

Fax Cover Sheet

FROM: Progress for America Voter Fund
Ralph R. Brown, Secretary

TO: Federal Election Commission
Fax: (202) 219-0174

DATE: August 26, 2004

PAGES: 19 (including fax cover sheet)
Part One - Pages 1 to 18 Form 9

The following is being transmitted by facsimile by the required due date:

Progress for America Voter Fund FEC Form 9
For the period from July 7, 2004, to August 25, 2004.

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
Progress for America Voter Fund

(b) Address (number and street) check if different than previously reported
P.O. Box 57167

(c) City, State and ZIP Code
Washington, DC 20037

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

(e) Occupation
N/A

2. FEC Identification Number
C N/A

3. Is This Statement New or Amended

4. Covering Period **07 05 2004** through **08 25 2004**

5. (a) Date of Public Distribution **08 25 2004** (b) Communication Title **"What Is"**

6. Is the Filer a Qualified Nonprofit Corporation under 15 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 Receipts

(a) Name
Mary Anne Carter

(b) Address (number and street)
P.O. Box 57167

(c) City, State and ZIP Code
Washington, DC 20037

(d) Name of Employer or Principal Place of Business
MAC Research

(e) Occupation
Consultant

9. Total Donations This Statement **1,223,312.5000**

10. Total Disbursements/Obligations This Statement **9,510,104.1**

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 Ralph R. Brown, Secretary

SIGNATURE *Ralph R. Brown* DATE 08/26/2004

NOTE: Submission of this address is not complete without the person signing this statement to the provider of 2 U.S.C. §117g

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

11. Person(s) Sharing/Exercising Control	
A.	(a) Name Brian McCabe
	(b) Address (number and street) P.O. Box 57167
	(c) City, State and ZIP Code Washington, DC 20037
	(d) Name of Employer or Principal Place of Business DCI Group, L.L.C.
	(e) Occupation Partner
B.	(a) Name Mary Anna Carter
	(b) Address (number and street) P.O. Box 57167
	(c) City, State and ZIP Code Washington, DC 20037
	(d) Name of Employer or Principal Place of Business NAC Research
	(e) Occupation Consultant
C.	(a) Name Ralph R. Brown
	(b) Address (number and street) P.O. Box 57167
	(c) City, State and ZIP Code Washington, DC 20037
	(d) Name of Employer or Principal Place of Business McDonald, Brown & Fagen
	(e) Occupation Attorney
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

<p>A. Full Name of Donor <u>Doug Zych</u> Mailing Address of Donor <u>172 Field Point Road, No. 4</u> City State Zip <u>Greenwich CT 06830</u></p>	<p>Date of Receipt 07 07 2004 Amount 100000</p>
<p>B. Full Name of Donor <u>Robert Woodings</u> Mailing Address of Donor <u>6 Meadowood Drive</u> City State Zip <u>Pittsburgh PA 15215</u></p>	<p>Date of Receipt 07 07 2004 Amount 500000</p>
<p>C. Full Name of Donor <u>David Lynch</u> Mailing Address of Donor <u>2756 N. Green Valley Hwy. #836</u> City State Zip <u>Henderson NV 89014</u></p>	<p>Date of Receipt 07 08 2004 Amount 100000</p>
<p>D. Full Name of Donor <u>Guy Martin</u> Mailing Address of Donor <u>14023 Weddington St.</u> City State Zip <u>Sherwood Oaks CA 91401</u></p>	<p>Date of Receipt 07 27 2004 Amount 1500000</p>
<p>E. Full Name of Donor <u>Sidney E. Frank</u> Mailing Address of Donor <u>20 Cedar Street, Suite 203</u> City State Zip <u>New Rochelle NY 10801</u></p>	<p>Date of Receipt 08 20 2004 Amount 2500000</p>
<p>SUBTOTAL of Donations This Page (optional) ▶</p>	<p>4700000</p>
<p>TOTAL This Period (last page (via line number only) ▶ (carry total from last page to line 9)</p>	<p></p>

SCHEDULE 9-A
Donation(s) Received

PAGE 4 OF 25

<p>A. Full Name of Donor Lawrence Thomas</p> <p>Mailing Address of Donor P.O. Box 10404</p> <p>City State Zip Balboa Island CA 92662</p>	<p>Date of Receipt 08 12 2004</p> <p>Amount 25000</p>
<p>B. Full Name of Donor Pierson Grievé</p> <p>Mailing Address of Donor 4900 IDS Center</p> <p>City State Zip Minneapolis MN 55402</p>	<p>Date of Receipt 07 30 2004</p> <p>Amount 1000000</p>
<p>C. Full Name of Donor Scanley Hubbard</p> <p>Mailing Address of Donor 3415 University Avenue</p> <p>City State Zip St. Pauli MN 55114</p>	<p>Date of Receipt 07 30 2004</p> <p>Amount 1500000</p>
<p>D. Full Name of Donor John Grundhofer</p> <p>Mailing Address of Donor 38832 251st Street</p> <p>City State Zip Plankinton SD 57368</p>	<p>Date of Receipt 08 02 2004</p> <p>Amount 1000000</p>
<p>E. Full Name of Donor Alice Walton</p> <p>Mailing Address of Donor 10587 Highway 281 South</p> <p>City State Zip Mineral Wells TX 76087</p>	<p>Date of Receipt 08 03 2004</p> <p>Amount 50000000</p>
<p>SUBTOTAL of Donations This Page (optional)</p> <p>TOTAL This Form (last page this line number only) (entry taken from last page to Line 9)</p>	<p>63525000</p>

SCHEDULE 9-A
Donation(s) Received

<p>A. Full Name of Donor Daniel Finley</p> <p>Mailing Address of Donor P.O. Box 27535</p> <p>City State Zip Houston TX 77227</p>	<p>Date of Receipt 08 04 2004</p> <p>Amount 1 000 00</p>
<p>B. Full Name of Donor Jack W. Frits</p> <p>Mailing Address of Donor 2425 N Fish Creek Road</p> <p>City State Zip Wilson WY 83014</p>	<p>Date of Receipt 06 20 2004</p> <p>Amount 1 000 00</p>
<p>C. Full Name of Donor Boone Pickens</p> <p>Mailing Address of Donor 917 Preston Road, Suite 250</p> <p>City State Zip Dallas TX 75225</p>	<p>Date of Receipt 05 05 2004</p> <p>Amount 5 000 00 00 00</p>
<p>D. Full Name of Donor James Pitcock</p> <p>Mailing Address of Donor 10006 Balfourch</p> <p>City State Zip Houston TX 77096</p>	<p>Date of Receipt 08 06 2004</p> <p>Amount 2 500 00 00</p>
<p>E. Full Name of Donor Lee Anderson</p> <p>Mailing Address of Donor 3054 Gordon Drive</p> <p>City State Zip Naples FL 34102</p>	<p>Date of Receipt 08 06 2004</p> <p>Amount 1 000 00 00</p>
<p>SUBTOTAL of Donations This Page (optional)</p>	<p>5 280 00 00</p>
<p>TOTAL This Period (See page this line number only) (carry total from last page to line 9)</p>	

SCHEDULE 9-A
Donation(s) Received

<p>A. Full Name of Donor Alex Spanos</p> <p>Mailing Address of Donor 1341 W. Robinhood Drive</p> <p>City State Zip Stockton CA 95207</p>	<p>Date of Receipt 08 06 2004</p> <p>Amount 1 000 000 00</p>
<p>B. Full Name of Donor Dawn Arnall</p> <p>Mailing Address of Donor 1100 Town & Country Road - 11th Floor</p> <p>City State Zip Orange CA 92868</p>	<p>Date of Receipt 02 09 2004</p> <p>Amount 1 000 000 00</p>
<p>C. Full Name of Donor Lawton Powers</p> <p>Mailing Address of Donor 8505 Brisson Court</p> <p>City State Zip Bakersfield CA 93311</p>	<p>Date of Receipt 08 12 2004</p> <p>Amount 2 000 000 00</p>
<p>D. Full Name of Donor William Doheny</p> <p>Mailing Address of Donor 10877 Wilshire Blvd. #1406</p> <p>City State Zip Los Angeles CA 90024</p>	<p>Date of Receipt 08 12 2004</p> <p>Amount 1 000 000 00</p>
<p>E. Full Name of Donor Ellen Poillon</p> <p>Mailing Address of Donor 12088 Mound View Place</p> <p>City State Zip Studio City CA 91604</p>	<p>Date of Receipt 08 12 2004</p> <p>Amount 1 000 000 00</p>
<p>SUBTOTAL of Donations This Page (optional)</p> <p>TOTAL This Period (add page this fire number only)</p> <p>(copy total from last page to Line 9)</p>	<p>2 011 000 00</p>

SCHEDULE B-A
Donation(s) Received

<p>A. Full Name of Donor Thomas Saunders Mailing Address of Donor 667 Madison Avenue City State Zip New York NY 10021</p>	<p>Date of Receipt 08 13 2004 Amount 300 000 00</p>
<p>B. Full Name of Donor R. T. Farmer Mailing Address of Donor P.O. Box 625737 City State Zip Cincinnati OH 45262</p>	<p>Date of Receipt 08 12 2004 Amount 100 000 00</p>
<p>C. Full Name of Donor Marilyn Ware Mailing Address of Donor 550 Bunker Hill Road City State Zip Scrabsburg PA 17579</p>	<p>Date of Receipt 08 13 2004 Amount 750 000 00</p>
<p>D. Full Name of Donor Al Hilde Mailing Address of Donor P.O. Box 884 City State Zip Jackson NY 83001</p>	<p>Date of Receipt 08 16 2004 Amount 2 000 00</p>
<p>E. Full Name of Donor Dawn Arnall Mailing Address of Donor 1100 Town & Country Road - 11th Floor City State Zip Orange CA 92868</p>	<p>Date of Receipt 08 18 2004 Amount 6 000 000 00</p>
<p>SUBTOTAL of Donations This Page (applied)</p>	<p>5 152 000 00</p>
<p>TOTAL This Period (last page lists the rejected only) (carry total from last page to Line B)</p>	<p></p>

SCHEDULE 9-A
Donation(s) Received

<p>A. Full Name of Donor David Koch</p> <p>Mailing Address of Donor 505 N. Hwy 169, Suite 595</p> <p>City State Zip Plymouth OH 55641</p>	<p>Date of Receipt 08 18 2004</p> <p>Amount 100000</p>
<p>B. Full Name of Donor Jonathan Blatt</p> <p>Mailing Address of Donor 3468 Principio Avenue</p> <p>City State Zip Cincinnati OH 45208</p>	<p>Date of Receipt 08 18 2004</p> <p>Amount 700000</p>
<p>C. Full Name of Donor Randy Kendrick</p> <p>Mailing Address of Donor 3964 E. Paradise Valley Drive</p> <p>City State Zip Paradise Valley AZ 86523</p>	<p>Date of Receipt 08 18 2004</p> <p>Amount 2500000</p>
<p>D. Full Name of Donor Robert Rhein</p> <p>Mailing Address of Donor 7265 Kenwood Road, Suite 220</p> <p>City State Zip Cincinnati OH 45236</p>	<p>Date of Receipt 08 18 2004</p> <p>Amount 10000000</p>
<p>E. Full Name of Donor Alex Spanos</p> <p>Mailing Address of Donor 1341 W Robinhood Drive</p> <p>City State Zip Stockton CA 95207</p>	<p>Date of Receipt 08 20 2004</p> <p>Amount 400000000</p>
<p>SUBTOTAL of Donations This Page (optional) →</p>	<p>413300000</p>
<p>TOTAL this Period (just page this line number only) → (copy total from last page to line 9)</p>	<p></p>

SCHEDULE 9-A
Donation(s) Received

<p>A. Full Name of Donor Paul Singer</p> <p>Mailing Address of Donor 211 Central Park West</p> <p>City State Zip New York NY 10024</p>	<p>Date of Receipt 08 20 2004</p> <p>Amount 250 000 00</p>
<p>B. Full Name of Donor Anthony Cassara</p> <p>Mailing Address of Donor 29119 Cliffside Drive</p> <p>City State Zip Malibu CA 90264</p>	<p>Date of Receipt 08 20 2004</p> <p>Amount 1000 00</p>
<p>C. Full Name of Donor Donald Boall</p> <p>Mailing Address of Donor 161 Shoredliff Road</p> <p>City State Zip Corona Del Mar CA 92625</p>	<p>Date of Receipt 08 18 2004</p> <p>Amount 100 000 00</p>
<p>D. Full Name of Donor Sydney Buck</p> <p>Mailing Address of Donor 1135 Sand Key</p> <p>City State Zip Corona Del Mar CA 92625</p>	<p>Date of Receipt 08 18 2004</p> <p>Amount 1000 00</p>
<p>E. Full Name of Donor Lawrence Thomas</p> <p>Mailing Address of Donor P.O. Box 5923</p> <p>City State Zip Balboa Island CA 92662</p>	<p>Date of Receipt 08 18 2004</p> <p>Amount 2000 00</p>
<p>SUBTOTAL of Donations This Page (optional)</p>	<p>263 000 00</p>
<p>TOTAL This Period (last page this line number only)</p> <p>(copy total from last page to line 9)</p>	<p></p>

SCHEDULE 9-A
Donation(s) Received

<p>A. Full Name of Donor William Powers</p> <p>Mailing Address of Donor 2012 The Strand</p> <p>City State Zip Manhattan Beach CA 90266</p>	<p>Date of Receipt 08 18 2004</p> <p>Amount 250 000 00</p>
<p>B. Full Name of Donor B. Wayne Hughes, Sr.</p> <p>Mailing Address of Donor 701 Western Avenue</p> <p>City State Zip Glendale CA 91201</p>	<p>Date of Receipt 08 20 2004</p> <p>Amount 500 000 00</p>
<p>C. Full Name of Donor Peter Kalikow</p> <p>Mailing Address of Donor 101 Park Avenue</p> <p>City State Zip New York NY 10178</p>	<p>Date of Receipt 08 20 2004</p> <p>Amount 1000 000 00</p>
<p>D. Full Name of Donor Lonia "Bo" Pilgrim</p> <p>Mailing Address of Donor P.O. Box 93</p> <p>City State Zip Pittsburgh TX 75686</p>	<p>Date of Receipt 08 20 2004</p> <p>Amount 1000 000 00</p>
<p>E. Full Name of Donor Mark Kingdon</p> <p>Mailing Address of Donor 152 W. 57th Street, 50th Floor</p> <p>City State Zip New York NY 10019</p>	<p>Date of Receipt 08 24 2004</p> <p>Amount 100 000 00</p>
<p>SUBTOTAL of Donations This Page (optional)</p>	<p>960 000 00</p>
<p>TOTAL This Period (last page fills the number 000) (carry total from last page to Line 3)</p>	<p>1373 125 00</p>

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SCHEDULE 9-A
Donation(s) Received

<p>A. Full Name of Donor</p> <p>_____ Mailing Address of Donor</p> <p>_____ City State Zip</p>	<p>Date of Receipt</p> <p>____/____/____</p> <p>Amount</p> <p>_____</p>
<p>B. Full Name of Donor</p> <p>_____ Mailing Address of Donor</p> <p>_____ City State Zip</p>	<p>Date of Receipt</p> <p>____/____/____</p> <p>Amount</p> <p>_____</p>
<p>C. Full Name of Donor</p> <p>_____ Mailing Address of Donor</p> <p>_____ City State Zip</p>	<p>Date of Receipt</p> <p>____/____/____</p> <p>Amount</p> <p>_____</p>
<p>D. Full Name of Donor</p> <p>_____ Mailing Address of Donor</p> <p>_____ City State Zip</p>	<p>Date of Receipt</p> <p>____/____/____</p> <p>Amount</p> <p>_____</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>____/____/____</p> <p>Amount</p> <p>_____</p>

<p>SUBTOTAL of Donations This Page (optional)</p>	<p>_____</p>
<p>TOTAL This Period (last page this line number only)</p> <p>(carry over) from last page to Line 8)</p>	<p>_____</p>

SCHEDULE B-B

Disbursement(s) Made or Obligation(s)

A. Full Name (Last, First, Middle Initial) of Payee WEAU-TV				Date of Disbursement or Obligation 08 / 24 / 2004	
Mailing Address of Payee 1907 S Hastings Way				Amount 3,458.25	
City Eau Claire	State WI	Zip Code 54701		Communication Date 08 / 25 / 2004	
Name of Employer N/A				Occupation N/A	
Purpose of Disbursement (including dates) of communication(s) TV Advertising time [8/25 - 8/31] "What If"					
Name of Federal Candidate Pres. George W. Bush	Office Sought <input checked="" type="checkbox"/> President	<input type="checkbox"/> House <input type="checkbox"/> Senate	State WI, MN	Disbursement/Obligation For <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) - Nat'l Conv.	
Name of Federal Candidate Sen. John Kerry	<input checked="" type="checkbox"/> President	<input type="checkbox"/> House <input type="checkbox"/> Senate	State WI, MN	<input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) - Nat'l Conv.	
Name of Federal Candidate N/A	<input type="checkbox"/> President	<input type="checkbox"/> House <input type="checkbox"/> Senate	State District	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) -	
B. Full Name (Last, First, Middle Initial) of Payee WJRT-TV				Date of Disbursement or Obligation 08 / 24 / 2004	
Mailing Address of Payee 141 S. 6th Street				Amount 3,060.00	
City LaCrosse	State WI	Zip Code 54601		Communication Date 08 / 25 / 2004	
Name of Employer N/A				Occupation N/A	
Purpose of Disbursement (including dates) of communication(s) TV Advertising time [8/25 - 8/31] "What If"					
Name of Federal Candidate Pres. George W. Bush	<input checked="" type="checkbox"/> President	<input type="checkbox"/> House <input type="checkbox"/> Senate	State WI, MN	<input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) - Nat'l Conv.	
Name of Federal Candidate Sen. John Kerry	<input checked="" type="checkbox"/> President	<input type="checkbox"/> House <input type="checkbox"/> Senate	State WI, MN	<input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) - Nat'l Conv.	
Name of Federal Candidate N/A	<input type="checkbox"/> President	<input type="checkbox"/> House <input type="checkbox"/> Senate	State District	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) -	
SUBTOTAL of Disbursements/Obligations This Page (of 508)				3,764.25	
TOTAL This Period (last page this line number only) (carry total from last page to Line 10)				3,764.25	

SCHEDULE 9-B

Disbursement(s) Made or Obligation(s)

A. Full Name (Last, First, Middle Initial) of Payer WLAX-TV Mailing Address of Payer 1305 Interchange Place City State Zip Code LaCrosse WI 54603 Name of Employer Corporation N/A N/A		Date of Disbursement or Obligation 08 24 2004 Amount 1,020.00 Communication Date 08 25 2004
Purpose of Disbursement (including title) of communication(s) TV Advertising time [8/25 - 8/31] "What If"		
Name of Federal Candidate Pres. George W. Bush Office Sought President	<input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: WI, MN District:	Disbursement/Obligation For <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Nat'l Conv.
Name of Federal Candidate Sen. John Kerry Office Sought President	<input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: WI, MN District:	Disbursement/Obligation For <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Nat'l Conv.
Name of Federal Candidate _____ Office Sought _____ <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____		
B. Full Name (Last, First, Middle Initial) of Payer WXOW-TV Mailing Address of Payer 3705 County Hwy. 25 City State Zip Code LaCrescent, MN 55947 Name of Employer Corporation N/A N/A		Date of Disbursement or Obligation 09 24 2004 Amount 1,460.725 Communication Date 08 25 2004
Purpose of Disbursement (including title) of communication(s) TV Advertising time [8/25 - 9/31] "What If"		
Name of Federal Candidate Pres. George W. Bush Office Sought President	<input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: WI, MN District:	Disbursement/Obligation For <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Nat'l Conv.
Name of Federal Candidate Sen. John Kerry Office Sought President	<input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: WI, MN District:	Disbursement/Obligation For <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Nat'l Conv.
Name of Federal Candidate _____ Office Sought _____ <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____		
SUBTOTAL of Disbursements/Obligations This Page (optional)		1,562.725
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 WSAY-TV				Date of Disbursement or Obligation 08 / 24 / 2004	
Mailing Address of Payee 115 S. Jefferson Street				Amount 1,826.25	
City Green Bay	State WI	Zip Code 54301		Communication Date 08 / 25 / 2004	
Name of Employer N/A		Occupation N/A			
Purpose of Disbursement (including title(s) of communication(s)) TV Advertising time [8/25 - 8/31] "What If"					
Name of Federal Candidate Pres. George W. Bush	Office Sought <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State WI, MI	District _____	Disbursement/Obligation For <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Nat'l Conv.	
Name of Federal Candidate Sen. John Kerry	Office Sought <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State WI, MI	District _____	Disbursement/Obligation For <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Nat'l Conv.	
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 WFRV-TV				Date of Disbursement or Obligation 08 / 24 / 2004	
Mailing Address of Payee 1181 E Madison Street				Amount 2,193.25	
City Green Bay	State WI	Zip Code 54301		Communication Date 08 / 25 / 2004	
Name of Employer N/A		Occupation N/A			
Purpose of Disbursement (including title(s) of communication(s)) TV Advertising time [8/25 - 8/31] "What If"					
Name of Federal Candidate Pres. George W. Bush	Office Sought <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State WI, MI	District _____	Disbursement/Obligation For <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Nat'l Conv.	
Name of Federal Candidate Sen. John Kerry	Office Sought <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State WI, MI	District _____	Disbursement/Obligation For <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Nat'l Conv.	
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)				4,021.30	
TOTAL This Period (All page this line number only) (copy total from last page to this line)				_____	

SCHEDULE B-B

Disbursement(s) Made or Obligation(s)

A. Full Name (Last, First, Middle Initial) of Payee WGBA-TV		Date of Disbursement or Obligation 08 / 24 / 2004	
Mailing Address of Payee 1391 North Road		Amount 8,087.75	
City Green Bay	State WI	Zip Code 54311	Communication Date 08 / 23 / 2004
Name of Employer N/A		Occupation N/A	
Purpose of Disbursement (including title(s) of contribution(s)) TV Advertising time [8/25 - 8/31] "What If"			
Name of Federal Candidate Pres. George W. Bush	Office Sought <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State WI	Disbursement/Obligation For <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) - Nat'l Conv.
Name of Federal Candidate Sen. John Kerry	Office Sought <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State WI	Disbursement/Obligation For <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) - Nat'l Conv.
Name of Federal Candidate	Office Sought	State	Disbursement/Obligation For
B. Full Name (Last, First, Middle Initial) of Payee WLUK-TV		Date of Disbursement or Obligation 08 / 24 / 2004	
Mailing Address of Payee 787 Lombardi Avenue		Amount 7,831.50	
City Green Bay	State WI	Zip Code 54305	Communication Date 08 / 23 / 2004
Name of Employer N/A		Occupation N/A	
Purpose of Disbursement (including title(s) of contribution(s)) TV Advertising time [8/25 - 8/31] "What If"			
Name of Federal Candidate Pres. George W. Bush	Office Sought <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State WI, MI	Disbursement/Obligation For <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) - Nat'l Conv.
Name of Federal Candidate Sen. John Kerry	Office Sought <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State WI, MI	Disbursement/Obligation For <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) - Nat'l Conv.
Name of Federal Candidate	Office Sought	State	Disbursement/Obligation For
SUBTOTAL of Disbursements/Obligations This Page (optional)		15,899.25	
TOTAL This Period (add page this line number only) (carry total from last page to Line 10)			

SCHEDULE 9-B

Disbursement(s) Made or Obligation(s)

PAGE 16 OF 35

A. Full Name (Last, First, Middle Initial) of Payee WISC-TV		Date of Disbursement or Obligation 08 24 2004	
Mailing Address of Payee 7025 Raymond Road		Amount 49,878.00	
City Madison	State WI	Zip Code 53719	Communication Date 08 25 2004
Name of Employer N/A		Occupation N/A	
Purpose of Disbursement (including date) of communication(s) TV Advertising time [8/25 - 8/31] "What If"			
Name of Federal Candidate Pres. George W. Bush	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: WI, IL District:	Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Nat'l Conv.
Name of Federal Candidate Sen. John Kerry	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: WI, IL District:	Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Nat'l Conv.
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 WKOW-TV		Date of Disbursement or Obligation 08 24 2004	
Mailing Address of Payee 5727 Tokay Blvd.		Amount 22,438.75	
City Madison	State WI	Zip Code 53719	Communication Date 08 25 2004
Name of Employer N/A		Occupation N/A	
Purpose of Disbursement (including date) of communication(s) TV Advertising time [8/25 - 8/31] "What If"			
Name of Federal Candidate Pres. George W. Bush	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: WI, IL District:	Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Nat'l Conv.
Name of Federal Candidate Sen. John Kerry	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: WI, IL District:	Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Nat'l Conv.
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 (add 00)		72,296.75	
TOTAL This Period (last page this (no 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 WMSN-TV				Date of Disbursement or Obligation 08 / 24 / 2004	
Mailing Address of Payee 7847 Big Sky Drive				Amount 68000	
City Madison	State WI	Zip Code 53719	Communication Date 08 / 25 / 2004		
Name of Employer N/A		Occupation N/A			
Purpose of Disbursement (including title(s) of communication(s)) TV Advertising time [8/25 - 8/31] "What If"					
Name of Federal Candidate Pres. George W. Bush	Office Sought <input checked="" type="checkbox"/> President	House <input type="checkbox"/> Senate	State WI, IL	Disbursement/Obligation For <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Nat'l Conv.	
Name of Federal Candidate Sen. John Kerry	Office Sought <input checked="" type="checkbox"/> President	House <input type="checkbox"/> Senate	State WI, IL	Disbursement/Obligation For <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Nat'l Conv.	
Name of Federal Candidate	Office Sought	House	State	Disbursement/Obligation For	
B. Full Name (Last, First, Middle Initial) of Payee WHYV-TV					
Mailing Address of Payee 615 Forward Drive				Date of Disbursement or Obligation 08 / 24 / 2004	
City Madison	State WI	Zip Code 53711	Amount 4018375		
Name of Employer N/A		Occupation N/A		Communication Date 08 / 25 / 2004	
Purpose of Disbursement (including title(s) of communication(s)) TV Advertising time [8/25 - 8/31] "What If"					
Name of Federal Candidate Pres. George W. Bush	Office Sought <input checked="" type="checkbox"/> President	House <input type="checkbox"/> Senate	State WI	Disbursement/Obligation For <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Nat'l Conv.	
Name of Federal Candidate Sen. John Kerry	Office Sought <input checked="" type="checkbox"/> President	House <input type="checkbox"/> Senate	State WI	Disbursement/Obligation For <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Nat'l Conv.	
Name of Federal Candidate	Office Sought	House	State	Disbursement/Obligation For	
SUBTOTAL of Disbursements/Obligations This Page (optional)				4086375	
TOTAL This Period (add page title and number only) (copy 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 WDJT-TV				Date of Disbursement or Obligation 08 / 24 / 2004	
Mailing Address of Payee 509 W. Wisconsin Avenue				Amount 3,272.50	
City Milwaukee	State WI	Zip Code 53203	Communication Date 08 / 25 / 2004		
Name of Employer N/A		Occupation N/A		Purpose of Disbursement (including title(s) of communication(s)) TV Advertising time [8/25 - 8/31] "What If"	
Name of Federal Candidate Office Sought:					
Pres. George W. Bush	<input checked="" type="checkbox"/> House	State: WI, IL	Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) - Nat'l Conv.		
Sen. John Kerry	<input checked="" type="checkbox"/> Senate	District: -----	Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) - Nat'l Conv.		
Name of Federal Candidate Office Sought:					
Sen. John Kerry	<input checked="" type="checkbox"/> House	State: -----	Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ->		
Name of Federal Candidate Office Sought:					
B. Full Name (Last, First, Middle Initial) of Payee WISN-TV				Date of Disbursement or Obligation 08 / 24 / 2004	
Mailing Address of Payee 759 North 19th Street				Amount 21,760.00	
City Milwaukee	State WI	Zip Code 53235	Communication Date 08 / 25 / 2004		
Name of Employer N/A		Occupation N/A		Purpose of Disbursement (including title(s) of communication(s)) TV Advertising time [8/25 - 8/31] "What If"	
Name of Federal Candidate Office Sought:					
Pres. George W. Bush	<input checked="" type="checkbox"/> House	State: WI, IL	Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) - Nat'l Conv.		
Sen. John Kerry	<input checked="" type="checkbox"/> Senate	District: -----	Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) - Nat'l Conv.		
Name of Federal Candidate Office Sought:					
Sen. John Kerry	<input checked="" type="checkbox"/> House	State: -----	Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ->		
Name of Federal Candidate Office Sought:					
SUBTOTAL of Disbursements/Obligations This Page (optional)				2,503.25	
TOTAL This Period (not over this line number only)				(carry total from last page to Line 10)	

Fax Cover Sheet

FROM: Progress for America Voter Fund
Ralph R. Brown, Secretary

TO: Federal Election Commission
Fax: (202) 219-0174

DATE: August 26, 2004

PAGES: 19 (including fax cover sheet)
Part Two -- Page 1 repeated, and
Pages 19 to 35 of Form 9

The following is being transmitted by facsimile by the required due date:

Progress for America Voter Fund FEC Form 9
For the period from July 7, 2004, to August 25, 2004.

NOTE: This is Part Two of the transmittal. Please associate with Part One earlier transmitted.

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
Progress for America Voter Fund

(b) Address (number and street) check if different than previously reported
P.O. Box 57167

(c) City, State and ZIP Code
Washington, DC 20037

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

(e) Occupation
N/A

2. FEC Identification Number
C N/A

3. Is This Statement New or Amended

4. Covering Period
07/07/2004 through 08/25/2004

5. (a) Date of Public Distribution(s) 08/25/2004 (b) Communication Title "What If"

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
Mary Anne Carter

(b) Address (number and street)
P.O. Box 57167

(c) City, State and ZIP Code
Washington, DC 20037

(d) Name of Employer or Principal Place of Business
NAC Research

(e) Occupation
Consultant

9. Total Donations This Statement
\$3,731,230.00

10. Total Disbursements/Obligations This Statement
\$957,060.41

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 Ralph E. Brown, Secretary

SIGNATURE *Ralph E. Brown* DATE 08/26/2004

NOTE: Submission of false, deceptive or incomplete information in support of the person making 24-hour statement is the penalty of 2 U.S.C. 3478b

SCHEDULE 9-B

Disbursement(s) Made or Obligation(s)

A. Full Name (Last, First, Middle Initial) of Payee WITI-TV			Date of Disbursement or Obligation 08 / 24 / 2004		
Mailing Address of Payee 9001 North Green Bay Road			Amount 45,475.00		
City Milwaukee	State WI	Zip Code 53209	Communication Date 08 / 25 / 2004		
Name of Employer N/A			Occupation N/A		
Purpose of Disbursement (including title(s) of communication(s)) TV Advertising time (8/25 - 8/31) "What If"					
Name of Federal Candidate Pres. George W. Bush		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: WI, IL District:	Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Nat'l Conv.	
Name of Federal Candidate Sen. John Kerry		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: WI, IL District:	Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Nat'l Conv.	
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 WTMJ-TV			Date of Disbursement or Obligation 08 / 24 / 2004		
Mailing Address of Payee 720 E. Capital Drive			Amount 9,452.00		
City Milwaukee	State WI	Zip Code 53212	Communication Date 08 / 25 / 2004		
Name of Employer N/A			Occupation N/A		
Purpose of Disbursement (including title(s) of communication(s)) TV Advertising time (8/25 - 8/31) "What If"					
Name of Federal Candidate Pres. George W. Bush		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: WI, IL District:	Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Nat'l Conv.	
Name of Federal Candidate Sen. John Kerry		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: WI, IL District:	Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Nat'l Conv.	
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)			9,452.00		
TOTAL This Period (last page this line number only) (carry total from last page to Line 10)			[Blank]		

SCHEDULE B-B

Disbursement(s) Made or Obligation(s)

A. Full Name (Last, First, Middle Initial) of Payee KRJR-TV Mailing Address of Payee 245 South Lake Avenue City State Zip Code Duluth MN 55802 Name of Employer Occupation N/A N/A				Date of Disbursement or Obligation 08 24 2004 Amount 12,597.00 Communication Date 08 25 2004	
Purpose of Disbursement (including date) of communication(s) TV Advertising time (8/25 - 8/31) "What If"					
Name of Federal Candidate Pres. George W. Bush		Office Sought: <input checked="" type="checkbox"/> House State: WI, MN <input type="checkbox"/> Senate District: _____ <input type="checkbox"/> President		Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Nat'l Conv.	
Name of Federal Candidate Sen. John Kerry		Office Sought: <input checked="" type="checkbox"/> House State: WI, MN <input type="checkbox"/> Senate District: _____ <input type="checkbox"/> President		Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Nat'l Conv.	
Name of Federal Candidate _____		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <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 WDIO-TV Mailing Address of Payee 10 Observation Road City State Zip Code Duluth MN 55811 Name of Employer Occupation N/A N/A				Date of Disbursement or Obligation 08 24 2004 Amount 11,390.00 Communication Date 08 25 2004	
Purpose of Disbursement (including date) of communication(s) TV Advertising time (8/25 - 8/31) "What If"					
Name of Federal Candidate Pres. George W. Bush		Office Sought: <input checked="" type="checkbox"/> House State: WI, MN <input type="checkbox"/> Senate District: _____ <input type="checkbox"/> President		Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Nat'l Conv.	
Name of Federal Candidate Sen. John Kerry		Office Sought: <input checked="" type="checkbox"/> House State: WI, MN <input type="checkbox"/> Senate District: _____ <input type="checkbox"/> President		Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Nat'l Conv.	
Name of Federal Candidate _____		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <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)				23987.00	
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 KDLH-TV				Date of Disbursement or Obligation 08 / 24 / 2004	
Mailing Address of Payee 425 W Superior Street				Amount 6,727.75	
City Duluth	State MN	Zip Code 55802	Communication Date 08 / 25 / 2004		
Name of Employer N/A				Occupation N/A	
Purpose of Disbursement (including title) of communication(s) TV Advertising time [8/25 - 8/31] "What If"					
Name of Federal Candidate Pres. George W. Bush	Office Sought <input checked="" type="checkbox"/> President	House <input type="checkbox"/> Senate	State WI, MN	Disbursement/Obligation For <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) - Nat'l Conv.	
Name of Federal Candidate Sen. John Kerry	Office Sought <input checked="" type="checkbox"/> President	House <input type="checkbox"/> Senate	State WI, MN	Disbursement/Obligation For <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) - Nat'l Conv.	
Name of Federal Candidate N/A	Office Sought <input type="checkbox"/> President	House <input type="checkbox"/> Senate	State _____	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 KQDS-TV				Date of Disbursement or Obligation 08 / 24 / 2004	
Mailing Address of Payee 2001 London Road				Amount 3,014.75	
City Duluth	State MN	Zip Code 55812	Communication Date 08 / 25 / 2004		
Name of Employer N/A				Occupation N/A	
Purpose of Disbursement (including title) of communication(s) TV Advertising time [8/25 - 8/31] "What If"					
Name of Federal Candidate Pres. George W. Bush	Office Sought <input checked="" type="checkbox"/> President	House <input type="checkbox"/> Senate	State WI, MN	Disbursement/Obligation For <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) - Nat'l Conv.	
Name of Federal Candidate Sen. John Kerry	Office Sought <input checked="" type="checkbox"/> President	House <input type="checkbox"/> Senate	State WI, MN	Disbursement/Obligation For <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) - Nat'l Conv.	
Name of Federal Candidate N/A	Office Sought <input type="checkbox"/> President	House <input type="checkbox"/> Senate	State _____	Disbursement/Obligation For <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) - _____	
SUBTOTAL of Disbursements/Obligations This Page (optional)				7,022.50	
TOTAL This Period (last page this line number only) (copy total from last page to line 10)				_____	

SCHEDULE 9-B

Disbursement(s) Made or Obligation(s)

PAGE 22 OF 35

A. Full Name (Last, First, Middle Initial) of Payee WAOO-TV Mailing Address of Payee 1908 Grand Avenue City State Zip Code Wausau WI 54403 Name of Employer Occupation N/A N/A		Date of Disbursement or Obligation 08 24 2004 Amount 29231.25 Commencement Date 08 25 2004
Purpose of Disbursement (including title(s) of communication(s)) TV Advertising time [8/25 - 8/31] "What If"		
Name of Federal Candidate Pres. George W. Bush	Office Sought <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: WI District: Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Nat'l Conv.
Name of Federal Candidate Sen. John Kerry	Office Sought <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: WI District: Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Nat'l Conv.
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 WFXS-TV Mailing Address of Payee 1908 Grand Avenue City State Zip Code Wausau WI 54403 Name of Employer Occupation N/A N/A		Date of Disbursement or Obligation 08 25 2004 Amount 935.00 Commencement Date 08 25 2004
Purpose of Disbursement (including title(s) of communication(s)) TV Advertising time [8/25 - 8/31] "What If"		
Name of Federal Candidate Pres. George W. Bush	Office Sought <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: WI District: _____ Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Nat'l Conv.
Name of Federal Candidate Sen. John Kerry	Office Sought <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: WI District: _____ Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Nat'l Conv.
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)		20186.25
TOTAL This Period (last page this 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 Payee WJFW-TV				Date of Disbursement or Obligation 08 / 24 / 2004	
Mailing Address of Payee 3217 County Trunk G				Amount 5,903.25	
City Rhineclander	State WI	Zip Code 54501	Communication Date 08 / 25 / 2004		
Name of Employer N/A				Occupation N/A	
Purpose of Disbursement (including title(s) of communication(s)) TV Advertising time [8/25 - 8/31] "What If"					
Name of Federal Candidate Pres. George W. Bush	Office Sought <input checked="" type="checkbox"/> President	House <input type="checkbox"/> Senate	State WI, MI	Disbursement/Obligation For <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Nat'l Conv.	
Name of Federal Candidate Sen. John Kerry	Office Sought <input checked="" type="checkbox"/> President	House <input type="checkbox"/> Senate	State WI, MI	Disbursement/Obligation For <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Nat'l Conv.	
Name of Federal Candidate	Office Sought	House	State	Disbursement/Obligation For	
B. Full Name (Last, First, Middle Initial) of Payee WSAW-TV				Date of Disbursement or Obligation 08 / 24 / 2004	
Mailing Address of Payee 1114 Grand Avenue				Amount 2,493.90	
City Wausau	State WI	Zip Code 54403	Communication Date 08 / 25 / 2004		
Name of Employer N/A				Occupation N/A	
Purpose of Disbursement (including title(s) of communication(s)) TV Advertising time [8/25 - 8/31] "What If"					
Name of Federal Candidate Pres. George W. Bush	Office Sought <input checked="" type="checkbox"/> President	House <input type="checkbox"/> Senate	State WI	Disbursement/Obligation For <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Nat'l Conv.	
Name of Federal Candidate Sen. John Kerry	Office Sought <input checked="" type="checkbox"/> President	House <input type="checkbox"/> Senate	State WI	Disbursement/Obligation For <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Nat'l Conv.	
Name of Federal Candidate	Office Sought	House	State	Disbursement/Obligation For	
SUBTOTAL of Disbursements/Obligations This Page (optional)				3,084.25	
TOTAL This Period (last page this line number only) (carry total from last page to Line 10)					

SCHEDULE 9-B

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Disbursement(s) Made or Obligation(s)

A. Full Name (Last, First, Middle Initial) of Payee KCRG-TV				Date of Disbursement or Obligation 08 / 24 / 2004	
Mailing Address of Payee 501 2nd Avenue, SE				Amount 2,123,350.00	
City Cedar Rapids	State IA	Zip Code 52401		Communication Date 08 / 25 / 2004	
Name of Employer N/A				Occupation N/A	
Purpose of Disbursement (including title) of communication(s) TV Advertising time [8/25 - 8/31] "What If"					
Name of Federal Candidate Pres. George W. Bush	Office Sought <input checked="" type="checkbox"/> President	House Senate	State IA	Disbursement/Obligation For <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Nat'l Conv.	
Name of Federal Candidate Sen. John Kerry	Office Sought <input checked="" type="checkbox"/> President	House Senate	State IA	Disbursement/Obligation For <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Nat'l Conv.	
Name of Federal Candidate N/A	Office Sought <input type="checkbox"/> President	House Senate	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 KGAN-TV				Date of Disbursement or Obligation 08 / 25 / 2004	
Mailing Address of Payee 600 Old Marion Road, NE				Amount 1,094,375	
City Cedar Rapids	State IA	Zip Code 52402		Communication Date 08 / 25 / 2004	
Name of Employer N/A				Occupation N/A	
Purpose of Disbursement (including title) of communication(s) TV Advertising time [8/25 - 8/31] "What If"					
Name of Federal Candidate Pres. George W. Bush	Office Sought <input checked="" type="checkbox"/> President	House Senate	State IA	Disbursement/Obligation For <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Nat'l Conv.	
Name of Federal Candidate Sen. John Kerry	Office Sought <input checked="" type="checkbox"/> President	House Senate	State IA	Disbursement/Obligation For <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Nat'l Conv.	
Name of Federal Candidate N/A	Office Sought <input type="checkbox"/> President	House Senate	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)				3,217,725	
TOTAL This Period (last page this line number only) (carry total from last page to line 10)				3,217,725	

SCHEDULE 9-B

Disbursement(s) Made or Obligation(s)

A. Full Name (Last, First, Middle Initial) of Payer RWNL-TV		Date of Disbursement or Obligation 08 / 24 / 2004	
Mailing Address of Payer 500 East 4th Street		Amount 34,913.75	
City Waterloo	State IA	Zip Code 50703	Communication Date 08 / 23 / 2004
Name of Employer N/A		Occupation N/A	
Purpose of Disbursement (including title) of communication(s) TV Advertising time [8/25 - 8/31] "What If"			
Name of Federal Candidate Pres. George W. Bush	Office Sought <input checked="" type="checkbox"/> President	House <input type="checkbox"/> Senate	State IA
		Disbursement/Obligation For <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Nat'l Conv.	
Name of Federal Candidate Sen. John Kerry	Office Sought <input checked="" type="checkbox"/> President	House <input type="checkbox"/> Senate	State IA
		Disbursement/Obligation For <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Nat'l Conv.	
Name of Federal Candidate _____	Office Sought <input type="checkbox"/> President	House <input type="checkbox"/> Senate	State _____
		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 KLJB-TV		Date of Disbursement or Obligation 08 / 24 / 2004	
Mailing Address of Payer 937 East 95th Street, Suite B		Amount 3,799.50	
City Davenport	State IA	Zip Code 52807	Communication Date 08 / 23 / 2004
Name of Employer N/A		Occupation N/A	
Purpose of Disbursement (including title) of communication(s) TV Advertising time [8/25 - 8/31] "What If"			
Name of Federal Candidate Pres. George W. Bush	Office Sought <input checked="" type="checkbox"/> President	House <input type="checkbox"/> Senate	State IA, IL
		Disbursement/Obligation For <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Nat'l Conv.	
Name of Federal Candidate Sen. John Kerry	Office Sought <input checked="" type="checkbox"/> President	House <input type="checkbox"/> Senate	State IA, IL
		Disbursement/Obligation For <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Nat'l Conv.	
Name of Federal Candidate _____	Office Sought <input type="checkbox"/> President	House <input type="checkbox"/> Senate	State _____
		Disbursement/Obligation For <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
SUBTOTAL of Disbursements/Obligations This Page (optional)		3,871.325	
TOTAL This Period (just page this line number only) (copy 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 KWQC-TV			Date of Disbursement or Obligation 08 / 24 / 2004	
Mailing Address of Payee 805 Brady Street			Amount 8,406.25	
City Davenport	State IA	Zip Code 52801	Communication Date 08 / 25 / 2004	
Name of Employer N/A			Occupation N/A	

Purpose of Disbursement (including date(s) of communication(s))
 TV Advertising time [8/25 - 8/31] "What If"

Name of Federal Candidate Pres. George W. Bush	Office Sought <input checked="" type="checkbox"/> President	House <input type="checkbox"/>	Senate <input type="checkbox"/>	State IA, IL	District ---	Disbursement/Obligation For <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) - Nat'l Conv.
Name of Federal Candidate Sen. John Kerry	Office Sought <input checked="" type="checkbox"/> President	House <input type="checkbox"/>	Senate <input type="checkbox"/>	State IA, IL	District ---	Disbursement/Obligation For <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) - Nat'l Conv.
Name of Federal Candidate ---	Office Sought <input type="checkbox"/>	House <input type="checkbox"/>	Senate <input type="checkbox"/>	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 WMBB-TV			Date of Disbursement or Obligation 08 / 24 / 2004	
Mailing Address of Payee 231 18th Street			Amount 14,165.25	
City Rock Island	State IL	Zip Code 61201	Communication Date 08 / 25 / 2004	
Name of Employer N/A			Occupation N/A	

Purpose of Disbursement (including date(s) of communication(s))
 TV Advertising time [8/25 - 8/31] "What If"

Name of Federal Candidate Pres. George W. Bush	Office Sought <input checked="" type="checkbox"/> President	House <input type="checkbox"/>	Senate <input type="checkbox"/>	State IA, IL	District ---	Disbursement/Obligation For <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) - Nat'l Conv.
Name of Federal Candidate Sen. John Kerry	Office Sought <input checked="" type="checkbox"/> President	House <input type="checkbox"/>	Senate <input type="checkbox"/>	State IA, IL	District ---	Disbursement/Obligation For <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) - Nat'l Conv.
Name of Federal Candidate ---	Office Sought <input type="checkbox"/>	House <input type="checkbox"/>	Senate <input type="checkbox"/>	State ---	District ---	Disbursement/Obligation For <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) -

SUBTOTAL of Disbursements/Obligations This Page (colored)	9,757.50
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 WQAD-TV		Date of Disbursement or Obligation 08 / 24 / 2004	
Mailing Address of Payee 3003 Park 16th Street		Amount 15,805.75	
City Moline	State IL	Zip Code 61265	Commission Date 08 / 25 / 2004
Name of Employer N/A		Occupation N/A	
Purpose of Disbursement (including title(s) of commercial(s)) TV Advertising time [8/25 - 8/31] "What If"			
Name of Federal Candidate Pres. George W. Bush	Office Sought <input checked="" type="checkbox"/> President	State IA, IL	Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Nat'l Conv.
Name of Federal Candidate Sen. John Kerry	Office Sought <input checked="" type="checkbox"/> President	State IA, IL	Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Nat'l Conv.
Name of Federal Candidate	Office Sought	State	Disbursement/Obligation For:
B. Full Name (Last, First, Middle Initial) of Payee KCCI-TV		Date of Disbursement or Obligation 08 / 24 / 2004	
Mailing Address of Payee 898 9th Street		Amount 5,506.25	
City Des Moines	State IA	Zip Code 50309	Commission Date 08 / 25 / 2004
Name of Employer N/A		Occupation N/A	
Purpose of Disbursement (including title(s) of commercial(s)) TV Advertising time [8/25 - 8/31] "What If"			
Name of Federal Candidate Pres. George W. Bush	Office Sought <input checked="" type="checkbox"/> President	State IA	Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Nat'l Conv.
Name of Federal Candidate Sen. John Kerry	Office Sought <input checked="" type="checkbox"/> President	State IA	Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Nat'l Conv.
Name of Federal Candidate	Office Sought	State	Disbursement/Obligation For:
SUBTOTAL of Disbursements/Obligations This Page (optional)			7,150.20
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 KDSK-TV				Date of Disbursement or Obligation 08 / 24 / 2004	
Mailing Address of Payee 4023 Fleur Drive				Amount 8,375.00	
City Des Moines	State IA	Zip Code 50321			
Name of Employer N/A				Communication Date 08 / 25 / 2004	
Purpose of Disbursement (including title(s) of communication(s)) TV Advertising time [8/25 - 8/31] "What If"					
Name of Federal Candidate Pres. George W. Bush	Office Sought <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State IA	Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Nat'l Conv.		
Name of Federal Candidate Sen. John Kerry	Office Sought <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State IA	Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Nat'l Conv.		
Name of Federal Candidate _____					
Name of Federal Candidate _____					
Name of Federal Candidate _____					
B. Full Name (Last, First, Middle Initial) of Payee WNO-TV				Date of Disbursement or Obligation 08 / 24 / 2004	
Mailing Address of Payee 1801 Grand Avenue				Amount 33,065.00	
City Des Moines	State IA	Zip Code 50309			
Name of Employer N/A				Communication Date 08 / 25 / 2004	
Purpose of Disbursement (including title(s) of communication(s)) TV Advertising time [8/25 - 8/31] "What If"					
Name of Federal Candidate Pres. George W. Bush	Office Sought <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State IA	Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Nat'l Conv.		
Name of Federal Candidate Sen. John Kerry	Office Sought <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State IA	Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Nat'l Conv.		
Name of Federal Candidate _____					
Name of Federal Candidate _____					
Name of Federal Candidate _____					
SUBTOTAL of Disbursements/Obligations This Page (optional)				33,702.50	
TOTAL This Period (last page file the number only) (copy 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 WDI-TV			Date of Disbursement or Obligation 08 / 23 / 2004	
Mailing Address of Payee 3903 Westown Parkway			Amount 4,386.00	
City West Des Moines	State IA	Zip Code 50266	Communication Date 08 / 23 / 2004	
Name of Employer N/A			Occupation N/A	
Purpose of Disbursement (including use(s) of communication(s)) TV Advertising time [8/25 - 8/31] "What If"				
Name of Federal Candidate Pres. George W. Bush	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: IA District:	Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Nat'l Conv.	
Name of Federal Candidate Sen. John Kerry	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: IA District:	Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Nat'l Conv.	
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 KAM-TV			Date of Disbursement or Obligation 08 / 24 / 2004	
Mailing Address of Payee 1701 10th Place, NE			Amount 1,615.00	
City Austin	State MN	Zip Code 55912	Communication Date 08 / 25 / 2004	
Name of Employer N/A			Occupation N/A	
Purpose of Disbursement (including use(s) of communication(s)) TV Advertising time [8/25 - 8/31] "What If"				
Name of Federal Candidate Pres. George W. Bush	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: IA, MN District:	Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Nat'l Conv.	
Name of Federal Candidate Sen. John Kerry	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: IA, MN District:	Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Nat'l Conv.	
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)			6,001.00	
TOTAL This Period (see page 10 for 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 KIMM-TV				Date of Disbursement or Obligation 08 / 24 / 2004	
Mailing Address of Payee 112 N. Pennsylvania Avenue				Amount 9,906.75	
City Mason City	State IA	Zip Code 50401		Communication Date 08 / 23 / 2004	
Name of Employer N/A				Occupation N/A	
Purpose of Disbursement (including title) of communication(s) TV Advertising time [8/25 - 8/31] "What If"					
Name of Federal Candidate Pres. George W. Bush	Office Sought <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State IA, MN	Disbursement/Obligation For <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Nat'l Conv.		
Name of Federal Candidate Sen. John Kerry	Office Sought <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State IA, MN	Disbursement/Obligation For <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Nat'l Conv.		
Name of Federal Candidate	Office Sought	State	Disbursement/Obligation For		
B. Full Name (Last, First, Middle Initial) of Payee KTTC-TV				Date of Disbursement or Obligation 08 / 23 / 2004	
Mailing Address of Payee 6901 Bandel Road, NW				Amount 3,642.25	
City Rochester	State MN	Zip Code 55901		Communication Date 08 / 23 / 2004	
Name of Employer N/A				Occupation N/A	
Purpose of Disbursement (including title) of communication(s) TV Advertising time [8/25 - 8/31] "What If"					
Name of Federal Candidate Pres. George W. Bush	Office Sought <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State IA, MN, WI	Disbursement/Obligation For <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Nat'l Conv.		
Name of Federal Candidate Sen. John Kerry	Office Sought <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State IA, MN, WI	Disbursement/Obligation For <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Nat'l Conv.		
Name of Federal Candidate	Office Sought	State	Disbursement/Obligation For		
SUBTOTAL of Disbursements/Obligations This Page (optional)				2,633.00	
TOTAL This Period (last page file line number only) (carry total from last page to Line 10)				2,633.00	

SCHEDULE 9-B

Disbursement(s) Made or Obligation(s)

PAGE 3j OF 35

A. Full Name (Last, First, Middle Initial) of Payee KXLY-TV		Date of Disbursement or Obligation 08 / 24 / 2004	
Mailing Address of Payee 6301 Bandal Road, NW		Amount 5,567.5	
City Rochester	State MN	Zip Code 55901	Communication Date 08 / 25 / 2004
Name of Employer N/A		Occupation N/A	
Purpose of Disbursement (including title) of communication(s) TV Advertising time [8/25 - 8/31] "What If"			
Name of Federal Candidate Pres. George W. Bush	Office Sought <input checked="" type="checkbox"/> President	House State: IA, MN Senate District: _____ President	Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Nat'l Conv.
Name of Federal Candidate Sen. John Kerry	Office Sought <input checked="" type="checkbox"/> President	House State: IA, MN Senate District: _____ President	Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Nat'l Conv.
Name of Federal Candidate _____	Office Sought <input type="checkbox"/> President	House State: _____ Senate District: _____ 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 KCAU-TV		Date of Disbursement or Obligation 08 / 24 / 2004	
Mailing Address of Payee 625 Douglas Street		Amount 7,280.25	
City Sioux City	State IA	Zip Code 51103	Communication Date 08 / 25 / 2004
Name of Employer N/A		Occupation N/A	
Purpose of Disbursement (including title) of communication(s) TV Advertising time [8/25 - 8/31] "What If"			
Name of Federal Candidate Pres. George W. Bush	Office Sought <input checked="" type="checkbox"/> President	House State: IA, NE, SD Senate District: _____ President	Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Nat'l Conv.
Name of Federal Candidate Sen. John Kerry	Office Sought <input checked="" type="checkbox"/> President	House State: IA, NE, SD Senate District: _____ President	Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Nat'l Conv.
Name of Federal Candidate _____	Office Sought <input type="checkbox"/> President	House State: _____ Senate District: _____ President	Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
SUBTOTAL of Disbursements/Obligations This Page (Section)		7,837.00	
TOTAL This Period (last page this line number only) (carry total from last page to Line 19)		_____	

SCHEDULE B-B

Disbursement(s) Made or Obligation(s)

A. Full Name (Last, First Middle Initial) of Payee KMEG-TV				Date of Disbursement or Obligation 08 / 24 / 2004	
Mailing Address of Payee 100 Gold Circle				Amount 50,150.00	
City Dakota Dunes	State SD	Zip Code 57049		Communication Date 08 / 25 / 2004	
Name of Employer N/A				Occupation N/A	
Purpose of Disbursement (including title(s) of communication(s)) TV Advertising time [8/25 - 8/31] "What If"					
Name of Federal Candidate Pres. George W. Bush	Office Sought <input checked="" type="checkbox"/> President	House <input type="checkbox"/> Senate	State IA, SD, NE	Disbursement/Obligation For <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) - Nat'l Conv.	
Name of Federal Candidate Sen. John Kerry	Office Sought <input checked="" type="checkbox"/> President	House <input type="checkbox"/> Senate	State IA, SD, NE	Disbursement/Obligation For <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) - Nat'l Conv.	
Name of Federal Candidate N/A	Office Sought <input type="checkbox"/> President	House <input type="checkbox"/> Senate	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 KTIW-TV				Date of Disbursement or Obligation 08 / 24 / 2004	
Mailing Address of Payee 3135 Floyd Blvd.				Amount 22,123.25	
City Sioux City	State IA	Zip Code 51108		Communication Date 08 / 25 / 2004	
Name of Employer N/A				Occupation N/A	
Purpose of Disbursement (including title(s) of communication(s)) TV Advertising time [8/25 - 8/31] "What If"					
Name of Federal Candidate Pres. George W. Bush	Office Sought <input checked="" type="checkbox"/> President	House <input type="checkbox"/> Senate	State IA, NE, SD	Disbursement/Obligation For <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) - Nat'l Conv.	
Name of Federal Candidate Sen. John Kerry	Office Sought <input checked="" type="checkbox"/> President	House <input type="checkbox"/> Senate	State IA, NE, SD	Disbursement/Obligation For <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) - Nat'l Conv.	
Name of Federal Candidate N/A	Office Sought <input type="checkbox"/> President	House <input type="checkbox"/> Senate	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)				27,136.25	
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 KTVO-TV			Date of Disbursement or Obligation 08 / 24 / 2004		
Mailing Address of Payee 15518 US Highway 63 North			Amount 23,069.00		
City Kirksville	State MO	Zip Code 63501	Commencement Date 08 / 27 / 2004		
Name of Employer N/A			Occupation N/A		
Purpose of Disbursement (including title(s) of communication(s)) TV Advertising time [8/27 - 8/31] "What If"					
Name of Federal Candidate Pres. George W. Bush	Office Sought <input checked="" type="checkbox"/> President	House <input type="checkbox"/> Senate	State IA, MO	Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Nat'l Conv.	
Name of Federal Candidate Sen. John Kerry	Office Sought <input checked="" type="checkbox"/> President	House <input type="checkbox"/> Senate	State IA, MO	Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Nat'l Conv.	
Name of Federal Candidate	Office Sought	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 KYOU-TV			Date of Disbursement or Obligation 08 / 24 / 2004		
Mailing Address of Payee 820 West 2nd Street			Amount 1,293.00		
City Ottumwa	State IA	Zip Code 52501	Commencement Date 08 / 27 / 2004		
Name of Employer N/A			Occupation N/A		
Purpose of Disbursement (including title(s) of communication(s)) TV Advertising time [8/27 - 8/31] "What If"					
Name of Federal Candidate Pres. George W. Bush	Office Sought <input checked="" type="checkbox"/> President	House <input type="checkbox"/> Senate	State IA	Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Nat'l Conv.	
Name of Federal Candidate Sen. John Kerry	Office Sought <input checked="" type="checkbox"/> President	House <input type="checkbox"/> Senate	State IA	Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Nat'l Conv.	
Name of Federal Candidate	Office Sought	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)			24,362.00		
TOTAL This Period (last page #21 line number only) (carry total from last page to Line 10)					

SCHEDULE 9-B

Disbursement(s) Made or Obligation(s)

PAGE 34 OF 35

A. Full Name (Last, First, Middle Initial) of Payee Wisconsin - National Cable Communications				Date of Disbursement or Obligation 08 / 24 / 2004	
Mailing Address of Payee 5454 Wisconsin Avenue, Suite 625				Amount 1,635,230	
City Chevy Chase	State MD	Zip Code 20815			
Name of Employer N/A			Occupation N/A		
Purpose of Disbursement (including title) of communication(s) TV Advertising time [8/25 - 8/31] "What If"					
Name of Federal Candidate Pres. George W. Bush	Office Sought <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State WI	Disbursement/Obligation For <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Nat'l Conv.		
Name of Federal Candidate Sen. John Kerry	Office Sought <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State WI	Disbursement/Obligation For <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Nat'l Conv.		
B. Full Name (Last, First, Middle Initial) of Payee Logo - National Cable Communications					
Mailing Address of Payee 5454 Wisconsin Avenue, Suite 625				Date of Disbursement or Obligation 08 / 25 / 2004	
City Chevy Chase	State MD	Zip Code 20815	Amount 602,820		
Name of Employer N/A			Occupation N/A		
Purpose of Disbursement (including title) of communication(s) TV Advertising time [8/25 - 8/31] "What If"					
Name of Federal Candidate Pres. George W. Bush	Office Sought <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State IA	Disbursement/Obligation For <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Nat'l Conv.		
Name of Federal Candidate Sen. John Kerry	Office Sought <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State IA	Disbursement/Obligation For <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Nat'l Conv.		
SUBTOTAL of Disbursements/Obligations This Page (optional)					
TOTAL This Period (last page this line number only) (carry total from last page to Line 10)				2,238,050	

SCHEDULE 9-B

Disbursement(s) Made or Obligation(s)

A. Full Name (Last, First, Middle Initial) of Payor Mentzer Media Services Inc.				Date of Disbursement or Obligation 08 / 23 / 2004	
Mailing Address of Payor 600 Fairmount Avenue, Suite 306				Amount 1,324,600.50	
City Towson	State MD	Zip Code 21286	Communication Date 08 / 23 / 2004		
Name of Employer N/A	Occupation N/A				
Purpose of Disbursement (including title(s) of communication(s)) Media Placement Fee - TV Ad - "What If"					
Name of Federal Candidate Pres. George W. Bush	Office Sought <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State IA, WI, MI, MN, IL, IN, OH, SD, ND	Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Nat'l Conv.		
Name of Federal Candidate Sen. John Kerry	Office Sought <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State VT, NH, ME, NY, PA	Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Nat'l Conv.		
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 Payor McCarthy Marcus Hennings, Ltd.				Date of Disbursement or Obligation 08 / 23 / 2004	
Mailing Address of Payor 1830 M Street, NW, Suite 235				Amount 6,472.91	
City Washington	State DC	Zip Code 20036	Communication Date 08 / 23 / 2004		
Name of Employer N/A	Occupation N/A				
Purpose of Disbursement (including title(s) of communication(s)) Media Production Fee - TV Ad - "What If"					
Name of Federal Candidate Pres. George W. Bush	Office Sought <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State IA, WI, MI, MN, IL, IN, OH, SD, ND	Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Nat'l Conv.		
Name of Federal Candidate Sen. John Kerry	Office Sought <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State VT, NH, ME, NY, PA	Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Nat'l Conv.		
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)				1,390,734.1	
TOTAL This Period (last page file line number only) (carry total from last page to Line 10)				9,510,104.1	

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	Postmarked (R/C)
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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
<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 PREPARER	N/A DATE PREPARED