

FEC FORM 9**24 HOUR NOTICE OF DISBURSEMENTS/OBLIGATIONS FOR
ELECTIONEERING COMMUNICATIONS****1. Individual, Organization or Qualified Nonprofit Corporation Making the Disbursements/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

C N/A

3. Is This Statement New

or

 Amended**4. Covering Period**

09	23	2004
through		
09	28	2004

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

09 26 2004

(b) Communication Title

Ohio Worker

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

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

President

9. Total Donations This Statement

0.00

10. Total Disbursements/Obligations This Statement

459225.55

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



DATE

9-29-04

NOTE: Submission of false, inaccurate or incomplete information may subject the person signing the statement to the penalties of 18 U.S.C. 9457b.

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

PAGE 1 OF 1

11. Person(s) Sharing/Exercising Control

A. (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	(e) Occupation
The Media Fund	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 9-A
Donation(s) Received

<p>A. Full Name of Donor No contributions this period</p> <p>Mailing Address of Donor</p> <p>City State Zip</p>	<p>Date of Receipt</p> <p>Amount</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>Amount</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>Amount</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>Amount</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>Amount</p>

<p>SUBTOTAL of Donations This Page (optional) ▶</p>	<p>Amount</p>
<p>TOTAL This Period (last page this line number only) ▶ (carry total from last page to Line 9)</p>	<p>Amount 0 00</p>

SCHEDULE 9-B

Disbursement(s) Made or Obligation(s)

A. Full Name (Last, First, Middle Initial) of Payee MJN-TV				Date of Disbursement or Obligation 09 23 2004	
Mailing Address of Payee 5800 E Marginal Rd				Amount 15512.50	
City Cleveland	State OH	Zip Code 44103		Communication Date 09 23 2004	
Name of Employer N/A				Occupation N/A	
Purpose of Disbursement (including title) or communication(s) Television Advertisement "Ohio Worker" 9/28/2004-10/3/2004					
Name of Federal Candidate George W. Bush	Office Sought <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State OH	District _____	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 _____	District _____	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 _____	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 Media Connect-Cleveland				Date of Disbursement or Obligation 09 23 2004	
Mailing Address of Payee 580 N Fourth Street #350				Amount 9987.50	
City Columbus	State OH	Zip Code 43215		Communication Date 09 23 2004	
Name of Employer N/A				Occupation N/A	
Purpose of Disbursement (including title) or communication(s) Television Advertisement "Ohio Worker" 9/28/2004-10/3/2004					
Name of Federal Candidate George W. Bush	Office Sought <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State OH	District _____	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 _____	District _____	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 _____	District _____	Disbursement/Obligation For <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> 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 16)					

SCHEDULE 9-B

Disbursement(s) Made or Obligation(s)

A. Full Name (Last, First, Middle Initial) of Payee WOIO-TV				Date of Disbursement or Obligation 09 23 2004	
Mailing Address of Payee 1717 E 12th Street				Amount 24505.00	
City Cleveland	State OH	Zip Code 44114		Communication Date 09 20 2004	
Name of Employer N/A		Occupation N/A			
Purpose of Disbursement (including title(s) of communication(s)) Television Advertisement "Ohio Worker" 9/28/2004-10/3/2004					
Name of Federal Candidate George W. Bush	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: OH District:	Disbursement/Obligation For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
Name of Federal Candidate	Office Sought:	State:	Disbursement/Obligation For:		
Name of Federal Candidate	Office Sought:	State:	Disbursement/Obligation For:		
B. Full Name (Last, First, Middle Initial) of Payee WKYC-TV				Date of Disbursement or Obligation 09 23 2004	
Mailing Address of Payee 1933 Lakeside Ave E				Amount 55165.00	
City Cleveland	State OH	Zip Code 44114		Communication Date 09 28 2004	
Name of Employer N/A		Occupation N/A			
Purpose of Disbursement (including title(s) of communication(s)) Television Advertisement "Ohio Worker" 9/28/2004-10/3/2004					
Name of Federal Candidate George W. Bush	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: OH District:	Disbursement/Obligation For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
Name of Federal Candidate	Office Sought:	State:	Disbursement/Obligation For:		
Name of Federal Candidate	Office Sought:	State:	Disbursement/Obligation For:		
SUBTOTAL of Disbursements/Obligations This Page (optional)					
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 WEHS-TV				Date of Disbursement or Obligation 09 23 2004	
Mailing Address of Payee 3001 Euclid Ave				Amount 16093.25	
City Cleveland	State OH	Zip Code 44115	Communication Date 09 20 2004		
Name of Employer N/A				Occupation N/A	
Purpose of Disbursement (including title(s) of communication(s)) Television Advertisement "Ohio Worker" 9/28/2004-10/3/2004					
Name of Federal Candidate George W. Bush	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: OH District: -----	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: ----- District: -----	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: ----- 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 WTTV-TV				Date of Disbursement or Obligation 09 23 2004	
Mailing Address of Payee 1251 Dublin Rd				Amount 1150.00	
City Columbus	State OH	Zip Code 43215	Communication Date 09 28 2004		
Name of Employer N/A				Occupation N/A	
Purpose of Disbursement (including title(s) of communication(s)) Television Advertisement "Ohio Worker" 9/26/2004-10/3/2004					
Name of Federal Candidate George W. Bush	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: OH District: -----	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: ----- District: -----	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: ----- District: -----	Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____		
SUBTOTAL of Disbursements/Obligations This Page (use line 8)					
TOTAL This Period (total 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 Payer Time Warner-Columbus				Date of Disbursement or Obligation 09 23 2004	
Mailing Address of Payer 580 N Fourth St				Amount 6528.00	
City Columbus	State OH	Zip Code 43215	Communication Date 09 28 2004		
Name of Employer N/A				Occupation N/A	
Purpose of Disbursement (Including date(s) of communication(s)) Television Advertisement "Ohio Worker" 9/28/2004-10/3/2004					
Name of Federal Candidate George W. Bush	Office Sought <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State OH	District _____	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 _____	District _____	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 _____	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 Payer WSYX-TV				Date of Disbursement or Obligation 09 23 2004	
Mailing Address of Payer 1261 Dublin Rd				Amount 5185.00	
City Columbus	State OH	Zip Code 43215	Communication Date 09 28 2004		
Name of Employer N/A				Occupation N/A	
Purpose of Disbursement (Including date(s) of communication(s)) Television Advertisement "Ohio Worker" 9/28/2004-10/3/2004					
Name of Federal Candidate George W. Bush	Office Sought <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State OH	District _____	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 _____	District _____	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 _____	District _____	Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> 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)					

SCHEDULE 9-B

Disbursement(s) Made or Obligation(s)

A. Full Name (Last, First, Middle Initial) of Payee NEWS-TV				Date of Disbursement or Obligation 09 23 2004	
Mailing Address of Payee 770 Twin Rivers Dr				Amount 41990.00	
City Columbus	State OH	Zip Code 43215	Communication Date 09 28 2004		
Name of Employer N/A				Occupation N/A	
Purpose of Disbursement (including date(s) of communication(s)) Television Advertisement "Ohio Worker" 9/28/2004-10/3/2004					
Name of Federal Candidate George W. Bush	Office Sought <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State OH	District _____	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 _____	District _____	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 _____	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 WCMH-TV				Date of Disbursement or Obligation 09 23 2004	
Mailing Address of Payee 3165 Olentangy River Rd				Amount 29006.25	
City Columbus	State OH	Zip Code 43202	Communication Date 09 28 2004		
Name of Employer N/A				Occupation N/A	
Purpose of Disbursement (including date(s) of communication(s)) Television Advertisement "Ohio Worker" 9/28/2004-10/3/2004					
Name of Federal Candidate George W. Bush	Office Sought <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State OH	District _____	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 _____	District _____	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 _____	District _____	Disbursement/Obligation For <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
SUBTOTAL of Disbursements/Obligations This Page (optional)				_____	
TOTAL This Period (last page (14) the 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 Time Warner-Dayton			Date of Disbursement or Obligation 09 23 2004		
Mailing Address of Payee One Herald Square			Amount 3324.50		
City Fairborn	State OH	Zip Code 45324	Communication Date 09 28 2004		
Name of Employer N/A			Occupation N/A		
Purpose of Disbursement (including title(s) of communication(s)) Television Advertisement "Ohio Worker" 9/28/2004-10/3/2004					
Name of Federal Candidate George W. Bush	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: OH District:	Disbursement/Obligation For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
Name of Federal Candidate	Office Sought:	State: District:	Disbursement/Obligation For:		
Name of Federal Candidate	Office Sought:	State: District:	Disbursement/Obligation For:		
B. Full Name (Last, First, Middle Initial) of Payee KDTN-TV			Date of Disbursement or Obligation 09 23 2004		
Mailing Address of Payee 6595 S Dixie Ave			Amount 10072.50		
City Dayton	State OH	Zip Code 45435	Communication Date 09 28 2004		
Name of Employer N/A			Occupation N/A		
Purpose of Disbursement (including title(s) of communication(s)) Television Advertisement "Ohio Worker" 9/28/2004-10/3/2004					
Name of Federal Candidate George W. Bush	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: OH District:	Disbursement/Obligation For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
Name of Federal Candidate	Office Sought:	State: District:	Disbursement/Obligation For:		
Name of Federal Candidate	Office Sought:	State: District:	Disbursement/Obligation For:		
SUBTOTAL of Disbursements/Obligations This Page (optional)					
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)

A. Full Name (Last, First, Middle Initial) of Payee WKSP-TV				Date of Disbursement or Obligation 09 23 2004	
Mailing Address of Payee 1731 Soldiers Home West Cox Rd				Amount 3769.75	
City Dayton	State OH	Zip Code 45418			
Name of Employer N/A		Occupation N/A		Communication Date 09 28 2004	
Purpose of Disbursement (including title(s) of communication(s)) Television Advertisement "Ohio Worker" 9/28/2004-10/3/2004					
Name of Federal Candidate George W. Bush	Office Sought <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State OH	District _____	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 _____	District _____	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 _____	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 WKSP-TV				Date of Disbursement or Obligation 09 1 22 2004	
Mailing Address of Payee 45 Broadcast Plc				Amount 2626.50	
City Dayton	State OH	Zip Code 45408			
Name of Employer N/A		Occupation N/A		Communication Date 09 28 2004	
Purpose of Disbursement (including title(s) of communication(s)) Television Advertisement "Ohio Worker" 9/28/2004-10/3/2004					
Name of Federal Candidate GEORGE W. BUSH	Office Sought <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State OH	District _____	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 _____	District _____	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 _____	District _____	Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> 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)					

SCHEDULE 9-B

Disbursement(s) Made or Obligation(s)

A. Full Name (Last, First, Middle Initial) of Payee W210-TV				Date of Disbursement or Obligation 09 23 2004	
Mailing Address of Payee 1414 Wilmington Ave				Amount 26913.75	
City Dayton	State OH	Zip Code 45420			
Name of Employer N/A		Occupation N/A		Continuation Date 09 29 2004	
Purpose of Disbursement (including title) of communication(s) Television Advertisement "Ohio Worker" 9/24/2004-10/3/2004					
Name of Federal Candidate George W. Bush	Office Sought <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State OH	District _____	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 _____	District _____	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 _____	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 Buckeye Cable-Toledo				Date of Disbursement or Obligation 09 23 2004	
Mailing Address of Payee 5552 Southwyck Blvd				Amount 2956.30	
City Toledo	State OH	Zip Code 43614			
Name of Employer N/A		Occupation N/A		Continuation Date 09 29 2004	
Purpose of Disbursement (including title) of communication(s) Television Advertisement "Ohio Worker" 9/29/2004-10/3/2004					
Name of Federal Candidate George W. Bush	Office Sought <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State OH	District _____	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 _____	District _____	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 _____	District _____	Disbursement/Obligation For <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) >	
SUBTOTAL of Disbursements/Obligations This Page (optional)					
TOTAL This Period (last page skip 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 Payer WJ2W-TV				Date of Disbursement or Obligation 09 23 2004	
Mailing Address of Payer 4 Seagars				Amount 2805.00	
City Toledo	State OH	Zip Code 43604	Communication Date 09 28 2004		
Name of Employer N/A	Occupation N/A				
Purpose of Disbursement (including title) of communication(s) Television Advertisement "Ohio Worker" 9/28/2004-10/3/2004					
Name of Federal Candidate George W. Bush	Office Sought <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State OH District _____	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 _____ District _____	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 _____ 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 Payer WJ2W-TV				Date of Disbursement or Obligation 09 23 2004	
Mailing Address of Payer 300 S Byron Rd				Amount 10229.75	
City Toledo	State OH	Zip Code 43615	Communication Date 09 28 2004		
Name of Employer N/A	Occupation N/A				
Purpose of Disbursement (including title) of communication(s) Television Advertisement "Ohio Worker" 9/28/2004-10/3/2004					
Name of Federal Candidate George W. Bush	Office Sought <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State OH District _____	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 _____ District _____	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 _____ District _____	Disbursement/Obligation For <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> 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 9C)					

SCHEDULE 9-B

Disbursement(s) Made or Obligation(s)

A. Full Name (Last, First, Middle Initial) of Payee Time Warner-Teleco				Date of Disbursement or Obligation 09 23 2004	
Mailing Address of Payee 580 N Fourth Street #350				Amount 4080.00	
City	State	Zip Code	Communication Date		
COLUMBUS	OH	4315	09	28	2004
Name of Employer N/A				Occupation N/A	
Purpose of Disbursement (including title) or communication(s) Television Advertisement "Ohio Worker" 9/28/2004-10/3/2004					
Name of Federal Candidate	Office Sought	<input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State	Disbursement/Obligation For:	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
George W. Bush			OH		
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 WTOL-TV				Date of Disbursement or Obligation 09 23 2004	
Mailing Address of Payee 730 N Summit St				Amount 24174.00	
City	State	Zip Code	Communication Date		
Toledo	OH	43604	09	28	2004
Name of Employer N/A				Occupation N/A	
Purpose of Disbursement (including title) or communication(s) Television Advertisement "Ohio Worker" 9/28/2004-10/3/2004					
Name of Federal Candidate	Office Sought	<input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State	Disbursement/Obligation For:	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
George W. Bush			OH		
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 (optional) _____					
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 Payor WTWS-TV			Date of Disbursement or Obligation 09 28 2004		
Mailing Address of Payor 4247 Doan St			Amount 21071.50		
City	State	Zip Code	Communication Date 09 28 2004		
Toledo	OH	43607			
Name of Employer	Occupation				
N/A	N/A				
Purpose of Disbursement (including title(s) of communication(s)) Television Advertisement "Ohio Worker" 9/28/2004-10/3/2004					
Name of Federal Candidate	Office Sought	House	State	Disbursement/Obligation For:	
George W. Bush	<input checked="" type="checkbox"/>	Senate	District	<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
		President		<input type="checkbox"/> Other (specify) _____	
Name of Federal Candidate	Office Sought	House	State	Disbursement/Obligation For:	
	<input type="checkbox"/>	Senate	District	<input type="checkbox"/> Primary	<input type="checkbox"/> General
		President		<input type="checkbox"/> Other (specify) _____	
Name of Federal Candidate	Office Sought	House	State	Disbursement/Obligation For:	
	<input type="checkbox"/>	Senate	District	<input type="checkbox"/> Primary	<input type="checkbox"/> General
		President		<input type="checkbox"/> Other (specify) _____	
B. Full Name (Last, First, Middle Initial) of Payor Media Strategies & Research			Date of Disbursement or Obligation 09 28 2004		
Mailing Address of Payor 1580 Lincoln Street #510			Amount 7639.92		
City	State	Zip Code	Communication Date 09 28 2004		
Denver	CO	80203			
Name of Employer	Occupation				
N/A	N/A				
Purpose of Disbursement (including title(s) of communication(s)) Commission on Television Advertisement "Ohio Worker" 9/28/2004-10/3/2004					
Name of Federal Candidate	Office Sought	House	State	Disbursement/Obligation For:	
George W. Bush	<input checked="" type="checkbox"/>	Senate	District	<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
		President		<input type="checkbox"/> Other (specify) _____	
Name of Federal Candidate	Office Sought	House	State	Disbursement/Obligation For:	
	<input type="checkbox"/>	Senate	District	<input type="checkbox"/> Primary	<input type="checkbox"/> General
		President		<input type="checkbox"/> Other (specify) _____	
Name of Federal Candidate	Office Sought	House	State	Disbursement/Obligation For:	
	<input type="checkbox"/>	Senate	District	<input type="checkbox"/> Primary	<input type="checkbox"/> General
		President		<input type="checkbox"/> Other (specify) _____	
SUBTOTAL of Disbursements/Obligations This Page (optional): _____					
TOTAL This Period (this 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 Walker Merchant				Date of Disbursement or Obligation 09 23 2004	
Mailing Address of Payee 2050 17th Street NW #1200				Amount 35340.91	
City	State	Zip Code		Communication Date	
Washington	DC	20016			
Name of Employer N/A				Occupation N/A	
Purpose of Disbursement (including title(s) of communication(s)) Commission on radio advertisements					
Name of Federal Candidate	Office Sought	House	State	Disbursement/Obligation For:	
George W. Bush		<input checked="" type="checkbox"/> Senate	District	<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
		<input type="checkbox"/> President		<input type="checkbox"/> Other (specify) _____	
Name of Federal Candidate	Office Sought	House	State	Disbursement/Obligation For:	
		<input type="checkbox"/> Senate	District	<input type="checkbox"/> Primary	<input type="checkbox"/> General
		<input type="checkbox"/> President		<input type="checkbox"/> Other (specify) _____	
Name of Federal Candidate	Office Sought	House	State	Disbursement/Obligation For:	
		<input type="checkbox"/> Senate	District	<input type="checkbox"/> Primary	<input type="checkbox"/> General
		<input type="checkbox"/> President		<input type="checkbox"/> Other (specify) _____	
B. Full Name (Last, First, Middle Initial) of Payee F092				Date of Disbursement or Obligation 09 23 2004	
Mailing Address of Payee 1408 Washington Ave, 3rd Floor				Amount 14553.79	
City	State	Zip Code		Communication Date	
St. Louis	MO	63103			
Name of Employer N/A				Occupation N/A	
Purpose of Disbursement (including title(s) of communication(s)) Commission on advertisements					
Name of Federal Candidate	Office Sought	House	State	Disbursement/Obligation For:	
George W. Bush		<input checked="" type="checkbox"/> Senate	District	<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
		<input type="checkbox"/> President		<input type="checkbox"/> Other (specify) _____	
Name of Federal Candidate	Office Sought	House	State	Disbursement/Obligation For:	
		<input type="checkbox"/> Senate	District	<input type="checkbox"/> Primary	<input type="checkbox"/> General
		<input type="checkbox"/> President		<input type="checkbox"/> Other (specify) _____	
Name of Federal Candidate	Office Sought	House	State	Disbursement/Obligation For:	
		<input type="checkbox"/> Senate	District	<input type="checkbox"/> Primary	<input type="checkbox"/> General
		<input type="checkbox"/> President		<input type="checkbox"/> Other (specify) _____	
SUBTOTAL of Disbursements/Obligations This Page (optional) _____					
TOTAL This Period (last page 11's 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 Media Strategies & Research				Date of Disbursement or Obligation 09 24 2004	
Mailing Address of Payee 1500 Lincoln Street #510				Amount 60000.00	
City Denver	State CO	Zip Code 80203	Communication Date 09/24/2004		
Name of Employer N/A		Occupation N/A			
Purpose of Disbursement (including title(s) of communication(s)) Production of television advertisements					
Name of Federal Candidate George W. Bush	Office Sought <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State District	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 District	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 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 Zimmerman & Associates				Date of Disbursement or Obligation 09 24 2004	
Mailing Address of Payee 1250 Sixth Street #202				Amount 2134.86	
City Santa Monica	State CA	Zip Code 90401	Communication Date		
Name of Employer N/A		Occupation N/A			
Purpose of Disbursement (including title(s) of communication(s)) Commission on television advertisements					
Name of Federal Candidate George W. Bush	Office Sought <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State District	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 District	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 District	Disbursement/Obligation For <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
SUBTOTAL of Disbursements/Obligations This Page (optional)				453225.55	
TOTAL This Period (last page and line number only) (carry total from last page to line 10)					

Federal Election Commission
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