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SENDER:	TELEPHONE:	FACSIMILE:
<i>Mark Longabaugh</i>	<i>(202) 434-1658</i>	

RECIPIENT:	COMPANY:	TELEPHONE:	FACSIMILE:
	<i>Federal Election Commission</i>		<i>(202) 219-0174</i>

RE:

25039183213

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{FAXCOVER,01}

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 Majority Action

(b) Address (number and street) check if different than previously reported
2207 Valley Circle

(c) City, State and ZIP Code
Alexandria, VA 22302

(d) Name of Employer or Principal Place of Business

(e) Occupation

2. FEC Identification Number

C 3 0 0 0 0 5 3 3

3. Is This Statement New or Amended

4. Covering Period 09 / 18 / 2006 through 09 / 18 / 2006

5. (a) Date of Public Distribution(s) 09 / 18 / 2006 (b) Communication Title Ethics/Stand

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 Mark Longabaugh

(b) Address (number and street) 2207 Valley Circle

(c) City, State and ZIP Code Alexandria, VA 22302

(d) Name of Employer or Principal Place of Business

(e) Occupation

Self-employed

Consultant

9. Total Donations This Statement 0

10. Total Disbursements/Obligations This Statement 114,000.00

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 Mark Longabaugh

SIGNATURE [Signature] DATE 9/15/06

NOTE: Submission of false, erroneous or incomplete information may subject the person signing this statement to the penalties of 2 U.S.C. §457g.

2503918321A

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

11. Person(s) Sharing/Exercising Control

A. (a) Name	
Mark Longabaugh	
(b) Address (number and street)	
2207 Valley Circle	
(c) City, State and ZIP Code	
Alexandria, VA 22302	
(d) Name of Employer or Principal Place of Business	(e) Occupation
Self-Employed	Consultant
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

26039183215

SCHEDULE 9-B

Disbursement(s) Made or Obligation(s)

A. Full Name (Last, First, Middle Initial) of Payee Squier Knapp Dunn Communications				Date of Disbursement or Obligation 09 / 14 / 2006	
Mailing Address of Payee 1818 N Street, NW, Suite 450				Amount 91,235.00	
City Washington,	State DC	Zip Code 20036		Communication Date 09 / 14 / 2006	
Name of Employer N/A		Occupation N/A			
Purpose of Disbursement (including title(s) of communication(s)) Media Buy & Production (Ethics)					
Name of Federal Candidate James Walsh	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: NY District: 25	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 Squier Knapp Dunn Communications				Date of Disbursement or Obligation 09 / 14 / 2006	
Mailing Address of Payee 1818 N Street, NW, Suite 450				Amount 22,765.00	
City Washington,	State DC	Zip Code 20036		Communication Date 09 / 14 / 2006	
Name of Employer N/A		Occupation N/A			
Purpose of Disbursement (including title(s) of communication(s)) Media Buy & Production (Stand)					
Name of Federal Candidate Dave Reichert	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: WA District: B	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)				114,000.00	
TOTAL This Period (last page this line number only) (carry total from last page to Line 10)				114,000.00	

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Federal Election Commission
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