

Fax Cover Sheet

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

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

DATE: October 25, 2004

PAGES: 7 (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 24, 2004, through October 24, 2004.

NOTE: This is the second of two (2) separate Forms 9 that have been faxed today for Progress for America Voter Fund.

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

(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 10 / 24 / 2004 through 10 / 24 / 2004

5. (a) Date of Public Distribution(s) 10 / 24 / 2004 **(b) Communication Title** "Bus"

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 000,000

10. Total Disbursements/Obligations This Statement 200,251.06

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 25, 2004

NOTE: Submission of false, erroneous or incomplete information may subject the person signing this statement to the penalties of 18 U.S.C. 1017.

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

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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 Anna 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 & 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 B-A
Donation(s) Received

PAGE 3 of 4

<p>A. Full Name of Donor</p> <p>NO REPORTABLE DONATIONS. ALL REPORTED ON MAILING ADDRESS OF DONOR</p> <p>REPORT COVERING OCT. 23-24, 2004.</p> <p>City State Zip</p>	<p>Date of Receipt</p> <p>Month Day Year</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>Month Day Year</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>Month Day Year</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>Month Day Year</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>Month Day Year</p> <p>Amount</p>

<p>SUBTOTAL of Donations This Page (optional)</p>	<p>000</p>
<p>TOTAL This Period (last page till this number only)</p> <p>(carry total from last page to Line 9)</p>	<p>000</p>

SCHEDULE 3-B

Disbursement(s) Made or Obligation(s)

PAGE 4 OF 6

A. Full Name (Last, First, Middle Initial) of Payee WBZ-TV		Date of Disbursement or Obligation 10 / 24 / 2004	
Mailing Address of Payee 1170 Soldiers Field Road		Amount 4,941,725.00	
City Boston	State MA	Zip Code 02134	Communication Date 10 / 24 / 2004
Name of Employer N/A		Occupation N/A	
Purpose of Disbursement (including title) of communication(s) TV Advertising Time [10/24 - 11/2] "Hug"			
Name of Federal Candidate Pres. George W. Bush	Office Sought <input checked="" type="checkbox"/> House	State MA, CT, NJ, RI, VT, NH	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"/> Senate	State MA, CT, NJ, RI, VT, NH	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 WCVB-TV		Date of Disbursement or Obligation 10 / 24 / 2004	
Mailing Address of Payee 5 TV Place		Amount 1,955,000.00	
City Needham	State MA	Zip Code 02494	Communication Date 10 / 24 / 2004
Name of Employer N/A		Occupation N/A	
Purpose of Disbursement (including title) of communication(s) TV Advertising Time [10/24 - 11/2] "Hug"			
Name of Federal Candidate Pres. George W. Bush	Office Sought <input checked="" type="checkbox"/> House	State MA, CT, NJ, RI, VT, NH	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"/> Senate	State MA, CT, NJ, RI, VT, NH	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)		6,872,250	
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 WRDH-TV Mailing Address of Payee 7 Bulfinch Place City: Boston State: MA Zip Code: 02114 Name of Employer: N/A Occupation: N/A		Date of Disbursement or Obligation 10 / 24 / 2004 Amount 90,520.00 Communication Date 10 / 24 / 2004
Purpose of Disbursement (including title(s) of communication(s)) TV Advertising Time [10/24 - 11/2] "Hug"		
Name of Federal Candidate Pres. George W. Bush	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: MA, CT, NH, RI, VT, ME 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: MA, CT, NH, RI, VT, ME 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 WLVI-TV Mailing Address of Payee 75 Morrissey Blvd. City: Boston State: MA Zip Code: 02125 Name of Employer: N/A Occupation: N/A		Date of Disbursement or Obligation 10 / 24 / 2004 Amount 19,380.00 Communication Date 10 / 24 / 2004
Purpose of Disbursement (including title(s) of communication(s)) TV Advertising Time [10/24 - 11/2] "Hug"		
Name of Federal Candidate Pres. George W. Bush	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: MA, NH, RI 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: MA, NH, RI 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)		100,300.00
TOTAL This Period (sum page this line number only) (carry total from last page to line 7d)		

SCHEDULE 9-B

Disbursement(s) Made or Obligation(s)

A. Full Name (Last, First, Middle Initial) of Payee WSEK-TV		Date of Disbursement or Obligation 10 21 2004	
Mailing Address of Payee 1170 Soldiers Field Road		Amount 7,990.00	
City Boston	State MA	Zip Code 02134	Communication Date 10 28 2004
Name of Employer N/A		Occupation N/A	
Purpose of Disbursement (including title(s) of communication(s)) TV Advertising Time [10/24 - 11/2] "Hug"			
Name of Federal Candidate Pres. George W. Bush	Office Sought President	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State MA, CT, NH, RI, VT, ME, NY
		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 President	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State MA, CT, NH, RI, VT, ME, NY
		Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Name of Federal Candidate N/A	Office Sought President	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State MA, CT, NH, RI, VT, ME, NY
		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 Montzer Media Services, Inc.		Date of Disbursement or Obligation 10 21 2004	
Mailing Address of Payee 600 Fairmount Avenue, Suite 306		Amount 23,238.56	
City Towson	State MD	Zip Code 21286	Communication Date 10 24 2004
Name of Employer N/A		Occupation N/A	
Purpose of Disbursement (including title(s) of communication(s)) Media Placement Fee - TV Ad - "Hug"			
Name of Federal Candidate Pres. George W. Bush	Office Sought President	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State MA, CT, NH, RI, VT, ME, NY
		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 President	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State MA, CT, NH, RI, VT, ME, NY
		Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Name of Federal Candidate N/A	Office Sought President	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State MA, CT, NH, RI, VT, ME, NY
		Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
SUBTOTAL of Disbursements/Obligations This Page (optional)		31,228.56	
TOTAL This Period (last page line (line number only) carry total from last page to line 10)		200,251.96	

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.

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<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
 (5/2004)

N/A
 DATE PREPARED