

RECEIVED
FEDERAL ELECTION
COMMISSION
PUBLIC DISCLOSURE

FEC FORM 9

24 HOUR NOTICE OF DISBURSEMENTS/OBLIGATIONS FOR ELECTIONEERING COMMUNICATIONS

2008 SEP 10 P 1:40

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

06 26 2008
through

09 09 2008

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

09 10 2008

(b) Communication Title

DON'T PLAY GAMES-TV

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

80,105.3

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

TYPE OR PRINT NAME OF PERSON COMPLETING FORM

GERALD GELER

SIGNATURE

Gerald Geler

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.

28039830892

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

11. Person(s) Sharing/Exercising Control

A. (a) Name RICHARD NADLER	
(b) Address (number and street) 8640 TRAVIS 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

28039830895

SCHEDULE 9-B

Disbursement(s) Made or Obligation(s)

28039830894

A. Full Name (Last, First, Middle Initial) of Payee WYTU		Date of Disbursement or Obligation 06 26 2008	
Mailing Address of Payee 809 S. 60TH ST		Amount 4,539.00	
City MILWAUKEE	State WI	Zip Code 53214	
Name of Employer NIA		Occupation NIA	
Purpose of Disbursement (Including title(s) of communication(s)) TV AIR TIME - DON'T PLAY GAMES-TV			
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 JAMES HOLT		Date of Disbursement or Obligation 07 02 2008	
Mailing Address of Payee 410 NE MED FORD DR		Amount 666.67	
City LEE'S SUMMIT	State MO	Zip Code 64264	
Name of Employer SELF		Occupation SELF	
Purpose of Disbursement (Including title(s) of communication(s)) VIDEO CLIP PRODUCTION - DON'T PLAY GAMES-TV			
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) ▶		5205.67	
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)

28039830895

A. Full Name (Last, First, Middle Initial) of Payee YVAN DUIN		Date of Disbursement or Obligation 09 / 01 / 2008	
Mailing Address of Payee 8322 METCALF AVE		Amount 50.00	
City OVERLAND PARK	State KS	Zip Code 66212	Communication Date 09 / 10 / 2008
Name of Employer SELF		Occupation (blank)	
Purpose of Disbursement (Including title(s) of communication(s)) ACTOR - DON'T PLAY GAMES - TV			
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 (blank)	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 (blank)	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 SCOTT FREEMAN		Date of Disbursement or Obligation 09 / 03 / 2008	
Mailing Address of Payee 185 HARRISON AVE		Amount 175.00	
City LOVELAND	State CO	Zip Code 80537	Communication Date 09 / 10 / 2008
Name of Employer SELF		Occupation (blank)	
Purpose of Disbursement (Including title(s) of communication(s)) ARTWORK - DON'T PLAY GAMES - TV			
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 (blank)	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 (blank)	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) ▶		225.00	
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)

28039830896

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 N/A		Occupation _____
Purpose of Disbursement (Including title(s) of communication(s)) AUDIO RECORDING - DON'T PLAY GAMES -TV		
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 GABY LUCAS, INC.		Date of Disbursement or Obligation 08 / 01 / 2008
Mailing Address of Payee 16160 S. HEATHER WOOD		Amount 37.50
City OLATHE	State KS	Zip Code 66062
Name of Employer N/A		Occupation _____
Purpose of Disbursement (Including title(s) of communication(s)) TRANSLATION SERVICES - DON'T PLAY GAMES -TV		
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) ▶		68.75
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 JAMES HOLT			Date of Disbursement or Obligation 08 19 2008		
Mailing Address of Payee 410 NE MEDFORD DR			Amount 2500.00		
City LEE'S SUMMIT	State MO	Zip Code 64064	Communication Date 09 10 2008		
Name of Employer SELF			Purpose of Disbursement (Including title(s) of communication(s)) ACTOR - DON'T PLAY GAMES - TV		
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 GABY LUCAS, INC.			Date of Disbursement or Obligation 08 20 2008		
Mailing Address of Payee 16160 S. HEATHERWOOD			Amount 1111		
City OLAHE	State KS	Zip Code 66062	Communication Date 09 10 2008		
Name of Employer NIA			Purpose of Disbursement (Including title(s) of communication(s)) ACTOR - DON'T PLAY GAMES - TV		
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) >			2511.11		
TOTAL This Period (last page this line number only) > (carry total from last page to Line 10)			8010.53		

28039830897

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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9/10/08

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 PREPARER

9/10/08
 DATE PREPARED

28039830898