

RECEIVED
FEDERAL ELECTION
COMMISSION
PUBLIC DISCLOSURE
SECTION

2008 SEP 10 P 1:40

FEC FORM 9

24 HOUR NOTICE OF DISBURSEMENTS/OBLIGATIONS FOR ELECTIONEERING COMMUNICATIONS

1. Person Making the Disbursements/Obligations

(a) Name

AMERICAS MAJORITY

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

8640 TRAVIS

(c) City, State and ZIP Code

OVERLAND PARK, KS 66212

(d) Name of Employer or Principal Place of Business

N/A

(e) Occupation

2. FEC Identification Number

C

3. Is This Statement

New

or

Amended

4. Covering Period

09 26 2008

through

09 09 2008

5. (a) Date of Public Distribution(s)

09 10 2008

(b) Communication Title

DON'T PLAY GAMES

6. The filer is a(n): (a) Individual (b) Unincorporated Organization (c) Qualified Nonprofit Corporation (11 CFR 114.10)

(d) Corporation, Labor Organization or Qualified Nonprofit Corporation making communications under 11 CFR 114.15

(e) Other, specify: _____

7. If the filer is an individual, unincorporated organization or qualified nonprofit corporation, were the disbursements made exclusively from donations to a segregated bank account?

Yes

No

8. Custodian of Records

(a) Name

RICHARD NADLER

(b) Address (number and street)

8640 TRAVIS

(c) City, State and ZIP Code

OVERLAND PARK, KS 66212

(d) Name of Employer or Principal Place of Business

(e) Occupation

9. Total Donations This Statement

10. Total Disbursements/Obligations This Statement

49,003.6

Under penalty of perjury, I certify that this statement is true, correct and complete.

TYPE OR PRINT NAME OF PERSON COMPLETING FORM

GERALD GETER

SIGNATURE

Gerald Geter

DATE

9-10-08

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

28039830845

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

PAGE OF

11. Person(s) Sharing/Exercising Control

A. (a) Name RICHARD NADLER	
(b) Address (number and street) 8640 MAVIS ST	
(c) City, State and ZIP Code OVERLAND PARK, KS 66212	
(d) Name of Employer or Principal Place of Business AMERICAS MAJORITY FOUNDATION	(e) Occupation DIRECTOR
B. (a) Name	
(b) Address (number and street)	
(c) City, State and ZIP Code	
(d) Name of Employer or Principal Place of Business	(e) Occupation
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

28039830846

C

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

A. Full Name (Last, First, Middle Initial) of Payee BUSTOS MEDIA		Date of Disbursement or Obligation 07' 02' 2008	
Mailing Address of Payee 1138 S. 38TH ST		Amount 1,685.58	
City WEST ALLIS	State WI	Zip Code 53214	Communication Date 09' 13' 2008
Name of Employer N/A		Occupation 	
Purpose of Disbursement (Including title(s) of communication(s)) RADIO AIR TIME - DON'T PLAY GAMES.			
Name of Federal Candidate BARACK OBAMA	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	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: <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) ▶
B. Full Name (Last, First, Middle Initial) of Payee MIDWEST FAMILY BROADCASTING		Date of Disbursement or Obligation 07' 02' 2008	
Mailing Address of Payee 730 RAYONAC DR		Amount 453.33	
City MADISON	State WI	Zip Code 53711	Communication Date 09' 13' 2008
Name of Employer N/A		Occupation 	
Purpose of Disbursement (Including title(s) of communication(s)) RADIO AIR TIME - DON'T PLAY GAMES			
Name of Federal Candidate BARACK OBAMA	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	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: <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 (optional) ▶		2138.91	
TOTAL This Period (last page this line number only) ▶ (carry total from last page to Line 10)			

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SCHEDULE 9-B

Disbursement(s) Made or Obligation(s)

A. Full Name (Last, First, Middle Initial) of Payee AIRBOUN AUDIO		Date of Disbursement or Obligation 08 / 01 / 2008
Mailing Address of Payee 8805 MONROVIA		Amount 31.25
City LENEXA	State KS	Zip Code 66215
Name of Employer NIA		Communication Date 09 / 10 / 2008
Purpose of Disbursement (Including title(s) of communication(s)) AUDIO RECORDING - DON'T PLAY GAMES		
Name of Federal Candidate BARACK OBAMA	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement/Obligation For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶
Name of Federal Candidate (blank)	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶
Name of Federal Candidate (blank)	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	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 GABY LUCAS, INC.		Date of Disbursement or Obligation 08 / 01 / 2008
Mailing Address of Payee 16160 S. HEATHERWOOD		Amount 37.50
City DLAHE	State KS	Zip Code 66062
Name of Employer NIA		Communication Date 09 / 10 / 2008
Purpose of Disbursement (Including title(s) of communication(s)) ACTOR - DON'T PLAY GAMES		
Name of Federal Candidate BARACK OBAMA	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement/Obligation For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶
Name of Federal Candidate (blank)	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶
Name of Federal Candidate (blank)	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶
SUBTOTAL of Disbursements/Obligations This Page (optional) ▶		68.75
TOTAL This Period (last page this line number only) ▶ (carry total from last page to Line 10)		(blank)

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SCHEDULE 9-B

Disbursement(s) Made or Obligation(s)

A. Full Name (Last, First, Middle Initial) of Payee JAMES HOLT		Date of Disbursement or Obligation 08 12 2008
Mailing Address of Payee 410 NE MEDFORD DR		Amount 333.33
City LEE'S SUMMIT	State MO	Zip Code 64064
Name of Employer SELF		Occupation (blank)
Purpose of Disbursement (Including title(s) of communication(s)) STUDIO MIXING AUDIO - DON'T PLAY GAMES		
Name of Federal Candidate BARACK OBAMA	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement/Obligation For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶
Name of Federal Candidate (blank)	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶
Name of Federal Candidate (blank)	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	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 LALEY 105.5 KDLS		Date of Disbursement or Obligation 09 18 2008
Mailing Address of Payee 6720 HICKMAN RD		Amount 357.00
City WINDSON HTS	State IA	Zip Code 50322
Name of Employer N/A		Occupation (blank)
Purpose of Disbursement (Including title(s) of communication(s)) RADIO AIR TIME - DON'T PLAY GAMES		
Name of Federal Candidate BARACK OBAMA	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement/Obligation For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶
Name of Federal Candidate (blank)	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶
Name of Federal Candidate (blank)	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶
SUBTOTAL of Disbursements/Obligations This Page (optional) ▶		690.33
TOTAL This Period (last page this line number only) ▶ (carry total from last page to Line 10)		

28039830849

SCHEDULE 9-B

Disbursement(s) Made or Obligation(s)

A. Full Name (Last, First, Middle Initial) of Payee WCVG		Date of Disbursement or Obligation 08 20 2008
Mailing Address of Payee 135 W. 38TH ST		Amount 698.67
City COVINGTON	State KY	Zip Code 41015
Name of Employer N/A		Occupation _____
Purpose of Disbursement (Including title(s) of communication(s)) RADIO AIRTIME - DON'T PLAY GAMES		
Name of Federal Candidate BARACK OBAMA	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	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	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	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 WV KD-FM		Date of Disbursement or Obligation 08 21 2008
Mailing Address of Payee 74 S. 4TH ST		Amount 697.00
City COLUMBUS	State OH	Zip Code 43215
Name of Employer N/A		Occupation _____
Purpose of Disbursement (Including title(s) of communication(s)) RADIO AIR TIME - DON'T PLAY GAMES		
Name of Federal Candidate BARACK OBAMA	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	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	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	Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶
SUBTOTAL of Disbursements/Obligations This Page (optional) ▶		1395.67
TOTAL This Period (last page this line number only) ▶ (carry total from last page to Line 10)		_____

28039830850

SCHEDULE 9-B

Disbursement(s) Made or Obligation(s)

28039830851

A. Full Name (Last, First, Middle Initial) of Payee KWSL-AM		Date of Disbursement or Obligation 08 21 2008
Mailing Address of Payee 1113 NEBRASKA		Amount 545.59
City SIOUX CITY	State IA	Zip Code 51105
Name of Employer N/A		Occupation N/A
Purpose of Disbursement (Including title(s) of communication(s)) RADIO AIR TIME - DON'T PLAY GAMES		
Name of Federal Candidate BARACK OBAMA	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement/Obligation For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶
Name of Federal Candidate (blank)	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶
Name of Federal Candidate (blank)	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	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 GABY LUCAS, INC		Date of Disbursement or Obligation 08 20 2008
Mailing Address of Payee 16160 S. HEATHERWOOD		Amount 1111
City OLATHE	State KS	Zip Code 66062
Name of Employer N/A		Occupation N/A
Purpose of Disbursement (Including title(s) of communication(s)) ACTOR - DON'T PLAY GAMES		
Name of Federal Candidate BARACK OBAMA	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement/Obligation For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶
Name of Federal Candidate (blank)	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶
Name of Federal Candidate (blank)	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶
SUBTOTAL of Disbursements/Obligations This Page (optional) ▶		556.70
TOTAL This Period (last page this line number only) ▶ (carry total from last page to Line 10)		(blank)

SCHEDULE 9-B

Disbursement(s) Made or Obligation(s)

A. Full Name (Last, First, Middle Initial) of Payee YUAN DUIN				Date of Disbursement or Obligation 03 / 01 / 2008	
Mailing Address of Payee 8322 METCALF AVE				Amount 50.00	
City OVERLAND PARK	State KS	Zip Code 66212			
Name of Employer SELF		Occupation		Communication Date 04 / 18 / 2008	
Purpose of Disbursement (Including title(s) of communication(s)) ACTOR - DON'T PLAY GAMES					
Name of Federal Candidate BARACK OBAMA		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	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: <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) ▶	
B. Full Name (Last, First, Middle Initial) of Payee				Date of Disbursement or Obligation	
Mailing Address of Payee				Amount	
City		State		Zip Code	
Name of Employer		Occupation		Communication Date	
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 (optional) ▶				50.00	
TOTAL This Period (last page this line number only) ▶ (carry total from last page to Line 10)				490036	

28039830852

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.

28039830853

<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 Delivery Confirmation™ or Signature Confirmation™ Label <input type="checkbox"/>	Postmarked
<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
	Next Business Day Delivery <input type="checkbox"/>
<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): <i>E-MAIL</i>	Date of Receipt or Postmarked <i>9/10/08</i>
<i>JMS</i> PREPARER	<i>9/10/08</i> DATE PREPARED