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
Citizens For A Strong Senate

(b) Address (number and street) ☐ check if different than previously reported
P.O. Box 4008

2. FEC Identification Number
C N/A

(c) City, State and ZIP Code
Washington, DC 20044

(d) Name of Employer or Principal Place of Business
N/A

(e) Occupation
N/A

3. Is This Statement ☐ New or ☒ Amended

4. Covering Period 10 / 14 / 2004 through 10 / 28 / 2004

5. (a) Date of Public Distribution(s) 10 / 18 / 2004 (b) Communication Title Growing Up/Difference

6. Is the Filer a Qualified Nonprofit Corporation under 11 CFR 114.10? 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
Lora Haggard

(b) Address (number and street)
P.O. Box 4008

(c) City, State and ZIP Code
Washington, DC 20044

(d) Name of Employer or Principal Place of Business
Citizens For A Strong Senate

(e) Occupation
Treasurer

9. Total Donations This Statement 2000000.00

10. Total Disbursements/Obligations This Statement 177025.00

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 Lora Haggard

SIGNATURE [signature] DATE 10/28/04

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