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
MAIN STREET INDIVIDUAL FUND

(b) Address (number and street) ☐ check if different than previously reported
1110 L Street, NW #100-273

(c) City, State and ZIP Code
Washington, DC 20005

(d) Name of Employer or Principal Place of Business

(e) Occupation

2. FEC Identification Number
C

3. Is This Statement X New or ☐ Amended

4. Covering Period 06 30 2004 through 09 01 2004

5. (a) Date of Public Distribution(s) 09 01 2004 (b) Communication Title The Fisherman

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 X No ☐

8. Custodian of Records

(a) Name
Sarah Chamberlain Resnick

(b) Address (number and street)
616 26th Street South

(c) City, State and ZIP Code
Arlington, VA 22202

(d) Name of Employer or Principal Place of Business
Main Street Individual Fund

(e) Occupation
Consultant

9. Total Donations This Statement 000

10. Total Disbursements/Obligations This Statement 30155.00

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 Sarah Chamberlain Resnick

SIGNATURE [signature] DATE 9/1/04

NOTE: Submission of false, misleading or [illegible] information may subject the person signing this statement to the penalties of 2 U.S.C. §437g.

FEC FORM 9 REV. 10/2003

FEC-01-2004 13:02 2026823943 96% P.01

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

11. Person(s) Sharing/Exercising Control

A. (a) Name
Robert Duke
(b) Address (number and street)
20 Crescent Drive
(c) City, State and ZIP Code
Staunton, VA 24401
(d) Name of Employer or Principal Place of Business
(e) Occupation
Retired

B. (a) Name
Sarah Chamberlain Resnick
(b) Address (number and street)
616 26th Street South
(c) City, State and ZIP Code
Arlington, VA 22202
(d) Name of Employer or Principal Place of Business
Main Street Individual Fund
(e) Occupation
Consultant

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 10/2003)

FEC 4/10/2 PEP

PAGE 1 OF 1

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

A. Full Name (Last, First, Middle Initial) of Payee: Media Placement Technologies

Date of Disbursement or Obligation: 09 01 2004

Mailing Address of Payee: 336 Commerce Street

Amount: 30,155.00

City: Alexandria, State: VA Zip Code: 22314

Communication Date: 09 01 2004

Name of Employer: Occupation:

Purpose of Disbursement (including file(s) or communication(s)): Radio Ad Buy The Fisherman

Name of Federal Candidate: Jim Kolbe
Office Sought: [X] House [ ] Senate [ ] President State: AZ District: 8
Disbursement/Obligation For: [X] 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:

Date of Disbursement or Obligation:

Mailing Address of Payee:

Amount:

City: State: Zip Code:

Communication Date:

Name of Employer: Occupation:

Purpose of Disbursement (including file(s) or 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 Disbursement/Obligation This Page (optional) ▶ 30,155.00

TOTAL This Period (last page this line number only) ▶ 30,155.00
(carry total from last page to Line 10)

FEC FORM 9 (REV. 03/2003)

PE3AN024.PDF

TOTAL P.04

24038510746

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.

Date of Receipt

☐ Hand Delivered

Postmarked

☐ USPS First Class Mail

Postmarked (R/C)

☐ USPS Registered/Certified

Postmarked

☐ USPS Priority Mail

Delivery Confirmation ™ Label ☐

Postmarked

☐ USPS Express Mail

☐ Postmark Illegible

☐ No Postmark

Shipping Date

☐ Overnight Delivery Service (Specify):

Date of Receipt

☐ Received from House Records & Registration Office

Date of Receipt

☐ Received from Senate Public Records Office

Date of Receipt

☐ Received from Electronic Filing Office

Date of Receipt or Postmarked

☒ Other (Specify):

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.

N/A
PREPARER

N/A
DATE PREPARED

(5/2004)