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FEC FORM 9

24 HOUR NOTICE OF DISBURSEMENTS/OBLIGATIONS FOR ELECTIONEERING COMMUNICATIONS

RECEIVED FEC MAIL OPERATIONS CENTER 2004 OCT 21 A 10:45

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

(a) Name: The Committee for the Advancement of Stem Cell Research

(b) Address (number and street) ☐ check if different than previously reported: 300 Garden City Plaza, Suite 234

(c) City, State and ZIP Code: Garden City NY 11530

(d) Name of Employer or Principal Place of Business

(e) Occupation

2. FEC Identification Number: C30000095

3. Is This Statement X New or Amended

4. Covering Period 10 15 2004 through 10 31 2004

5. (a) Date of Public Distribution(s) 10 28 2004 (b) Communication Title

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

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

8. Custodian of Records

(a) Name: Frank J. Gonzalez

(b) Address (number and street): 743 Dylan Blvd

(c) City, State and ZIP Code: Staten Island NY 11530

(d) Name of Employer or Principal Place of Business: Self-employed

(e) Occupation: Attorney

9. Total Donations This Statement 13,950.00

10. Total Disbursements/Obligations This Statement 2,800.00

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

SIGNATURE [signature] DATE 10/20/04

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. 02/2003)

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