

Fax Cover Sheet

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

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

DATE: October 30, 2004

PAGES: 11 (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 29, 2004, through October 29, 2004.

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

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

2. FEC Identification Number

C N/A

(d) Name of Employer or Principal Place of Business

N/A

(e) Occupation

3. Is This Statement New or Amended

4. Covering Period 10/29/2004 through 10/29/2004

5. (a) Date of Public Distribution(s) 10/29/2004 (b) Communication Title "Ashley's Story"

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

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 107,000.00

10. Total Disbursements/Obligations This Statement 49,250.25

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 R. Brown, Secretary

SIGNATURE

Ralph R. Brown

DATE October 30, 2004

NOTE: Submitter of this communication is liable for the violation upon subject of the person signing this statement to the penalty of 2 U.S.C. § 307g

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

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, I.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 HAC 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 & Fagen	(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 9-A
Donation(s) Received

<p>A. Full Name of Donor Sean Wolfington</p> <p>Mailing Address of Donor 2000 Nonsneck Hill Road</p> <p>City State Zip Coventry RI 02816</p>	<p>Date of Receipt 10 / 29 / 2004</p> <p>Amount 100,000.00</p>
<p>B. Full Name of Donor Dorothy Davison</p> <p>Mailing Address of Donor 1240 Deborah Drive SE</p> <p>City State Zip Huntsville AL 35801</p>	<p>Date of Receipt 10 / 29 / 2004</p> <p>Amount 5,000.00</p>
<p>C. Full Name of Donor Salvatore A. Balsamo</p> <p>Mailing Address of Donor 14 Grand Hill Drive</p> <p>City State Zip Dover MA 02030</p>	<p>Date of Receipt 10 / 29 / 2004</p> <p>Amount 2,000.00</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>107,000.00</p>
<p>TOTAL This Period (last page will show number only) > (carry total from next page to Line 9)</p>	<p>107,000.00</p>

SCHEDULE 9-B

Disbursement(s) Made or Obligation(s)

PAGE 4 OF 10

A. Full Name (Last, First, Middle Initial) of Payee WCPT-TV		Date of Disbursement or Obligation 10 / 27 / 2004	
Mailing Address of Payee 1720 Gilbert Avenue		Amount 23,800.00	
City Cincinnati	State OH	Zip Code 45202	Communication Date 10 / 29 / 2004
Name of Employer N/A		Occupation N/A	
Purpose of Disbursement (including dates) of contribution(s) TV Advertising Time [10/29 - 11/2] "Ashley's Story"			
Name of Federal Candidate Pres. George W. Bush	Office Sought <input checked="" type="checkbox"/> House	State OH, IN, 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 checked="" type="checkbox"/> House	State OH, IN, KY	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
B. Full Name (Last, First, Middle Initial) of Payee WXIN-TV		Date of Disbursement or Obligation 10 / 27 / 2004	
Mailing Address of Payee 19 Broadcast Plaza		Amount 29,835.00	
City Cincinnati	State OH	Zip Code 45203	Communication Date 10 / 29 / 2004
Name of Employer N/A		Occupation N/A	
Purpose of Disbursement (including dates) of contribution(s) TV Advertising Time [10/29 - 11/2] "Ashley's Story"			
Name of Federal Candidate Pres. George W. Bush	Office Sought <input checked="" type="checkbox"/> House	State OH, IN, 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 checked="" type="checkbox"/> House	State OH, IN, KY	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)		53,635.00	
TOTAL This Period (last page this line number only) (carry down from last page to LSP 10)			

SCHEDULE 9-B

Disbursement(s) Made or Obligation(s)

A. Full Name (Last, First, Middle Initial) of Payee WRRC-TV				Date of Disbursement or Obligation 10 / 27 / 2004	
Mailing Address of Payee 1906 Highland Avenue				Amount 1,850.00	
City Cincinnati	State OH	Zip Code 45219	Contribution Date 10 / 29 / 2004		
Name of Employer N/A				Occupation N/A	
Purpose of Disbursement (including use(s) of communication(s)) TV Advertising Time [10/29 - 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, IN, 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 checked="" type="checkbox"/> President	House <input type="checkbox"/> Senate	State OH, IN, KY	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 Payee WLWT-TV				Date of Disbursement or Obligation 10 / 27 / 2004	
Mailing Address of Payee 1700 Young Street				Amount 2,925.00	
City Cincinnati	State OH	Zip Code 45202	Contribution Date 10 / 29 / 2004		
Name of Employer N/A				Occupation N/A	
Purpose of Disbursement (including use(s) of communication(s)) TV Advertising Time [10/29 - 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, IN, 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 checked="" type="checkbox"/> President	House <input type="checkbox"/> Senate	State OH, IN, KY	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)	
SUBTOTAL of Disbursements/Obligations This Page (optional)				3,102.50	
TOTAL This Period (Use page and line number only) (carry total from last page to line 10)				3,102.50	

SCHEDULE 9-B

Disbursement(s) Made or Obligation(s)

A. Full Name (Last, First, Middle Initial) of Payee WKYC-TV			Date of Disbursement or Obligation 10 / 29 / 2004		
Street Address of Payee 1333 Lakeside Avenue			Amount 7,063.50		
City Cleveland	State OH	Zip Code 44114	Communication Date 10 / 29 / 2004		
Name of Employer N/A			Occupation N/A		
Purpose of Disbursement (including title) of communication(s) TV Advertising Time (10/29 - 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	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	Disbursement/Obligation For <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Name of Federal Candidate N/A	Office Sought N/A	House Senate	State OH, PA	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 WOIO-TV			Date of Disbursement or Obligation 10 / 29 / 2004		
Street Address of Payee 1717 E. 12th Street			Amount 3,903.75		
City Cleveland	State OH	Zip Code 44114	Communication Date 10 / 29 / 2004		
Name of Employer N/A			Occupation N/A		
Purpose of Disbursement (including title) of communication(s) TV Advertising Time (10/29 - 11/2) "Ashley's Story"					
Name of Federal Candidate Pres. George W. Bush	Office Sought <input checked="" type="checkbox"/> President	House Senate	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 checked="" type="checkbox"/> President	House Senate	State OH	Disbursement/Obligation For <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Name of Federal Candidate N/A	Office Sought N/A	House Senate	State OH, PA	Disbursement/Obligation For <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
SUBTOTAL of Disbursements/Obligations This Page (optional)			10,967.25		
TOTAL This Period (See page 10 for the number only) (carry total from last page to Line 10)			10,967.25		

SCHEDULE 9-B

Disbursement(s) Made or Obligation(s)

A. Full Name (Last, First, Middle Initial) of Payee WDX-TV				Date of Disbursement or Obligation 10 / 27 / 2004	
Mailing Address of Payee 4595 South Dixie				Amount 61,072.50	
City Dayton	State OH	Zip Code 45439	Communication Date 10 / 29 / 2004		
Name of Employer N/A				Occupation N/A	
Purpose of Disbursement (including title(s) or communication(s)) TV Advertising Time [10/29 - 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, IN, 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 checked="" type="checkbox"/> President	House <input type="checkbox"/> Senate	State OH, IN, KY	Disbursement/Obligation For <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Name of Federal Candidate	Office Sought	House	State	Disbursement/Obligation For	
B. Full Name (Last, First, Middle Initial) of Payee WTOL-TV					
Mailing Address of Payee 730 North Summit Street					
City Toledo	State OH	Zip Code 43699	Date of Disbursement or Obligation 10 / 27 / 2004		
Name of Employer N/A				Occupation N/A	
Purpose of Disbursement (including title(s) or communication(s)) TV Advertising Time [10/29 - 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, MI	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, MI	Disbursement/Obligation For <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Name of Federal Candidate	Office Sought	House	State	Disbursement/Obligation For	
SUBTOTAL of Disbursements/Obligations This Page (optional)				6,551,250	
TOTAL This Period (last page this the number only) (carry over from last page to Line 10)					

SCHEDULE B-B

Disbursement(s) Made or Obligation(s)

A. Full Name (Last, First, Middle Initial) of Payee WZSD-TV				Date of Disbursement or Obligation 10 / 27 / 2004	
Mailing Address of Payee 100 Television Lane				Amount 2,892,000	
City Paducah	State KY	Zip Code 42003	Communication Date 10 / 29 / 2004		
Name of Employer N/A				Occupation N/A	
Purpose of Disbursement (including title(s) of communication(s)) TV Advertising Time [10/29 - 11/2] "Ashley's Story"					
Name of Federal Candidate Pres. George W. Bush	Office Sought <input checked="" type="checkbox"/> President	House Senate	State KY, IL, MO, TN	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 KY, IN, MO, TN	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. Full Name (Last, First, Middle Initial) of Payee KMBC-TV				Date of Disbursement or Obligation 10 / 27 / 2004	
Mailing Address of Payee 11th and Central				Amount 1,285,200	
City Kansas City	State MO	Zip Code 64105	Communication Date 10 / 29 / 2004		
Name of Employer N/A				Occupation N/A	
Purpose of Disbursement (including title(s) of communication(s)) TV Advertising Time [10/29 - 11/2] "Ashley's Story"					
Name of Federal Candidate Pres. George W. Bush	Office Sought <input checked="" type="checkbox"/> President	House Senate	State MO, KS	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 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 (optional)				1,564,000	
TOTAL This Period (last page this line number only) (carry total from last page to Line 10)				1,564,000	

SCHEDULE 9-B

Disbursement(s) Made or Obligation(s)

PAGE 9 OF 10

A. Full Name (Last, First, Middle Initial) of Payer KDNL-TV Mailing Address of Payer 1215 Cole Street City: St. Louis State: MO Zip Code: 63106 Name of Employer: N/A Occupation: N/A				Date of Disbursement or Obligation 10 / 27 / 2004 Amount 21,505.00 Communication Date 10 / 29 / 2004	
Purpose of Disbursement (including title) of communication(s) TV Advertising Time (10/29 - 11/2) "Ashley's Story"					
Name of Federal Candidate		Office Sought		Disbursement/Obligation For:	
Pres. George W. Bush		<input checked="" type="checkbox"/> President		<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	
Name of Federal Candidate		Office Sought		Disbursement/Obligation For:	
Sen. John Kerry		<input checked="" type="checkbox"/> President		<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	
Name of Federal Candidate		Office Sought		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 KSDK-TV Mailing Address of Payer 1000 Market Street City: St. Louis State: MO Zip Code: 63101 Name of Employer: N/A Occupation: N/A				Date of Disbursement or Obligation 10 / 27 / 2004 Amount 1,700.00 Communication Date 10 / 29 / 2004	
Purpose of Disbursement (including title) of communication(s) TV Advertising Time (10/29 - 11/2) "Ashley's Story"					
Name of Federal Candidate		Office Sought		Disbursement/Obligation For:	
Pres. George W. Bush		<input checked="" type="checkbox"/> President		<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	
Name of Federal Candidate		Office Sought		Disbursement/Obligation For:	
Sen. John Kerry		<input checked="" type="checkbox"/> President		<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	
Name of Federal Candidate		Office Sought		Disbursement/Obligation For:	
				<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	
SUBTOTAL of Disbursements/Obligations This Page (optional)				23,205.00	
TOTAL This Period (last page this line member only) (carry trial from last page to Line 10)					

SCHEDULE B-B

Disbursement(s) Made or Obligation(s)

A. Full Name (Last, First, Middle Initial) of Payee Mentzer Media Services, Inc.		Date of Disbursement or Obligation 10 / 29 / 2004	
Mailing Address of Payee 600 Fairmount Avenue, Suite 306		Amount 4,999.125	
City TOWSON	State MD	Zip Code 21286	Communication Date 10 / 29 / 2004
Name of Employer N/A		Occupation N/A	
Purpose of Disbursement (including title(s) of communication(s)) Media Placement Fee - TV Ad - "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 OR, IN, NY, PA, RI, VT, WA, WI, WY, KS	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 DE, IL, IA, MI, MN, MO, ND, SD, TN, VA, 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)
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 title(s) of communication(s))			
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)
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 (column 4)		4,999.125	
TOTAL This Period (last page this line number only) (copy total from last page to this line)		4,923,012.5	

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

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