CBIZ FPG Business Services, Inc.
and
Mayer Hoffman McCann P.C.

175 South West Temple, Suite 650
Salt Lake City, UT 84101
Phone (801) 364-9300
Fax (801) 364-9301

FAX

Personal & Confidential

Date

TO: 10/22/04

Company: FEC

Phone

Fax Phone 202 219-0174

Number of Pages 4 (including cover)

FROM: Stan Achtel

CBIZ FPG Business Services, Inc.
and
Mayer Hoffman McCann P.C.
(801) 364-9300
(801) 364-9301

Remarks: ☐ Urgent ☐ For Your Review ☐ Reply ASAP ☐ Please Comment

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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
Save American Medicine

(b) Address (number and street) ☐ check if different than previously reported
2150 S. 1300 E. Ste 500

(c) City, State and ZIP Code
Salt Lake City UT 84105-

(d) Name of Employer or Principal Place of Business (e) Occupation

2. FEC Identification Number
C C00000000

3. Is This Statement ☒ New or ☐ Amended

4. Covering Period 10 / 21 / 2004 through 10 / 22 / 2004

5. (a) Date of Public Distribution(s) 10 / 18 / 2004 **(b) Communication Title** Save American Medicine

6. Is the Filer a Qualified Nonprofit Corporation under 11 CFR 114.10(c)? 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
Stanley R. de Waal

(b) Address (number and street)
175 South Main Street, Suite 650

(c) City, State and ZIP Code
Salt Lake City UT 84101

(d) Name of Employer or Principal Place of Business (e) Occupation
Treasurer

9. Total Donations This Statement 0.00

10. Total Disbursements/Obligations This Statement 11642.81

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 Stanley R. de Waal

SIGNATURE [signature] DATE 10/22/2004

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. 11/04)

FE3AN038

SCHEDULE 9-B
Disbursement(s) Made or Obligations

PAGE 2/3

A. Full Name (Last, First, Middle Initial) of Payee
Bully Pulpit, Inc.

Date of Disbursement or Obligation: 10 / 22 / 2004

Amount: 2597.47

Communication Date: M M / D D / Y Y Y Y

Transaction ID: 1022200449E30

Mailing Address of Payee
4700 South 900 East, Ste. 30

City	State	Zip Code
Salt Lake City	UT	84107-

Name of Employer | Occupation

Purpose of Disbursement (including title(s) of communication(s))
REIMBURSEMENT FOR TRAVEL

Name of Federal Candidate: John Edwards
Office Sought: Vice President
House / Senate / President
State: District:
Disbursement/Obligation For: 2004 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
ElectionMail Technologies, Inc.

Date of Disbursement or Obligation: 10 / 22 / 2004

Amount: 3200.00

Communication Date: M M / D D / Y Y Y Y

Transaction ID: 1022200449E31

Mailing Address of Payee
1101 Pennsylvania Ave, Sixth Floor

City	State	Zip Code
Washington	DC	20004-2514

Name of Employer | Occupation

Purpose of Disbursement (including title(s) of communication(s))
COMPUTER SERVICES

Name of Federal Candidate: John Edwards
Office Sought: Vice President
House / Senate / President
State: District:
Disbursement/Obligation For: 2004 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) 5797.47

TOTAL This Period (last page this line number only) .....
(carry total from last page to line 10)

SCHEDULE B-B
Disbursement(s) Made or Obligations

PAGE 3/3

A. Full Name (Last, First, Middle Initial) of Payee
NewsMax Media, Inc.

Mailing Address of Payee
560 Village Blvd, Suite 270

City: West Palm Beach | State: FL | Zip Code: 33409-

Name of Employer | Occupation

Date of Disbursement or Obligation: M 10 D 22 Y 2004

Amount: 5000.00

Communication Date: M D Y

Transaction ID: 1022200449E93

Purpose of Disbursement (including title(s) of communication(s))
SAVE AMERICAN MEDICINE-ADVERTISING

Name of Federal Candidate: John Edwards
Office Sought: Vice President — House / Senate / President — State: — District:
Disbursement/Obligation For: 2004 — 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
UPS

Mailing Address of Payee
Lockbox 577

City: Carol Stream | State: IL | Zip Code: 60132-0577

Name of Employer | Occupation

Date of Disbursement or Obligation: M 10 D 22 Y 2004

Amount: 845.34

Communication Date: M D Y

Transaction ID: 1022200449E93

Purpose of Disbursement (including title(s) of communication(s))
POSTAGE

Name of Federal Candidate: John Edwards
Office Sought: Vice President — House / Senate / President — State: — District:
Disbursement/Obligation For: 2004 — 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) 5845.34

TOTAL This Period (last page this line number only) 11642.51
(carry total from last page to line 10)

FEC FORM 3 (REV 03/2003)

FE3A1038

Federal Election Commission

ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS

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☐ No Postmark	
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N/A PREPARER	N/A DATE PREPARED

(5/2004)