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
Moveon.org Voter Fund

(b) Address (number and street) ☐ check if different than previously reported
335 Bon Air Center Box 351

(c) City, State and ZIP Code
Greenbrae CA 94904

(d) Name of Employer or Principal Place of Business

(e) Occupation

2. FEC Identification Number
C 030000012

3. Is This Statement ☒ New or ☐ Amended

4. Covering Period 08 / 17 / 2004 through 08 / 23 / 2004

5. (a) Date of Public Distribution(s) 08 / 24 / 2004 **(b) Communication Title** Scary

6. Is the Filer a Qualified Nonprofit Corporation under 11 CFR 114.10(c)? 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
Neil Reiff

(b) Address (number and street)
50 E Street, SE Suite 300

(c) City, State and ZIP Code
Washington DC 20003

(d) Name of Employer or Principal Place of Business
Bandler, Reiff & Young, PC

(e) Occupation
Attorney

9. Total Donations This Statement 28000.00

10. Total Disbursements/Obligations This Statement 168417.32

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 Neil Reiff

SIGNATURE [signature] DATE 08/25/2004

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. 01/00)

FES/NN035

List of Person(s) Sharing/Exercising Control

(use additional pages as necessary)

11. Person(s) Sharing/Exercising Control

A. (a) Name — Transaction ID :
Wes Boyd

(b) Address (number and street)
336 Bon Air Center Box 381

(c) City, State and Zip Code
Greenbrae CA 94904

(d) Name of Employer or Principal Place of Business
Self

(e) Occupation
Software Developer

B. (a) Name — Transaction ID :
Joan Blades

(b) Address (number and street)
336 Bon Air Center Box 381

(c) City, State and Zip Code
Greenbrae CA 94904

(d) Name of Employer or Principal Place of Business
Self

(e) Occupation
Software Developer

C. (a) Name — Transaction ID :
Peter Schurman

(b) Address (number and street)
336 Bon Air Center Box 381

(c) City, State and Zip Code
Greenbrae CA 94904

(d) Name of Employer or Principal Place of Business
Moveon.org Voter Fund

(e) Occupation
Executive Director

SCHEDULE 9-A
Donation(s) Received

PAGE 3/4

A. Full Name of Donor: John Piper

Mailing Address of Donor: 30 Boulder Lookout Drive

City	State	Zip
Landrum	SC	29356

Date of Receipt: 08 / 02 / 2004

Amount: 1000.00

Transaction ID:

B. Full Name of Donor: Thomas McQuade

Mailing Address of Donor: 2495 Lancashire Dr. Apt TB

City	State	Zip
Ann Arbor	MI	48105

Date of Receipt: 08 / 19 / 2004

Amount: 1000.00

Transaction ID:

C. Full Name of Donor: Joyce Bessen

Mailing Address of Donor: 202 High Head Rd

City	State	Zip
Harpswell	ME	04079

Date of Receipt: 08 / 18 / 2004

Amount: 1000.00

Transaction ID:

D. Full Name of Donor: Lawrence Shainberg

Mailing Address of Donor: 1 5th Ave.

City	State	Zip
New York	NY	10003

Date of Receipt: 08 / 20 / 2004

Amount: 25000.00

Transaction ID:

SUBTOTAL of Donations This Page (optional) 28000.00

TOTAL This Period (last page this line number only) 28000.00
(carry total from last page to Line 9)

SCHEDULE 9-B
Disbursement(s) Made or Obligations

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

Mailing Address of Payee
1580 Lincoln Street Suite 510

City	State	Zip Code
Denver	CO	80203

Name of Employer | Occupation

Date of Disbursement or Obligation: 08 / 24 / 2004

Amount: 163417.32

Communication Date: 08 / 24 / 2004

Transaction ID: 881

Purpose of Disbursement (including title(s) of communication(s))
Advertising Purchase/Scary

Name of Federal Candidate: George W. Bush
Office Sought: [ ] House [ ] Senate [x] President
State: DC
District:
Disbursement/Obligation For: 2004 [ ] Primary [x] General [ ] Other (specify)

BB1A
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 Disbursement/Obligation This Page (optional) 163417.32

TOTAL This Period (last page this line number only) 163417.32
(carry total from last page to line 10)

FEC FORM 8 (REV. 02/2002)

FE3AN030

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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N/A PREPARER	N/A DATE PREPARED

(5/2004)