FAX COVER SHEET

AMERICANS FOR LIFE
N21 W23350 Ridgeview Parkway, Suite 200
Waukesha, WI 53188
TEL: 262-970-6075
FAX: 262-970-6065
E-Mail: nyerke@execpc.com

TOTAL NO. OF PAGES 7
(including cover)

FROM: Norm Yerke

DATE: October 20, 2004

TO: FEC

FAX: 202-219-0174

SUBJECT: FEC Form 9

Six pages to follow.

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: Americans For Life

(b) Address (number and street) ☐ check if different than previously reported: N21 W23350 Ridgeview Parkway

(c) City, State and ZIP Code: Waukesha, WI 53188

(d) Name of Employer or Principal Place of Business: Mega Construction Same Address

(e) Occupation: CEO

2. FEC Identification Number: C

3. Is This Statement: X New or ☐ Amended

4. Covering Period: 10 15 2004 through 10 19 2004

5. (a) Date of Public Distribution(s): 10 19 2004 (b) Communication Title: Radio ads

6. Is the Filer a Qualified Nonprofit Corporation under 11 CFR 114.10? Yes ☐ No X

7. Were the disbursements for the electioneering communication made exclusively from donations to a segregated bank account? Yes X No ☐

8. Custodian of Records

(a) Name: Norman Yerke

(b) Address (number and street): N21 W23350 Ridgeview Parkway

(c) City, State and ZIP Code: Waukesha, WI 53188

(d) Name of Employer or Principal Place of Business: Mega Construction Same address

(e) Occupation: CEO

9. Total Donations This Statement: 42,000.00

10. Total Disbursements/Obligations This Statement: 10,400.00

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: Norman J. Yerke

SIGNATURE: [signature] DATE: 10/19/04

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

FE3AN038.PDF FEC FORM 9 (REV. 02/2003)

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

PAGE OF

11. Person(s) Sharing/Exercising Control

A. (a) Name
Norman Yerke
(b) Address (number and street)
N21 W23350 Ridgeview Parkway
(c) City, State and ZIP Code
Waukesha, WI 53188
(d) Name of Employer or Principal Place of Business
Mega Construction Same address
(e) Occupation
CEO

B. (a) Name
(b) Address (number and street)
(c) City, State and ZIP Code
(d) Name of Employer or Principal Place of Business
(e) Occupation

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

FE3AN033.PDF

FEC FORM 5 (REV. 08/2004)

SCHEDULE 9-A

PAGE OF

Donation(s) Received

A. Full Name of Donor	Paul Smyczk	Date of Receipt	10 01 2004
Mailing Address of Donor	N9047 E. Shore Rd	Amount	10,000.00
City / State / Zip	East Troy WI 53120		
B. Full Name of Donor	Dr. Frank Smith	Date of Receipt	10 01 2004
Mailing Address of Donor	848 Willow Drive	Amount	1,000.00
City / State / Zip	Delafield WI 53018		
C. Full Name of Donor	Dan and Eileen Meehan	Date of Receipt	10 12 2004
Mailing Address of Donor	1473 E. Goodrich Lane	Amount	20,000.00
City / State / Zip	Fox Point WI 53217		
D. Full Name of Donor	Jim Poulsen	Date of Receipt	10 14 2004
Mailing Address of Donor	333 Lake Ave. Unit 306	Amount	10,000.00
City / State / Zip	Racine WI 53403		
E. Full Name of Donor	Patrick Dillett	Date of Receipt	10 14 2004
Mailing Address of Donor	21385 W. Lincoln Ave	Amount	1,000.00
City / State / Zip	New Berlin WI 53186		

SUBTOTAL of Donations This Page (optional) ▶	42,000.00
TOTAL This Period (last page this line number only) ▶ (carry total from last page to Line 9)	42,000.00

FEC FORM 5 (REV. 03/2003)

P.04

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

PAGE 1 OF 3

A. Full Name (Last, First, Middle Initial) of Payee: Family Radio Inc.
Mailing Address of Payee: P.O. Box 99
City: LaCrosse State: WI Zip Code: 54602
Name of Employer: Occupation:
Date of Disbursement or Obligation: 10 19 2004
Amount: 32,000.00
Communication Date: 10 25 2004
Purpose of Disbursement (including title(s) of communication(s)): Radio Ad

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

B. Full Name (Last, First, Middle Initial) of Payee: Mr. Tim Etes / WRJN, WEZY
Mailing Address of Payee: 4201 Victory Ave.
City: Racine State: WI Zip Code: 53405
Name of Employer: Occupation:
Date of Disbursement or Obligation: 10 19 2004
Amount: 15,000.00
Communication Date: 10 19 2004
Purpose of Disbursement (including title(s) of communication(s)): Radio Ad

Name of Federal Candidate: Kerry — Office Sought: [ ] House [ ] Senate [X] President — State: — District: — Disbursement/Obligation For: [ ] Primary [X] General [ ] Other (specify)
Name of Federal Candidate: Feingold — 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) 47,000.00

TOTAL This Period (last page this the number cry) ..... (carry total from last page to line 10)

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FEC FORM 9 (REV. 02/2003)

SCHEDULE 9-B

Disbursement(s) Made or Obligation(s)

A. Full Name (Last, First, Middle Initial) of Payee: Midwest Communications

Mailing Address of Payee: P.O. Box 23333

City: Green Bay State: WI Zip Code: 54305

Name of Employer: Occupation:

Date of Disbursement or Obligation: 10 13 2004

Amount: 2000.00

Communication Date: 10 18 2004

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

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

Name of Federal Candidate: Feingold — 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)

B. Full Name (Last, First, Middle Initial) of Payee: Midwest Family Broadcasting

Mailing Address of Payee: P.O. Box 20581

City: Madison State: WI Zip Code: 53701

Name of Employer: Occupation:

Date of Disbursement or Obligation: 10 13 2004

Amount: 2600.00

Communication Date: 10 18 2004

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

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

Name of Federal Candidate: Feingold — 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) ▶ 4,600.00

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

FE3AH008.PDF

FEC FORM 9 (REV. 2/2003)

SCHEDULE 3-B
Disbursement(s) Made or Obligation(s)

A. Full Name (Last, First, Middle Initial) of Payee: WNOV / Mr. Bob Hardy
Mailing Address of Payee: 3815 N. Teutonia
City: Milwaukee State: WI Zip Code: 53206
Name of Employer: Occupation:
Date of Disbursement or Obligation: 10 19 2004
Amount: 10,000.00
Communication Date: 10 19 2004
Purpose of Disbursement (including title(s) of communication(s)): Radio Ad

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

Name of Federal Candidate: Feingold — 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)

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 [ ] 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)

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) 10,000.00

TOTAL This Period (last page this line number only) 104,000.00
(carry total from last page to Line 10)

FEC FORM 8 (REV. 03/2003)

PEGANDGE.PDF

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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☐ Postmark Illegible	
☐ No Postmark	
☐ Overnight Delivery Service (Specify):	Shipping Date
☐ Received from House Records & Registration Office	Date of Receipt
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N/A PREPARER	N/A DATE PREPARED

(5/2004)