

Fax Cover Sheet

FROM: Progress for America Voter Fund
Ralph R. Brown, Secretary

TO: Federal Election Commission
Fax: (202) 219-0174

DATE: October 28, 2004

PAGES: 10 (including fax cover sheet)

The following is being transmitted by facsimile by the required due date:

Progress for America Voter Fund FEC Form 9

For the period from October 27, 2004, through October 27, 2004.

FEC FORM 9

24 HOUR NOTICE OF DISBURSEMENTS/OBLIGATIONS FOR ELECTIONEERING COMMUNICATIONS

today's
10-28

1. Individual, Organization or Qualified Nonprofit Corporation Making the Disbursement

(a) Name

Progress for America Voter Fund

(b) Address (number and street) check if different than previously reported

P.O. Box 57167

(c) City, State and ZIP Code

Washington, DC 20037

(d) Name of Employer or Principal Place of Business

N/A

(e) Occupation

3. Is this Statement New or Amended

4. Covering Period

10 27 2004

10 27 2004

5. (a) Date of Public Distribution(s) 10 27 2004

(b) Communication Title "Ashley's Story"

6. Is the Filer a Qualified Nonprofit Corporation under 15 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

Mary Anne Carter

(b) Address (number and street)

P.O. Box 57167

(c) City, State and ZIP Code

Washington, DC 20037

(d) Name of Employer or Principal Place of Business

MAC Research

(e) Occupation

Consultant

9. Total Donations This Statement

9,460,000.00

10. Total Disbursements/Obligations This Statement

1,955,316.00

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

Ralph E. Brown, Secretary

SIGNATURE

Ralph E. Brown

DATE October 28, 2004

NOTE: Submitter of false, amended or incomplete information may subject the person signing this statement to the penalties of 18 U.S.C. 843g

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

PAGE 2 OF 6

11. Person(s) Sharing/Exercising Control

A. (a) Name Brian McCabe	
(b) Address (number and street) P.O. Box 57167	
(c) City, State and ZIP Code Washington, DC 20037	
(d) Name of Employer or Principal Place of Business DCI Group, L.L.C.	(e) Occupation Partner
B. (a) Name Mary Anne Carter	
(b) Address (number and street) P.O. Box 57167	
(c) City, State and ZIP Code Washington, DC 20037	
(d) Name of Employer or Principal Place of Business MAC Research	(e) Occupation Consultant
C. (a) Name Ralph R. Brown	
(b) Address (number and street) P.O. Box 57167	
(c) City, State and ZIP Code Washington, DC 20037	
(d) Name of Employer or Principal Place of Business McDonald, Brown & Fagan	(e) Occupation Attorney
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
Donation(s) Received

<p>A. Full Name of Donor Eustace W. Mita</p> <p>Mailing Address of Donor 2324 E Deerfield Drive</p> <p>City State Zip Media CA 19063</p>	<p>Date of Receipt 10 27 2004</p> <p>Amount 10000.00</p>
<p>B. Full Name of Donor Charles Schwab</p> <p>Mailing Address of Donor P.O. Box 192861</p> <p>City State Zip San Francisco CA 94119</p>	<p>Date of Receipt 10 27 2004</p> <p>Amount 50000.00</p>
<p>C. Full Name of Donor Peter M. Nicholas</p> <p>Mailing Address of Donor 58 Chestnut Street</p> <p>City State Zip Boston MA 02108</p>	<p>Date of Receipt 10 27 2004</p> <p>Amount 50000.00</p>
<p>D. Full Name of Donor Adam Degraide</p> <p>Mailing Address of Donor 2000 Nonsneck Hill Road</p> <p>City State Zip Coventry RI 02816</p>	<p>Date of Receipt 10 27 2004</p> <p>Amount 25000.00</p>
<p>E. Full Name of Donor Carl Lindner</p> <p>Mailing Address of Donor 8555 Shawnee Run Road</p> <p>City State Zip Cincinnati OH 45243</p>	<p>Date of Receipt 10 27 2004</p> <p>Amount 25000.00</p>
<p>SUBTOTAL of Donations This Page (optional) ▶ 83500.00</p>	
<p>TOTAL This Period (next page this one number only) ▶</p> <p>(carry total from last page to Line 9)</p>	

SCHEDULE 9-A
Donation(s) Received

<p>A. Full Name of Donor James L. McCabe Mailing Address of Donor 701 Williamson Road City State Zip Bryn Mawr PA 19405</p>	<p>Date of Receipt 10 27 2004 Amount 10,000.00</p>
<p>B. Full Name of Donor Mark Kingdon Mailing Address of Donor 152 W 57th Street, 50th Floor City State Zip New York NY 10019</p>	<p>Date of Receipt 10 27 2004 Amount 5,000.00</p>
<p>C. Full Name of Donor Mary Beth Addarley Mailing Address of Donor 2456 Calle Del Oro City State Zip La Jolla CA 92037</p>	<p>Date of Receipt 10 27 2004 Amount 3,000.00</p>
<p>D. Full Name of Donor Duane Roth Mailing Address of Donor 265 Coast Boulevard #1 City State Zip La Jolla CA 92037</p>	<p>Date of Receipt 10 27 2004 Amount 1,000.00</p>
<p>E. Full Name of Donor Mailing Address of Donor City State Zip</p>	<p>Date of Receipt Amount</p>

<p>SUBTOTAL of Donations This Page (optional)</p>	<p>11,000.00</p>
<p>TOTAL This Period (last page and the number only) (carry total from last page to Line 3)</p>	<p>9,460,000.00</p>

SCHEDULE B-B

Disbursement(s) Made or Obligation(s)

A. Full Name (Last, First, Middle Initial) of Payer WENS-TV				Date of Disbursement or Obligation 10 / 26 / 2004	
Mailing Address of Payer 3001 Euclid Avenue				Amount 1,163,600.00	
City Cleveland	State OH	Zip Code 44115	Communication Date 10 / 27 / 2004		
Name of Employer N/A				Occupation N/A	
Purpose of Disbursement (including title(s) of communication(s)) TV Advertising Time [10/27 - 11/2] "Ashley's Story"					
Name of Federal Candidate Pres. George W. Bush	Office Sought <input checked="" type="checkbox"/> President	House <input type="checkbox"/> Senate	State OH, PA	Disbursement/Obligation For <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Name of Federal Candidate Sen. John Kerry	Office Sought <input checked="" type="checkbox"/> President	House <input type="checkbox"/> Senate	State OH, PA	Disbursement/Obligation For <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Name of Federal Candidate	Office Sought	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 WEYC-TV				Date of Disbursement or Obligation 10 / 26 / 2004	
Mailing Address of Payer 1333 Lakeside Avenue				Amount 278,800.00	
City Cleveland	State OH	Zip Code 44114	Communication Date 10 / 27 / 2004		
Name of Employer N/A				Occupation N/A	
Purpose of Disbursement (including title(s) of communication(s)) TV Advertising Time [10/27 - 11/2] "Ashley's Story"					
Name of Federal Candidate Pres. George W. Bush	Office Sought <input checked="" type="checkbox"/> President	House <input type="checkbox"/> Senate	State OH, PA	Disbursement/Obligation For <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Name of Federal Candidate Sen. John Kerry	Office Sought <input checked="" type="checkbox"/> President	House <input type="checkbox"/> Senate	State OH, PA	Disbursement/Obligation For <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Name of Federal Candidate	Office Sought	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)	
GURTTOTAL of Disbursements/Obligations This Page (optional)				384,400.00	
TOTAL This Period (last page lists line number only) (carry total from last page to Line 10)				[Blank]	

SCHEDULE 3-B

Disbursement(s) Made or Obligation(s)

A. Full Name (Last, First, Middle Initial) of Payee WQ10-TV				Date of Disbursement or Obligation 10 / 28 / 2004	
Mailing Address of Payee 1717 East 12th Street				Amount 5,610.00	
City Cleveland	State OH	Zip Code 44114		Contribution Date 10 / 27 / 2004	
Name of Employer N/A				Occupation N/A	
Purpose of Disbursement (including title(s) of communication(s)) TV Advertising Time (10/27 - 11/2) "Ashley's Story"					
Name of Federal Candidate Pres. 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 Sen. John Kerry	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) _____	
B. Full Name (Last, First, Middle Initial) of Payee W3NS-TV				Date of Disbursement or Obligation 10 / 28 / 2004	
Mailing Address of Payee 770 Twin Rivers Drive				Amount 3,672.00	
City Columbus	State OH	Zip Code 43215		Contribution Date 10 / 27 / 2004	
Name of Employer N/A				Occupation N/A	
Purpose of Disbursement (including title(s) of communication(s)) TV Advertising Time (10/27 - 11/2) "Ashley's Story"					
Name of Federal Candidate Pres. George W. Bush	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: OH, KY	District: WV	Disbursement/Obligation For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
Name of Federal Candidate Sen. John Kerry	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: OH, KY	District: WV	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) _____	
RECAPITULATE of Disbursements/Obligations This Page (optional)				4,233.00	
TOTAL This Period (last page this line number only) (carry total from last page to line 10)				_____	

SCHEDULE 3-B

Disbursement(s) Made or Obligation(s)

A. Full Name (Last, First, Middle Initial) of Payor WCHH-TV		Date of Disbursement or Obligation 10 26 2004	
Mailing Address of Payor 3165 Olentangy River Road		Amount 249,750.00	
City Columbus	State OH	Zip Code 43202	Contribution Date 10 27 2004
Name of Employer N/A		Occupation N/A	
Purpose of Disbursement (including title(s) of communication(s)) TV Advertising Time (10/27 - 11/2) "Ashley's Story"			
Name of Federal Candidate Pres. 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 type="checkbox"/> General <input type="checkbox"/> Other (specify)
Name of Federal Candidate Sen. John Kerry	Office Sought <input type="checkbox"/> House <input checked="" 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	Office Sought	State	Disbursement/Obligation For
B. Full Name (Last, First, Middle Initial) of Payor WSYX-TV		Date of Disbursement or Obligation 10 26 2004	
Mailing Address of Payor 1261 Dublin Road		Amount 19,890.00	
City Columbus	State OH	Zip Code 43215	Contribution Date 10 27 2004
Name of Employer N/A		Occupation N/A	
Purpose of Disbursement (including title(s) of communication(s)) TV Advertising Time (10/27 - 11/2) "Ashley's Story"			
Name of Federal Candidate Pres. George W. Bush	Office Sought <input type="checkbox"/> House <input checked="" 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 Sen. John Kerry	Office Sought <input type="checkbox"/> House <input checked="" 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	Office Sought	State	Disbursement/Obligation For
SUBTOTAL of Disbursements/Obligations This Page (optional)		228,650.00	
TOTAL This Period (last page this line number only) (carry total from last page to Line 10)			

SCHEDULE B-B

Disbursement(s) Made or Obligation(s)

A. Payer Name (Last, First, Middle Initial) of Payer WYTV-TV				Date of Disbursement or Obligation 10 26 2004	
Mailing Address of Payer 3800 Shady Run Road				Amount 4,944.72	
City Youngstown	State OH	Zip Code 44502	Communication Date 10 27 2004		
Name of Employer N/A				Occupation N/A	
Purpose of Disbursement (including state) of communication(s) TV Advertising Time [10/27 - 11/2] "Ashley's Story"					
Name of Federal Candidate Pres. George W. Bush	Office Sought: <input checked="" type="checkbox"/> President	House Senate	State: OH, PA District:	Disbursement/Obligation For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Name of Federal Candidate Sen. John Kerry	Office Sought: <input checked="" type="checkbox"/> President	House Senate	State: OH, PA District:	Disbursement/Obligation For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Name of Federal Candidate	Office Sought:	House Senate President	State: District:	Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
B. Payer Name (Last, First, Middle Initial) of Payer WTRB-TV				Date of Disbursement or Obligation 10 29 2004	
Mailing Address of Payer 96 16th Street				Amount 1,604.00	
City Wheeling	State WV	Zip Code 26003	Communication Date 10 27 2004		
Name of Employer N/A				Occupation N/A	
Purpose of Disbursement (including state) of communication(s) TV Advertising Time [10/27 - 11/2] "Ashley's Story"					
Name of Federal Candidate Pres. George W. Bush	Office Sought: <input checked="" type="checkbox"/> President	House Senate	State: WV, OH, PA District:	Disbursement/Obligation For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Name of Federal Candidate Sen. John Kerry	Office Sought: <input checked="" type="checkbox"/> President	House Senate	State: WV, OH, PA District:	Disbursement/Obligation For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Name of Federal Candidate	Office Sought:	House Senate 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 (ceptor 2)				5,648.50	
TOTAL This Period (last page this line number only) (carry over from last page to Line 10)					

SCHEDULE 9-B

Disbursement(s) Made or Obligation(s)

A. Full Name (Last, First, Middle Initial) of Payee WIOV-TV		Date of Disbursement or Obligation 10/25/2004	
Mailing Address of Payee 9 Red Donley Plaza		Amount 1,477,310.00	
City Nongee Junction	State OH	Zip Code 43938	Continuation Date 10/27/2004
Name of Employer N/A		Occupation N/A	
Purpose of Disbursement (including title) of communication(s) TV Advertising Time [10/2] - [11/2] "Ashley's Story"			
Name of Federal Candidate Pres. George W. Bush	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH, PA, WV, KY	Disbursement/Obligation For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
Name of Federal Candidate Sen. John Kerry	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH, PA, WV, KY	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)
B. Full Name (Last, First, Middle Initial) of Payee Mentzer Media Services, Inc.		Date of Disbursement or Obligation 10/28/2004	
Mailing Address of Payee 600 Fairmount Avenue, Suite 306		Amount 1,955,810.00	
City Towson	State MD	Zip Code 21286	Continuation Date 10/27/2004
Name of Employer N/A		Occupation N/A	
Purpose of Disbursement (including title) of communication(s) Media Placement Fee - TV Ad - "Ashley's Story"			
Name of Federal Candidate Pres. George W. Bush	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH, PA, WV, KY	Disbursement/Obligation For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
Name of Federal Candidate Sen. John Kerry	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH, PA, WV, KY	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)
SUBTOTAL of Disbursements/Obligations This Page (optional)		3,443,120.00	
TOTAL This Period (last page this line number only) (copy total from last page to Line 10)		1,955,810.00	

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.

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> USPS First Class Mail	Postmarked
<input type="checkbox"/> USPS Registered/Certified	Postmarked (R/C)
<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
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input checked="" type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked
<p>The document preceding this page was received by FAX at the FEC. The receiving FAX machine has printed at the bottom of each page the date and time of receipt, the phone number of the transmitting machine and the sequential page numbers.</p>	
N/A PREPARER (5/2004)	N/A DATE PREPARED