

**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

**2. FEC Identification Number**

**C** C00000000

(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**

M M / D D / Y Y Y Y  
09 / 09 / 2008

through

M M / D D / Y Y Y Y  
09 / 19 / 2008

5. (a) Date of Public Distribution(s) <sup>M M</sup> / <sup>D D</sup> / <sup>Y Y Y Y</sup> 09 / 19 / 2008 (b) Communication Title 155 Billion Reasons

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

Craig Varoga

(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 1075000.00

10. Total Disbursements/Obligations This Statement 200000.00

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 09/20/2008

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

28039834785

**SCHEDULE 9-A**  
**Donation(s) Received**

28039834786

<p><b>A. Full Name of Donor</b>  DRIVE Committee</p> <hr/> <p>Mailing Address of Donor  25 Louisiana Avenue, NW</p> <hr/> <table border="0"> <tr> <td>City</td> <td>State</td> <td>Zip</td> </tr> <tr> <td>Washington</td> <td>DC</td> <td>20003</td> </tr> </table>	City	State	Zip	Washington	DC	20003	<p>Date of Receipt</p> <p>M M / D D / Y Y Y Y  09 / 09 / 2008</p> <p>Amount  125000.00</p> <p>Transction ID : F92.000001</p>
City	State	Zip					
Washington	DC	20003					
<p><b>B. Full Name of Donor</b>  Change to Win Political Education</p> <hr/> <p>Mailing Address of Donor  1900 L Street, NW  Suite 900</p> <hr/> <table border="0"> <tr> <td>City</td> <td>State</td> <td>Zip</td> </tr> <tr> <td>washington</td> <td>DC</td> <td>20036</td> </tr> </table>	City	State	Zip	washington	DC	20036	<p>Date of Receipt</p> <p>M M / D D / Y Y Y Y  09 / 12 / 2008</p> <p>Amount  300000.00</p> <p>Transction ID : F92.000002</p>
City	State	Zip					
washington	DC	20036					
<p><b>C. Full Name of Donor</b>  Service Employees International Union</p> <hr/> <p>Mailing Address of Donor  1800 Massachusetts Avenue, NW</p> <hr/> <table border="0"> <tr> <td>City</td> <td>State</td> <td>Zip</td> </tr> <tr> <td>Washington</td> <td>DC</td> <td>20036</td> </tr> </table>	City	State	Zip	Washington	DC	20036	<p>Date of Receipt</p> <p>M M / D D / Y Y Y Y  09 / 19 / 2008</p> <p>Amount  600000.00</p> <p>Transction ID : F92.000003</p>
City	State	Zip					
Washington	DC	20036					
<p><b>D. Full Name of Donor</b>  American Federation of State County and Municipal Employees</p> <hr/> <p>Mailing Address of Donor  1625 L Street, NW</p> <hr/> <table border="0"> <tr> <td>City</td> <td>State</td> <td>Zip</td> </tr> <tr> <td>Wash</td> <td>DC</td> <td>20036</td> </tr> </table>	City	State	Zip	Wash	DC	20036	<p>Date of Receipt</p> <p>M M / D D / Y Y Y Y  09 / 19 / 2008</p> <p>Amount  50000.00</p> <p>Transction ID : F92.000004</p>
City	State	Zip					
Wash	DC	20036					
<p><b>SUBTOTAL</b> of Donations This Page (optional)..... <b>1075000.00</b></p>							
<p><b>TOTAL</b> This Period (last page this line number only)..... <b>1075000.00</b>  (carry total from last page to Line 9)</p>							

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

<b>A. Full Name (Last, First, Middle Initial) of Payee</b> Squire Knapp Dunn Communications				<b>Date of Disbursement or Obligation</b> M M / D D / Y Y Y Y 09 / 17 / 2008			
Mailing Address of Payee 1818 N Street, NW Suite 450				Amount 200000.00			
City	State	Zip Code		Communication Date			
Washington	DC	20036		M M / D D / Y Y Y Y 09 / 19 / 2008			
Name of Employer N/A		Occupation N/A		Transaction ID : F93.000001			
Purpose of Disbursement (including title(s) of communication(s)) Television Ad - 155 Billion Reasons							
Name of Federal Candidate John Sununu	Office Sought: X	House Senate President	State: District:	NH	Disbursement/Obligation For: 2008 Primary X General Other (specify) _____		
F94.000002							
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>SUBTOTAL</b> of Disbursement/Obligation This Page (optional) .....					200000.00		
<b>TOTAL</b> This Period (last page this line number only) ..... (carry total from last page to line 10)					200000.00		

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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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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 #265</i>	Date of Receipt or Postmarked <i>9/20/08</i>

*EW*  
 PREPARER  
 (3/2005)

*9/22/08*  
 DATE PREPARED

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