</p> |

| | |
|---|-------------------|
| <p>SUBTOTAL of Donations This Page (add lines B through E)</p> | <p>152 000 00</p> |
| <p>TOTAL This Period (last page plus line number 1499) (carry subtotal from last page to Line 9)</p> | <p>327 600 00</p> |

SCHEDULE B-B

Disbursement(s) Made or Obligation(s)

| | | | | | |
|--|--|--------------------------|---|---|--|
| A. Full Name (Last, First, Middle Initial) of Payee Red Sea, LLC | | | | Date of Disbursement or Obligation 10/14/2004 | |
| Mailing Address of Payee 1111 19th Street, N.W., Suite 211 | | | | Amount 2,900.00 | |
| City Washington | State DC | Zip Code 20036 | Communication Date 10/14/2004 | | |
| Name of Employer Occupation | | | | | |
| Purpose of Disbursement (including date(s) of communication(s)) Media Development | | | | | |
| Name of Federal Candidate George W. Bush | Office Sought <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | State District | Disbursement/Obligation For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | | |
| Name of Federal Candidate | Office Sought | State | Disbursement/Obligation For: | | |
| Name of Federal Candidate | Office Sought | State | Disbursement/Obligation For: | | |
| B. Full Name (Last, First, Middle Initial) of Payee Red Sea, LLC | | | | Date of Disbursement or Obligation 10/14/2004 | |
| Mailing Address of Payee 1111 19th Street, Suite 211 | | | | Amount 2,250.00 | |
| City Washington | State DC | Zip Code 20036 | Communication Date 10/14/2004 | | |
| Name of Employer Occupation | | | | | |
| Purpose of Disbursement (including date(s) of communication(s)) Media Purchase for TV ad "BIG" | | | | | |
| Name of Federal Candidate George W. Bush | Office Sought <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | State District | Disbursement/Obligation For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | | |
| Name of Federal Candidate | Office Sought | State | Disbursement/Obligation For: | | |
| Name of Federal Candidate | Office Sought | State | Disbursement/Obligation For: | | |
| SUBTOTAL of Disbursements/Obligations This Page (optional) | | | | 2,465.00 | |
| TOTAL This Period (last page this line number only) (copy last from last page to line 10) | | | | 2,465.00 | |

Federal Election Commission
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| <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 |
| <input type="checkbox"/> Received from Electronic Filing Office | Date of Receipt |
| <input checked="" type="checkbox"/> Other (Specify): | Date of Receipt or Postmarked |
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| N/A PREPARER (5/2004) | N/A DATE PREPARED |