

**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
Patriot Majority

(b) Address (number and street) 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

2. FEC Identification Number
C C00000000

3. Is This Statement **New**
or **Amended**

4. Covering Period
M M / D D / Y Y Y Y
10 / 09 / 2008
through
M M / D D / Y Y Y Y
10 / 20 / 2008

5. (a) Date of Public Distribution(s) M M / D D / Y Y Y Y **(b) Communication Title** 1) Down the Drain
10 / 20 / 2008 2) Reckless

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. Were the disbursements for the electioneering communication made exclusively from donations to a segregated bank account? Yes No

8. Custodian of Records

(a) Name
Varoga Craig

(b) Address (number and street)
300 M Street, SE

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

(d) Name of Employer or Principal Place of Business
Patriot Majority

(e) Occupation
President

9. Total Donations This Statement 1525000.00

10. Total Disbursements/Obligations This Statement 369250.00

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 Electronically Filed by Craig Varoga DATE 10/21/2008

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

28039884052

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

11. Person(s) Sharing/Exercising Control

A.	(a) Name Craig Varoga	Transaction ID : F91.000001
	(b) Address (number and street) 300 M Street, SE Suite 1102 Suite 1102	
	(c) City, State and Zip Code Washington DC 20003	
	(d) Name of Employer or Principal Place of Business Patriot Majority	(e) Occupation President

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SCHEDULE 9-A
Donation(s) Received

A. Full Name of Donor			Date of Receipt	
American Federation of State County and Municipal Employees			M	M / D D / Y Y Y Y
Mailing Address of Donor			10	17 / 2008
1625 L Street, NW			Amount	
City State Zip			1500000.00	
Washington	DC	20036	Transaction ID : F92.000001	

B. Full Name of Donor			Date of Receipt	
Patricia Bauman			M	M / D D / Y Y Y Y
Mailing Address of Donor			10	17 / 2008
Jewett House			Amount	
2040 S Street			25000.00	
City State Zip			Transaction ID : F92.000002	
Washington	DC	20009		

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SUBTOTAL of Donations This Page (optional).....	1525000.00
TOTAL This Period (last page this line number only)..... (carry total from last page to Line 9)	1525000.00

**SCHEDULE 9-B
Disbursement(s) Made or Obligations**

28039884055

A. Full Name (Last, First, Middle Initial) of Payee Adelstein Liston					Date of Disbursement or Obligation M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 8					
Mailing Address of Payee 1391 Pennsylvania Avenue, SE Suite 316					Amount 161400.00					
City Washington		State DC		Zip Code 20003		Communication Date M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 8				
Name of Employer N/A			Occupation N/A			Transaction ID : F93.000002				
Purpose of Disbursement (including title(s) of communication(s)) Television Ad - Down the Drain										
Name of Federal Candidate Gordon Smith		Office Sought: X Senate		House Senate President		State: OR District:		Disbursement/Obligation For: 2008 Primary X General		
F94.000003								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 Adelstein Liston					Date of Disbursement or Obligation M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 8					
Mailing Address of Payee 1391 Pennsylvania Avenue, SE Suite 316					Amount 8500.00					
City Washington		State DC		Zip Code 20003		Communication Date M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 8				
Name of Employer N/A			Occupation N/A			Transaction ID : F93.000003				
Purpose of Disbursement (including title(s) of communication(s)) Production Expenses - Down the Drain										
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) _____		
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)					169900.00					
TOTAL This Period (last page this line number only)					(carry total from last page to line 10)					

**SCHEDULE 9-B
Disbursement(s) Made or Obligations**

28039884056

A. Full Name (Last, First, Middle Initial) of Payee Adelstein Liston					Date of Disbursement or Obligation M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 8				
Mailing Address of Payee 1391 Pennsylvania Avenue, SE Suite 316					Amount 194650.00				
City Washington		State DC		Zip Code 20003			Communication Date M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 8		
Name of Employer N/A				Occupation N/A		Transaction ID : F93.000004			
Purpose of Disbursement (including title(s) of communication(s)) Radio Ad - Reckless									
Name of Federal Candidate John Sununu			Office Sought: X Senate		House President		State: NH		Disbursement/Obligation For: 2008 Primary X General Other (specify) _____
Name of Federal Candidate F94.000006			Office Sought:		House		State:		Disbursement/Obligation For: Primary General Other (specify) _____
Name of Federal Candidate			Office Sought:		House		State:		Disbursement/Obligation For: Primary General Other (specify) _____
Name of Federal Candidate			Office Sought:		House		State:		Disbursement/Obligation For: Primary General Other (specify) _____
Name of Federal Candidate			Office Sought:		House		State:		Disbursement/Obligation For: Primary General Other (specify) _____
B. Full Name (Last, First, Middle Initial) of Payee Adelstein Liston					Date of Disbursement or Obligation M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 8				
Mailing Address of Payee 1391 Pennsylvania Avenue, SE Suite 316					Amount 4700.00				
City Washington		State DC		Zip Code 20003			Communication Date M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 8		
Name of Employer N/A				Occupation N/A		Transaction ID : F93.000005			
Purpose of Disbursement (including title(s) of communication(s)) Production Expenses - Reckless									
Name of Federal Candidate			Office Sought:		House		State:		Disbursement/Obligation For: Primary General Other (specify) _____
Name of Federal Candidate			Office Sought:		House		State:		Disbursement/Obligation For: Primary General Other (specify) _____
Name of Federal Candidate			Office Sought:		House		State:		Disbursement/Obligation For: Primary General Other (specify) _____
Name of Federal Candidate			Office Sought:		House		State:		Disbursement/Obligation For: Primary General Other (specify) _____
SUBTOTAL of Disbursement/Obligation This Page (optional)					199350.00				
TOTAL This Period (last page this line number only)					369250.00				
(carry total from last page to line 10)									

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)
<input type="checkbox"/> USPS Priority Mail	Postmarked
Delivery Confirmation™ or Signature Confirmation™ Label <input type="checkbox"/>	
<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
Next Business Day Delivery <input type="checkbox"/>	
<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): <i>Webform # 318</i>	Date of Receipt or Postmarked <i>10/21/08</i>

[Signature] *10/22/08*
 PREPARER DATE PREPARED

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