

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
The Media Fund

(b) Address (number and street) check if different than previously reported
888 16th Street NW

(c) City, State and ZIP Code
Washington, DC 20006

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

(e) Occupation
N/A

2. FEC Identification Number
N/A

3. Is This Statement New or Amended

4. Covering Period

| | | |
|----|----|------|
| 09 | 08 | 2004 |
| 09 | 12 | 2004 |

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

| | | |
|----|----|------|
| 09 | 13 | 2004 |
|----|----|------|

 (b) Contribution Type Voluntary Contribution

6. Is the Filer a Qualified Nonprofit Corporation under 17 CFR 116.107? 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
Erik Smith

(b) Address (number and street)
888 16th Street NW

(c) City, State and ZIP Code
Washington, DC 20006

(d) Name of Employer or Principal Place of Business
The Media Fund

(e) Occupation
Executive Director

9. Total Donations This Statement \$ 00

10. Total Disbursements/Obligations This Statement 75850.00

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 Erik Smith

SIGNATURE [Signature]

DATE 9-15-04

NOTE: Suppression of false, misleading or incomplete information may subject the person filing this statement to the penalties of 18 U.S.C. 9437g.

PERMANENT FORM

FEC FORM 9 (REV. 2/2003)

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

11. Person(s) Sharing/Exercising Control

| | |
|--|------------------------------------|
| A. (a) Name Eric Smith | |
| (b) Address (number and street) 888 16th Street NW | |
| (c) City, State and ZIP Code Washington, DC 20006 | |
| (d) Name of Employer or Principal Place of Business The Media Fund | (e) Occupation President |
| 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 |

SCHEDULE 3-A Donations Received

A. Full Name of Donor

No contributions this period

Mailing Address of Donor

City

State

Zip

Date of Receipt

MM/DD/YYYY

Amount

Amount field

B. Full Name of Donor

Mailing Address of Donor

City

State

Zip

Date of Receipt

MM/DD/YYYY

Amount

Amount field

C. Full Name of Donor

Mailing Address of Donor

City

State

Zip

Date of Receipt

MM/DD/YYYY

Amount

Amount field

D. Full Name of Donor

Mailing Address of Donor

City

State

Zip

Date of Receipt

MM/DD/YYYY

Amount

Amount field

E. Full Name of Donor

Mailing Address of Donor

City

State

Zip

Date of Receipt

MM/DD/YYYY

Amount

Amount field

SUBTOTAL of Donations This Page (optional)

TOTAL This Period from page and form number only
(carry total from last page to Line 5)

0 00

Amount field

SCHEDULE 9-B

Disbursement(s) Made or Obligation(s)

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

Mailing Address of Payee
 1500 W 2nd Ave
 City: Columbus State: OH Zip Code: 43237

Name of Employer
 N/A Occupation: N/A

Date of Disbursement or Obligation
 09/13/2004

Amount
 4505.00

Contribution Date
 09/13/2004

Purpose of Disbursement (including title) of advertisement(s)
 Radio Advertisements 09/13/04-09/15/04 "Nobody's Fool," "You've Heard the Ad"

| Name of Federal Candidate | Office Sought | House | State | OK | Disbursement/Obligation For: |
|---------------------------|---------------|-------------------------------------|-------|-------------------------------------|--|
| George W. Bush | | <input checked="" type="checkbox"/> | OH | <input checked="" type="checkbox"/> | <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General |
| | | <input type="checkbox"/> Senate | | | <input type="checkbox"/> Other (specify) > |
| | | <input type="checkbox"/> President | | | |
| Name of Federal Candidate | Office Sought | House | State | | Disbursement/Obligation For: |
| | | <input type="checkbox"/> | | | <input type="checkbox"/> Primary <input type="checkbox"/> General |
| | | <input type="checkbox"/> Senate | | | <input type="checkbox"/> Other (specify) > |
| | | <input type="checkbox"/> President | | | |
| Name of Federal Candidate | Office Sought | House | State | | Disbursement/Obligation For: |
| | | <input type="checkbox"/> | | | <input type="checkbox"/> Primary <input type="checkbox"/> General |
| | | <input type="checkbox"/> Senate | | | <input type="checkbox"/> Other (specify) > |
| | | <input type="checkbox"/> President | | | |

B. Full Name (Last, First, Middle Initial) of Payee
WCKX

Mailing Address of Payee
 1500 W 2nd Ave
 City: Columbus State: OH Zip Code: 43212

Name of Employer
 N/A Occupation: N/A

Date of Disbursement or Obligation
 09/13/2004

Amount
 2577.50

Contribution Date
 09/13/2004

Purpose of Disbursement (including title) of advertisement(s)
 Radio Advertisements 09/13/04-09/15/04 "Nobody's Fool," "You've Heard the Ad"

| Name of Federal Candidate | Office Sought | House | State | OK | Disbursement/Obligation For: |
|---------------------------|---------------|-------------------------------------|-------|-------------------------------------|--|
| George W. Bush | | <input checked="" type="checkbox"/> | OH | <input checked="" type="checkbox"/> | <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General |
| | | <input type="checkbox"/> Senate | | | <input type="checkbox"/> Other (specify) > |
| | | <input type="checkbox"/> President | | | |
| Name of Federal Candidate | Office Sought | House | State | | Disbursement/Obligation For: |
| | | <input type="checkbox"/> | | | <input type="checkbox"/> Primary <input type="checkbox"/> General |
| | | <input type="checkbox"/> Senate | | | <input type="checkbox"/> Other (specify) > |
| | | <input type="checkbox"/> President | | | |
| Name of Federal Candidate | Office Sought | House | State | | Disbursement/Obligation For: |
| | | <input type="checkbox"/> | | | <input type="checkbox"/> Primary <input type="checkbox"/> General |
| | | <input type="checkbox"/> Senate | | | <input type="checkbox"/> Other (specify) > |
| | | <input type="checkbox"/> President | | | |

AGGREGATE of Disbursements/Obligations This Page (optional) >

TOTAL This Period (last page this line number only) >

(carry over from last page to Line 10)

SCHEDULE 9-B

Disbursements Made or Obligation(s)

A. Full Name (Last, First, Middle Initial) of Payer
 WKRB - FM

Calling Address of Payer
 717 E David Rd
 City: Dayton State: OH Zip Code: 45429

Name of Employer
 N/A

Date of Disbursement or Obligation
 09/13/04 - 09/19/04

Amount
 2977.00

Communication Date
 09/13/04 - 09/19/04

Purpose of Disbursement (including title) of communication(s)
 Radio Advertisements 09/13/04-09/19/04 "Nobody's Fool"; "You've Heard the Ads"

Name of Federal Candidate Office Sought: House State: OH District: _____
 George W. Bush Senate President

Name of Federal Candidate Office Sought: House State: _____ District: _____
 Senate President

Name of Federal Candidate Office Sought: House State: _____ District: _____
 Senate President

Disbursement/Obligation For:
 Primary General
 Other (specify): _____

B. Full Name (Last, First, Middle Initial) of Payer
 WISB - FM

Calling Address of Payer
 1821 Summit Rd #400
 City: Cincinnati State: OH Zip Code: 45237

Name of Employer
 N/A

Date of Disbursement or Obligation
 09/13/04 - 09/19/04

Amount
 3740.00

Communication Date
 09/13/04 - 09/19/04

Purpose of Disbursement (including title) of communication(s)
 Radio Advertisements 09/13/04-09/19/04 "Nobody's Fool"; "You've Heard the Ads"

Name of Federal Candidate Office Sought: House State: OH District: _____
 George W. Bush Senate President

Name of Federal Candidate Office Sought: House State: _____ District: _____
 Senate President

Name of Federal Candidate Office Sought: House State: _____ District: _____
 Senate President

Disbursement/Obligation For:
 Primary General
 Other (specify): _____

SUBTOTAL of Disbursements/Obligations This Page (add lines) _____

TOTAL This Period (add page by the number only) _____
 (copy total from first page to Line 10)

PERMANENT

400 FORM 1 (02) (CLOSE)

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

| | | | | | |
|---|--------------------|---|---|---|--|
| A. Full Name (Last, First, Middle Initial) of Payee KWOK | | | Date of Disbursement or Obligation 09/15/2004 | | |
| Mailing Address of Payee 5744 Southwayx Blvd #200 | | | Amount 1567.10 | | |
| City Toledo | State OH | Zip Code 43624 | Communication Date 09/15/2004 | | |
| Name of Employer N/A | | | Occupation N/A | | |
| Purpose of Disbursement (including date(s) of administration) Radio Advertisements 09/13/04-09/19/04 "Nobody's Fool"; "You've Heard the Ad" | | | | | |
| Name of Federal Candidate George W. Bush | | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | State: OH | Disbursement/Obligation For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| Name of Federal Candidate George W. Bush | | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | State: OH | Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| Name of Federal Candidate George W. Bush | | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | State: OH | 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 KWOK-FX | | | Date of Disbursement or Obligation 09/15/2004 | | |
| Mailing Address of Payee 5802 Southwayx Blvd | | | Amount 1560.00 | | |
| City Toledo | State OH | Zip Code 43624 | Communication Date 09/15/2004 | | |
| Name of Employer N/A | | | Occupation N/A | | |
| Purpose of Disbursement (including date(s) of administration) Radio Advertisements 9/13/04-09/19/04 "Nobody's Fool"; "You've Heard the Ad" | | | | | |
| Name of Federal Candidate George W. Bush | | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | State: OH | Disbursement/Obligation For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| Name of Federal Candidate George W. Bush | | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | State: OH | Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| Name of Federal Candidate George W. Bush | | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | State: OH | Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| SUBTOTAL of Disbursement/Obligations This Page (44458) | | | | | |
| TOTAL This Page (last page this line number only) (carry total from last page to Line 10) | | | | | |

SCHEDULE 3-B

Disbursements Made or Obligation(s)

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

NRZK

Mailing Address of Payee
 2510 St. Clair Ave NE

City: Cleveland State: OH Zip Code: 44116

Name of Employer: N/A Occupation: N/A

Date of Disbursement or Obligation
 09/13/04 - 09/19/04

Amount: 1819.75

Communication Date
 09/13/04 - 09/19/04

Purpose of Disbursement (including name of communication): Radio Advertisements 09/13/04-09/19/04 "Nobody's Fool": "You've Heard the Ads"

Name of Federal Candidate: George W. Bush
 Office Sought: House Senate President
 State: DE 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

NRZK

Mailing Address of Payee
 1041 Huron Rd E

City: Cleveland State: OH Zip Code: 44129

Name of Employer: N/A Occupation: N/A

Date of Disbursement or Obligation
 09/13/04 - 09/19/04

Amount: 2488.00

Communication Date
 09/13/04 - 09/19/04

Purpose of Disbursement (including name of communication): Radio Advertisements 09/13/04-09/19/04 "Nobody's Fool": "You've Heard the Ads"

Name of Federal Candidate: George W. Bush
 Office Sought: House Senate President
 State: DE 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): _____

AGGREGATE of Disbursements/Obligations This Page (continued)

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)

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

WDFJ-FM

Mailing Address of Payee

3230 Franklin Street

City State Zip Code

Detroit MI 48207

Name of Employer Occupation

N/A N/A

Date of Disbursement or Obligation

09 12 2004

Amount

2740.00

Communication Date

09 12 2004

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

Radio Advertisements 09/13/04-09/19/04 "Nobody's Pool": "You've Heard the Ads"

Name of Federal Candidate Office Sought

George W. Bush House State MI

President District

Name of Federal Candidate Office Sought

House State

Name of Federal Candidate Office Sought

House State

Disbursement/Obligation For

Primary General Other (specify)

Disbursement/Obligation For

Primary General Other (specify)

Disbursement/Obligation For

Primary General Other (specify)

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

WUCV-FM

Mailing Address of Payee

31555 W 14 Mile Rd #102

City State Zip Code

Farmington Hills MI 48334

Name of Employer Occupation

N/A N/A

Date of Disbursement or Obligation

09 10 2004

Amount

4760.00

Communication Date

09 23 2004

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

Radio Advertisements 09/13/04-09/19/04 "Nobody's Pool": "You've Heard the Ads"

Name of Federal Candidate Office Sought

George W. Bush House State MI

President District

Name of Federal Candidate Office Sought

House State

Name of Federal Candidate Office Sought

House State

Disbursement/Obligation For

Primary General Other (specify)

Disbursement/Obligation For

Primary General Other (specify)

Disbursement/Obligation For

Primary General Other (specify)

SUBTOTAL of Disbursements/Obligations This Page (optional)

TOTAL This Period (add page to the number only) (carry over from last page to Line 10)

SCHEDULE 9-H

Disbursement(s) Made or Obligation(s)

A. Full Name (Last, First, Middle Initial) of Payer

KRMG

Residing Address of Payer

645 Griswold St. #633

City

Detroit

State

MI

Zip Code

48226

Name of Employer

N/A

Occupation

N/A

Date of Disbursement or Obligation

09/13/04 - 09/19/04

Amount

6179.98

Communication Date

09/13/2004

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

Radio Advertisements 09/13/04-09/19/04 "Nobody's Fool": "You've Heard the Ad"

Name of Federal Candidate

George W. Bush

Office Sought

House

Senate

President

State: MI

District: _____

Disbursement/Obligation For:

Primary General

Other (specify) _____

Name of Federal Candidate

George W. Bush

Office Sought

House

Senate

President

State: _____

District: _____

Disbursement/Obligation For:

Primary General

Other (specify) _____

Name of Federal Candidate

George W. Bush

Office Sought

House

Senate

President

State: _____

District: _____

Disbursement/Obligation For:

Primary General

Other (specify) _____

B. Full Name (Last, First, Middle Initial) of Payer

KJMK-SBT

Residing Address of Payer

6240 Blue Ridge Blvd.

City

Kansas City

State

MO

Zip Code

63141

Name of Employer

N/A

Occupation

N/A

Date of Disbursement or Obligation

09/13/04 - 09/19/04

Amount

1821.50

Communication Date

09/13/2004

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

Radio Advertisements 09/13/04-09/19/04 "Nobody's Fool": "You've Heard the Ad"

Name of Federal Candidate

George W. Bush

Office Sought

House

Senate

President

State: MO

District: _____

Disbursement/Obligation For:

Primary General

Other (specify) _____

Name of Federal Candidate

George W. Bush

Office Sought

House

Senate

President

State: _____

District: _____

Disbursement/Obligation For:

Primary General

Other (specify) _____

Name of Federal Candidate

George W. Bush

Office Sought

House

Senate

President

State: _____

District: _____

Disbursement/Obligation For:

Primary General

Other (specify) _____

SUBTOTAL of Disbursements/Obligations This Page (optional)

TOTAL This Page (last page first line 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
KGM

Mailing Address of Payee
10155 Corporate Square Dr
City: St. Louis State: MO Zip Code: 63132

Name of Employer
N/A Occupation: N/A

Date of Disbursement or Obligation
09 15 2004

Amount
5097.75

Communication Date
09 15 2004

Purpose of Disbursement (including 501(c)3 of corporation(s))
Radio Advertisements 09/13/04-09/19/04 "Nobody's Fool"; "You've Heard the Ad"

Name of Federal Candidate Office Sought: House State: MO Primary General
 Senate District: _____ Other (specify): _____
George W. Bush President

Name of Federal Candidate Office Sought: House State: _____ Primary General
 Senate District: _____ Other (specify): _____
_____ President

Name of Federal Candidate Office Sought: House State: _____ Primary General
 Senate District: _____ Other (specify): _____
_____ President

B. Full Name (Last, First, Middle Initial) of Payee
KATZ

Mailing Address of Payee
St. Louis Center
City: St. Louis State: MO Zip Code: 63101

Name of Employer
N/A Occupation: N/A

Date of Disbursement or Obligation
09 10 2004

Amount
2933.50

Communication Date
09 12 2004

Purpose of Disbursement (including 501(c)3 of corporation(s))
Radio Advertisements 09/13/04-09/19/04 "Nobody's Fool"; "You've Heard the Ad"

Name of Federal Candidate Office Sought: House State: MO Primary General
 Senate District: _____ Other (specify): _____
George W. Bush President

Name of Federal Candidate Office Sought: House State: _____ Primary General
 Senate District: _____ Other (specify): _____
_____ President

Name of Federal Candidate Office Sought: House State: _____ Primary General
 Senate District: _____ Other (specify): _____
_____ President

AGGREGATE of Disbursements/Obligations This Page (optional) _____ ▶

TOTAL This Person (entire page this line number only) _____ ▶
(carry total from last page to Line 59)

AGGREGATE of Disbursements/Obligations This Page (optional) _____ ▶

TOTAL This Person (entire page this line number only) _____ ▶
(carry total from last page to Line 59)

SCHEDULE 9-B

Disbursement(s) Made or Obligation(s)

A. Full Name (Last, First, Middle Initial) of Payor
 NAME-AM

Mailing Address of Payor
 960 Penn Ave #200

City Pittsburgh **State** PA **Zip Code** 15222

Name of Employer N/A **Occupation** N/A

Date of Disbursement or Obligation
 09/13/04

Amount
 250.00

Communication Date
 09/13/2004

Purpose of Disbursement (including title) of communication(s):
 Radio Advertisements 09/13/04-09/19/04 "Nobody's Fool": "You've Heard the Ad"

| | | | | |
|--|-----------------------------------|---|--------------------|--|
| Name of Federal Candidate George W. Bush | Office Sought President | House <input checked="" type="checkbox"/> | State PA | Disbursement/Obligation For <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General |
| Name of Federal Candidate | Office Sought | House | State | Disbursement/Obligation For |
| Name of Federal Candidate | Office Sought | House | State | Disbursement/Obligation For |

B. Full Name (Last, First, Middle Initial) of Payor
 NAME-FW

Mailing Address of Payor
 900 E Carson St

City Pittsburgh **State** PA **Zip Code** 15203

Name of Employer N/A **Occupation** N/A

Date of Disbursement or Obligation
 09/30/2004

Amount
 2380.00

Communication Date
 09/13/2004

Purpose of Disbursement (including title) of communication(s):
 Radio Advertisements 09/13/04-09/19/04 "Nobody's Fool": "You've Heard the Ad"

| | | | | |
|--|-----------------------------------|--|--------------------|--|
| Name of Federal Candidate George W. Bush | Office Sought President | House <input type="checkbox"/> | State PA | Disbursement/Obligation For <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General |
| Name of Federal Candidate | Office Sought | House | State | Disbursement/Obligation For |
| Name of Federal Candidate | Office Sought | House | State | Disbursement/Obligation For |

ADDITIONAL of Disbursement/Obligations This Page (optional) _____

TOTAL This Period (add page this line number only) _____
 (carry total from first page to line 10)

SCHEDULE 9-B

Disbursement(s) Made or Obligation(s)

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

NDA5

Mailing Address of Payee

28 West City Ave

City

Bala Cynwyd

Name of Employer

N/A

State Zip Code

PA 19004

Occupation

N/A

Date of Disbursement or Obligation

09 10 2004

Amount

8722.50

Communication Date

09 10 2004

Purpose of Disbursement (including title(s) of contribution(s))

Radio Advertisements 09/13/04-09/15/04 "Nobody's Fool"; "You've Heard the Ad"

Name of Federal Candidate

Office Sought

George W. Bush

House State PA

Senate District

President District

Disbursement/Obligation For

Primary General

Other (specify)

Name of Federal Candidate

Office Sought

Name of Federal Candidate

Office Sought

House State

Senate District

President District

House State

Senate District

President District

Disbursement/Obligation For

Primary General

Other (specify)

Disbursement/Obligation For

Primary General

Other (specify)

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

WOSJ

Mailing Address of Payee

440 Downing Ln

City

Philadelphia

Name of Employer

N/A

State Zip Code

PA 19124

Occupation

N/A

Date of Disbursement or Obligation

09 10 2004

Amount

7745.00

Communication Date

09 12 2004

Purpose of Disbursement (including title(s) of contribution(s))

Radio Advertisements 09/13/04-09/15/04 "Nobody's Fool"; "You've Heard the Ad"

Name of Federal Candidate

Office Sought

George W. Bush

House State PA

Senate District

President District

Disbursement/Obligation For

Primary General

Other (specify)

Name of Federal Candidate

Office Sought

House State

Senate District

President District

Disbursement/Obligation For

Primary General

Other (specify)

Name of Federal Candidate

Office Sought

House State

Senate District

President District

Disbursement/Obligation For

Primary General

Other (specify)

SUBTOTAL of Disbursements/Obligations This Page (optional)

TOTAL This Period (don't back this line number over)

(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 WJXR | | | | Date of Disbursement or Obligation 09/13/04 13 2004 | |
| Mailing Address of Payee 12100 W. Howard Ave | | | | Amount 2416.00 | |
| City Milwaukee | State WI | Zip Code 53228 | | Communication Date 09/13/2004 | |
| Name of Employer N/A | | | | Occupation N/A | |
| Purpose of Disbursement (including date) of communication: Radio Advertisements 09/13/04-09/19/04 "Nobody's Fool": "You've Heard the Ad!" | | | | | |
| Name of Federal Candidate George W. Bush | Office Sought | <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President | State WI | Disbursement/Obligation For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____ | |
| Name of Federal Candidate | Office Sought | <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | State | Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____ | |
| Name of Federal Candidate | Office Sought | <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | 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 WJXR | | | | Date of Disbursement or Obligation 09/10/04 10 2004 | |
| Mailing Address of Payee 5407 W. McKinlay Ave | | | | Amount 1147.50 | |
| City Milwaukee | State WI | Zip Code 53206 | | Communication Date 09/13/2004 | |
| Name of Employer N/A | | | | Occupation N/A | |
| Purpose of Disbursement (including date) of communication: Radio Advertisements 09/13/04-09/19/04 "Nobody's Fool": "You've Heard the Ad!" | | | | | |
| Name of Federal Candidate George W. Bush | Office Sought | <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President | State WI | Disbursement/Obligation For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____ | |
| Name of Federal Candidate | Office Sought | <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | State | Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____ | |
| Name of Federal Candidate | Office Sought | <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | State | Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____ | |
| SUBTOTAL of Disbursements/Obligations This Page (09/13/04) | | | | | |
| TOTAL This Form (last page this line number only) (carry text from last page to Line 10) | | | | | |

SCHEDULE B-B

Disbursement(s) Made or Obligation(s)

| | | |
|---|--|---|
| A. Full Name (Last, First, Middle Initial) of Payee XPRB-TH Mailing Address of Payee 11310 Colorado Ave City: Kansas City State: MO Zip Code: 64137 Name of Employer: N/A Occupation: N/A | | Date of Disbursement or Obligation 09 13 2004 Amount 2595.20 Contribution Date 09 13 2004 |
| Purpose of Disbursement (including type of communication(s)) Radio Advertisements 09/13/04-09/19/04 "Nobody's Fool"; "You've Heard the Ad" | | |
| Name of Federal Candidate George W. Bush | Office Sought <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President | Disbursement/Obligation For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) > |
| Name of Federal Candidate George W. Bush | Office Sought <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) > |
| Name of Federal Candidate George W. Bush | Office Sought <input type="checkbox"/> House <input type="checkbox"/> Senate <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 AEP Message & Media Mailing Address of Payee 730 W Franklin Street #404 City: Chicago State: IL Zip Code: 60610 Name of Employer: N/A Occupation: N/A | | Date of Disbursement or Obligation 09 23 2004 Amount 3473.96 Contribution Date 09 23 2004 |
| Purpose of Disbursement (including type of communication(s)) Production Costs for TV Ad "Benny"; "Pills" | | |
| Name of Federal Candidate George W. Bush | Office Sought <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President | Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) > convention |
| Name of Federal Candidate George W. Bush | Office Sought <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) > |
| Name of Federal Candidate George W. Bush | Office Sought <input type="checkbox"/> House <input type="checkbox"/> Senate <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 (colored) > | | 76660.26 |
| TOTAL This Period (just page info line number only) > (copy total from last page to line 10) | | |

Federal Election Commission
**ENVELOPE REPLACEMENT PAGE
 FOR INCOMING DOCUMENTS**

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| | |
|--|---|
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| <input type="checkbox"/> USPS Priority Mail | Postmarked Delivery Confirmation™ Label <input type="checkbox"/> |
| <input type="checkbox"/> USPS Express Mail | Postmarked |
| <input type="checkbox"/> Postmark illegible | |
| <input type="checkbox"/> No Postmark | |
| <input type="checkbox"/> Overnight Delivery Service (Specify): | Shipping Date |
| <input type="checkbox"/> Received from House Records & Registration Office | Date of Receipt |
| <input type="checkbox"/> Received from Senate Public Records Office | Date of Receipt |
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| N/A PREPARER | N/A DATE PREPARED |