

FEC FORM 9

24 HOUR NOTICE OF DISBURSEMENTS/OBLIGATIONS FOR ELECTIONEERING COMMUNICATIONS

1. Person Making the Disbursements/Obligations

(a) Name PATRIOT MAJORITY		2. FEC Identification Number 030001127
(b) Address (number and street) <input type="checkbox"/> check if different than previously reported 300 M STREET SE SUITE 1102		
(c) City, State and ZIP Code WASHINGTON DC 20003		
(d) Name of Employer or Principal Place of Business n/a	(e) Occupation n/a	

3. Is This Statement <input type="checkbox"/> New or <input checked="" type="checkbox"/> Amended	4. Covering Period 01 01 2007 through 09 05 2008
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5. (a) Date of Public Distribution (a) **09 04 2008** (b) Communication Title **155 BILLION PERSONS**

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: _____

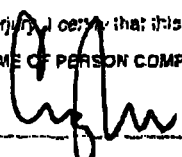
7. If the filer is an individual, unincorporated organization or qualified nonprofit corporation, were the disbursements made exclusively from donations to a segregated bank account? Yes No

8. Custodian of Records

(a) Name COAIG VAROGA	(e) Occupation PRESIDENT
(b) Address (number and street) 300 M STREET SE SUITE 1102	
(c) City, State and ZIP Code WASHINGTON, DC 20003	
(d) Name of Employer or Principal Place of Business PATRIOT MAJORITY	

9. Total Donations This Statement **215234300**

10. Total Disbursements/Obligations This Statement **70000000**

Under penalty of perjury, I certify that this statement is true, correct and complete.
 TYPE OR PRINT NAME OF PERSON COMPLETING FORM **Craig Varoga**
 SIGNATURE  DATE **6 MARCH 2009**

NOTE: Submission of false, erroneous or incomplete information may subject the person signing this statement to the penalties of 2 U.S.C. §547g.

FEC FORM 9 (REV. 12/2007)

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

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11. Person(s) Sharing/Exercising Control

A. (a) Name <u>CRAIG VAROGA</u>	
(b) Address (number and street) <u>500 M STREET SE SUITE 1102</u>	
(c) City, State and ZIP Code <u>WASHINGTON DC 20003</u>	
(d) Name of Employer or Principal Place of Business <u>PATRIOT MAJORITY</u>	(e) Occupation <u>PRESIDENT</u>
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

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SCHEDULE 9-A
Donation(s) Received

PAGE 3/5

A. Full Name of Donor Oklahoma Freedom Fund Mailing Address of Donor 211 North Robinson Avenue 12th Floor City State Zip Oklahoma City OK 73102	Date of Receipt 03 / 23 / 2007 Amount 10499.00 Transaction ID: F92.000301
B. Full Name of Donor American Affordable Health Care Mailing Address of Donor 1728 M Street, NW Suite 800 City State Zip Washington DC 20036	Date of Receipt 03 / 23 / 2007 Amount 17674.00 Transaction ID: F92.000605
C. Full Name of Donor American Federation of State County and Municipal Employees Mailing Address of Donor 1825 L Street, NW City State Zip Washington DC 20036	Date of Receipt 07 / 21 / 2008 Amount 50000.00 Transaction ID: F92.000006
D. Full Name of Donor American Federation of State County and Municipal Employees Mailing Address of Donor 1825 L Street, NW City State Zip Washington DC 20036	Date of Receipt 07 / 21 / 2008 Amount 50000.00 Transaction ID: F92.000007
E. Full Name of Donor American Federation of State County and Municipal Employees Mailing Address of Donor 1825 L Street, NW City State Zip Washington DC 20036	Date of Receipt 06 / 26 / 2008 Amount 23000.00 Transaction ID: F92.000908
SUBTOTAL of Donations This Page (optional) 1222343.00	
TOTAL This Period (last page this line number only) <small>(carry total from last page to Line 9)</small>	

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SCHEDULE 9-A
Donation(s) Received

PAGE 4/5

<p>A. Full Name of Donor Bluegrass Freedom Fund Mailing Address of Donor 303 M Street, SE Suite 1102 City State Zip Washington DC 20003</p>	<p>Date of Receipt 05 / 12 / 2008 Amount 5000.00 Transaction ID: F92.000006</p>
<p>B. Full Name of Donor Change to Win Political Education Mailing Address of Donor 1903 L Street, NW Suite 500 City State Zip Washington DC 20036</p>	<p>Date of Receipt 08 / 28 / 2008 Amount 100000.00 Transaction ID: F92.000010</p>
<p>C. Full Name of Donor Change to Win Political Education Mailing Address of Donor 1903 L Street, NW Suite 500 City State Zip Washington DC 20036</p>	<p>Date of Receipt 08 / 28 / 2008 Amount 400000.00 Transaction ID: F92.000011</p>
<p>D. Full Name of Donor United Food and Commercial Workers CLC Mailing Address of Donor 1775 K Street, NW Suite 450 City State Zip Washington DC 20036</p>	<p>Date of Receipt 08 / 15 / 2008 Amount 125000.00 Transaction ID: F92.000012</p>
<p>E. Full Name of Donor Patriot Majority West Mailing Address of Donor 303 M Street, SE Suite 1102 City State Zip Washington DC 20003</p>	<p>Date of Receipt 08 / 02 / 2008 Amount 30000.00 Transaction ID: F92.000013</p>
<p>SUBTOTAL of Donations This Page (add lines)..... 930000.00</p>	
<p>TOTAL This Period (last page this line number only)..... 2152343.00 (carry total from last page to Line 9)</p>	

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SCHEDULE A-B
Disbursement(s) Made or Obligations

PAGE 05

A. Full Name (Last, First, Middle Initial) of Payee Squa Knapp Dunn Communications				Date of Disbursement or Obligation M M ' 0 0 Y Y Y Y 0 8 ' 0 2 ' 2 0 0 8	
Mailing Address of Payee 1816 N Street, NW Suite 430				Amount 700000.00	
City Washington	State DC	Zip Code 20038		Communication Date M M ' 0 0 Y Y Y Y 0 9 ' 0 4 ' 2 0 0 8	
Name of Employer N/A		Occupation N/A		Transaction ID: P83.000001	
Purpose of Disbursement (including title(s) of communication(s)) Television Ad- 155 Eillon Reasons					
Name of Federal Candidate John Sununu	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: NH	District:	Disbursement/Obligation For: 2008 Primary <input checked="" type="checkbox"/> General	
EM4.052002					
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)				700000.00	
TOTAL This Period (last page this line number only) (carry total from last page to line 10)				700000.00	

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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.

<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)
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<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
<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):	Date of Receipt or Postmarked
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