Campaign Money Watch

a project of Public Campaign Action Fund

FAX

To whom it concern -

The next four pages of this fax contain the filing for Campaign Money Watch FEC Committee # C30000160

1320 19th Street, NW, Suite M-1, Washington, DC 20036
96 Paul Gore Street, Boston, MA 02130
tel: (617) 524-2330 fax: (617) 524-2840
http://www.campaignmoney.org

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: Campaign Money Watch

(b) Address (number and street) ☐ Check if different than previously reported: 1320 19th Street, NW, Suite M-1

(c) City, State and ZIP Code: Washington DC 20036

2. FEC Identification Number: C 5 0 0 0 0 1 6 0

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

(e) Occupation: N/A

3. Is This Statement ✓ New or Amended

4. Covering Period 09 09 2004 through 09 23 2004

5. (a) Date of Public Distribution(s) 09 23 2004 (b) Communication Title: The Billionaire Club

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

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

8. Custodian of Records

(a) Name: Gail Gomez c/o Public Campaign Action Fund

(b) Address (number and street): 1320 19th St NW, Suite M-1

(c) City, State and ZIP Code: Washington, DC 20036

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

(e) Occupation: office manager

9. Total Donations This Statement 100,000.00

10. Total Disbursements/Obligations This Statement 100,000.00

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: David Donelly

SIGNATURE: David Donelly DATE: 9-24-04

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

FEC FORM 9 (REV. 02/2003)

FE9AN038.PDF

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

11. Person(s) Sharing/Exercising Control

A. (a) Name
David Donnelly
(b) Address (number and street)
96 Paul Gore St
(c) City, State and ZIP Code
Boston MA 02130
(d) Name of Employer or Principal Place of Business
Campaign Money Watch / Public Campaign Action Fund
(e) Occupation
Director / Pol. Dir.

B. (a) Name
Nick Nyhart c/o Public Campaign Action Fund
(b) Address (number and street)
1520 19th St, NW, Suite M-1
(c) City, State and ZIP Code
Washington DC 20036
(d) Name of Employer or Principal Place of Business
Public Campaign Action Fund
(e) Occupation
Executive Director

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

SCHEDULE 9-A
Donation(s) Received

A. Full Name of Donor: Hanne Levy-Hinte Mailing Address of Donor: 855 Third Avenue #3180 City: New York State: NY Zip: 10022	Date of Receipt: 09 20 2004 Amount: 10,000,000
B. Full Name of Donor: Mailing Address of Donor: City: State: Zip:	Date of Receipt: Amount:
C. Full Name of Donor: Mailing Address of Donor: City: State: Zip:	Date of Receipt: Amount:
D. Full Name of Donor: Mailing Address of Donor: City: State: Zip:	Date of Receipt: Amount:
E. Full Name of Donor: Mailing Address of Donor: City: State: Zip:	Date of Receipt: Amount:

SUBTOTAL of Donations This Page (optional) ..... ▶

TOTAL This Period (last page this line number only) ..... ▶ 10,000,000
(carry total from last page to Line 9)

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

PAGE 4 OF 4

A. Full Name (Last, First, Middle Initial) of Payee: MacWilliams Robinson & Partners

Mailing Address of Payee: 1660 L Street, NW

City: Washington | State: DC | Zip Code: 20036

Name of Employer: N/A | Occupation:

Date of Disbursement or Obligation: 04 21 2004

Amount: 100,000.00

Communication Date: 04 23 2004

Purpose of Disbursement (including date(s) of communication(s)): Media production, advertising "The Bill", "Don't Let"

Name of Federal Candidate: George Bush | 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)

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: M M / D D / Y Y Y Y

Amount:

Communication Date: M M / D D / Y Y Y Y

Purpose of Disbursement (including date(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) ▶

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

Federal Election Commission

ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS

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

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☐ No Postmark	
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N/A PREPARER	N/A DATE PREPARED

(5/2004)