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: Oliver Parker

(b) Address (number and street) ☐ check if different than previously reported: 283 Codrington Drive

(c) City, State and ZIP Code: Lauderdale-By-The-Sea FL 33308

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

(e) Occupation: Attorney

2. FEC Identification Number: C

3. Is This Statement X New or Amended

4. Covering Period: 08 06 2004 through 08 12 2004

5. (a) Date of Public Distribution(s): 08 12 2004 (b) Communication Title: Oliver Park Supports Pres. Bush

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

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

8. Custodian of Records

(a) Name: Oliver Parker

(b) Address (number and street): 283 Codrington Drive

(c) City, State and ZIP Code: Lauderdale-By-The-Sea, Florida 33308

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

(e) Occupation: Attorney

9. Total Donations This Statement: 19,188.48

10. Total Disbursements/Obligations This Statement: 19,188.48

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: Oliver Parker

SIGNATURE: [signature] DATE: 8-12-04

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. 10/2002)

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

PAGE OF

11. Person(s) Sharing/Exercising Control

A. (a) Name
Oliver Parker
(b) Address (number and street)
283 Codrington Drive
(c) City, State and ZIP Code
Lauderdale-By-The-Sea Florida 33308
(d) Name of Employer or Principal Place of Business
(e) Occupation
Attorney

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

FEC FORM 9 (REV. 03/2003)

CLEARFORM PDF

SCHEDULE 9-A

Donation(s) Received

PAGE OF

A. Full Name of Donor: Oliver Parker Mailing Address of Donor: 283 Codrington Drive City: Lauderdale-By-The-Sea State: Fl Zip: 33308	Date of Receipt: 08 06 2004 Amount: 19,188.48
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) ..... ▶ 19,188.48
(carry total from last page to Line 6)

FEC FORM 9 (REV. 08/2003)

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SCHEDULE 9-B

Disbursement(s) Made or Obligation(s)

PAGE OF

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

Mailing Address of Payee: 1800 NW 49th Street ~~Ft Lauderdale~~ FL

City: Ft Lauderdale State: FL Zip Code: 33309

Name of Employer: Occupation:

Date of Disbursement or Obligation: 08 06 2004

Amount: 19,188.48

Communication Date: 08 12 2004

Purpose of Disbursement (including title(s) of communication(s)): Television ad - Oliver Parker Supports Pres. Buss

Name of Federal Candidate: George Bush Pres

Office Sought: [ ] House [ ] Senate [X] 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:

Amount:

Communication Date:

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

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

Disbursement/Obligation For: [ ] Primary [ ] General [ ] Other (specify)

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

Disbursement/Obligation For: [ ] Primary [ ] General [ ] Other (specify)

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

Disbursement/Obligation For: [ ] Primary [ ] General [ ] Other (specify)

SUBTOTAL of Disbursements/Obligations This Page (optional) 19,188.48

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

FEC FORM 9 (REV. 03/2003)

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Federal Election Commission

ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS

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

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

(5/2004)