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
Moveon.org Voter Fund

(b) Address (number and street) ☐ check if different than previously reported
336 Bon Air Center Box 381

(c) City, State and ZIP Code
Greenbrae CA 94904

(d) Name of Employer or Principal Place of Business

(e) Occupation

2. FEC Identification Number
C C00300203

3. Is This Statement ☒ New or ☐ Amended

4. Covering Period 10 / 29 / 2004 through 10 / 28 / 2004

5. (a) Date of Public Distribution(s) 10 / 29 / 2004 **(b) Communication Title** Burgers

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
Neil Reiff

(b) Address (number and street)
50 E Street, SE Suite 300

(c) City, State and ZIP Code
Washington DC 20003

(d) Name of Employer or Principal Place of Business
Sandler, Reiff & Young, PC

(e) Occupation
Attorney

9. Total Donations This Statement 225000.00

10. Total Disbursements/Obligations This Statement 88046.58

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 Neil Reiff

SIGNATURE

DATE 10/29/2004

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

List of Person(s) Sharing/Exercising Control

(use additional pages as necessary)

11. Person(s) Sharing/Exercising Control

A. (a) Name — Transaction ID :

Wes Boyd

(b) Address (number and street)

336 Bon Air Center Box 381

(c) City, State and Zip Code

Greenbrae CA 94904

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

Salt — Software Developer

B. (a) Name — Transaction ID :

Joan Blades

(b) Address (number and street)

336 Bon Air Center Box 381

(c) City, State and Zip Code

Greenbrae CA 94904

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

Salt — Software Developer

C. (a) Name — Transaction ID :

Peter Schlaman

(b) Address (number and street)

336 Bon Air Center Box 381

(c) City, State and Zip Code

Greenbrae CA 94904

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

Moveon.org Voter Fund — Executive Director

SCHEDULE 9-A
Donation(s) Received

A. Full Name of Donor
Steve Rattner

Mailing Address of Donor
375 Park Ave.

City	State	Zip
New York	NY	10152

Date of Receipt: M 10 D 29 Y 2004
Amount: 25000.00
Transaction ID :

B. Full Name of Donor
Bob Weinstein

Mailing Address of Donor
375 Greenwich Street

City	State	Zip
New York	NY	10013

Date of Receipt: M 10 D 29 Y 2004
Amount: 50000.00
Transaction ID :

C. Full Name of Donor
Harvey Weinstein

Mailing Address of Donor
375 Greenwich Street

City	State	Zip
New York	NY	10013

Date of Receipt: M 10 D 29 Y 2004
Amount: 50000.00
Transaction ID :

D. Full Name of Donor
Jeffrey Katzenberg

Mailing Address of Donor
11400 w. Olympic Blvd.

City	State	Zip
LA	CA	90064

Date of Receipt: M 10 D 29 Y 2004
Amount: 100000.00
Transaction ID :

SUBTOTAL of Donations This Page (optional) 225000.00

TOTAL This Period (last page this line number only) 225000.00
(carry total from last page to Line 9)

SCHEDULE 9-B
Disbursement(s) Made or Obligations

PAGE 4/4

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

Mailing Address of Payee
1580 Lincoln Street Suite 810

City: Denver State: CO Zip Code: 80203

Name of Employer: Occupation:

Date of Disbursement or Obligation: M 10 D 29 Y 2004

Amount: 87281.00

Communication Date: M 10 D 29 Y 2004

Transaction ID: SB1

Purpose of Disbursement (including title(s) of communication(s))
Advertising Purchase/Surgers

Name of Federal Candidate: George W. Bush
Office Sought: [ ] House [ ] Senate [X] President
State: DC District:
Disbursement/Obligation For: 2004 [ ] Primary [X] General [ ] Other (specify)

SB1A
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
Zimmerman & Markman, Inc.

Mailing Address of Payee
1250 6th Street Suite 350

City: Santa Monica State: CA Zip Code: 90401

Name of Employer: Occupation:

Date of Disbursement or Obligation: M 10 D 29 Y 2004

Amount: 785.95

Communication Date: M 10 D 29 Y 2004

Transaction ID: SB2

Purpose of Disbursement (including title(s) of communication(s))
Media Production/Surgers

Name of Federal Candidate: George W. Bush
Office Sought: [ ] House [ ] Senate [X] President
State: DC District:
Disbursement/Obligation For: 2004 [ ] Primary [X] General [ ] Other (specify)

SB2A
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): 88046.95

TOTAL This Period (last page this line number only) (carry total from last page to line 10): 88046.95

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.

Date of Receipt

☐ Hand Delivered

Postmarked

☐ USPS First Class Mail

Postmarked (R/C)

☐ USPS Registered/Certified

Postmarked

☐ USPS Priority Mail

Delivery Confirmation ™ Label ☐

Postmarked

☐ USPS Express Mail

☐ Postmark Illegible

☐ No Postmark

Shipping Date

☐ Overnight Delivery Service (Specify):

Date of Receipt

☐ Received from House Records & Registration Office

Date of Receipt

☐ Received from Senate Public Records Office

Date of Receipt

☐ Received from Electronic Filing Office

Date of Receipt or Postmarked

☒ Other (Specify):

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

(5/2004)