FEC FORM 9

24 HOUR NOTICE OF DISBURSEMENTS/OBLIGATIONS FOR ELECTIONEERING COMMUNICATIONS

1. Person Making the Disbursements/Obligations

(a) Name
PATRIOT MAJORITY

(b) Address (number and street) ☐ check if different than previously reported
200 M STREET SE SUITE 102

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

2. FEC Identification Number
C30001129

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

(e) Occupation
N/A

3. Is This Statement X New or Amended

4. Covering Period 01/01/2009 through 05/11/2010

5. (a) Date of Public Distribution(s) 05/12/2010 (b) Communication Title [illegible]

6. The filer is a(n): (a) Individual (b) X 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 X

8. Custodian of Records

(a) Name
CRAIG VARGA

(b) Address (number and street)
200 M STREET SE SUITE 102

(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 993,750.00

10. Total Disbursements/Obligations This Statement [illegible]

Under penalty of perjury, I certify that this statement is true, correct and complete.

TYPE OR PRINT NAME OF PERSON COMPLETING FORM CRAIG VARGA

SIGNATURE [signature] DATE 11 May 2010

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

FEC FORM 9 (REV. 12/2007)

10030249209

SCHEDULE 9-B
Disbursement(s) Made or Obligation(s)

PAGE / OF /

A. Full Name (Last, First, Middle Initial) of Payee: MEDIA STRATEGIES + RESEARCH

Mailing Address of Payee: 1580 LINCOLN STREET SUITE 510

City: DENVER State: CO Zip Code: 80203

Name of Employer: N/A Occupation: N/A

Date of Disbursement or Obligation: 05 07 2010

Amount: 125,000.00

Communication Date: 05 10 2010

Purpose of Disbursement (Including title(s) of communication(s)): TV MEDIA BUY - "[illegible]"

Name of Federal Candidate: SUE LOWDEN
Office Sought: [ ] House [X] Senate [ ] President
State: NV District: ——
Disbursement/Obligation For: [X] 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) ▶

B. Full Name (Last, First, Middle Initial) of Payee: ADELSTEIN LISTON

Mailing Address of Payee: 1291 PENNSYLVANIA AVENUE SE SUITE 316

City: WASHINGTON State: DC Zip Code: 20003

Name of Employer: N/A Occupation: N/A

Date of Disbursement or Obligation: 05 07 2010

Amount: [illegible]

Communication Date: 05 10 2010

Purpose of Disbursement (Including title(s) of communication(s)): PRODUCTION EXPENSES - "[illegible]"

Name of Federal Candidate: SUE LOWDEN
Office Sought: [ ] House [X] Senate [ ] President
State: NV District: ——
Disbursement/Obligation For: [X] 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 Disbursements/Obligations This Page (optional) ▶ [illegible]

TOTAL This Period (last page this line number only) ▶ [illegible]
(carry total from last page to Line 10)

10002024820

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

11. Person(s) Sharing/Exercising Control

A. (a) Name
CRAIG VAROGA
(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
(e) Occupation: PRESIDENT

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

SCHEDULE 9-A
Donation(s) Received

PAGE 1 OF

A. Full Name of Donor: 1199 SEIU Mailing Address of Donor: PO BOX 2012 City: NEW YORK State: NY Zip: 10003	Date of Receipt: 07 22 2009 Amount: 35,125.00
B. Full Name of Donor: IRONWORKERS POLITICAL EDUCATION FUND Mailing Address of Donor: 1750 NEW YORK AVENUE, NW City: WASHINGTON State: DC Zip: 20006	Date of Receipt: 08 05 2009 Amount: 25,000.00
C. Full Name of Donor: SHEET METAL WORKERS POLITICAL EDUCATION FUND Mailing Address of Donor: 1750 NEW YORK AVE, NW SUITE 600 City: WASHINGTON State: DC Zip: 20006	Date of Receipt: 08 05 2009 Amount: 40,000.00
D. Full Name of Donor: SHEET METAL WORKERS POLITICAL ACTION FEDERAL Mailing Address of Donor: 1750 NEW YORK AVE NW SUITE 600 City: WASHINGTON State: DC Zip: 20006	Date of Receipt: 08 05 2009 Amount: 60,000.00
E. Full Name of Donor: UNITEMIZED CONTRIBUTIONS Mailing Address of Donor: 300M STREET, SE SUITE 1162 City: WASHINGTON State: DC Zip: 20003	Date of Receipt: 07 08 2009 Amount: 125.00

SUBTOTAL of Donations This Page (optional) ..... ▶ 160,250.00

TOTAL This Period (last page this line number only) ..... ▶
(carry total from last page to Line 9)

SCHEDULE 9-A
Donation(s) Received

PAGE 2 OF

A. Full Name of Donor: DRIVE COMMITTEE Mailing Address of Donor: 25 LOUISIANA AVENUE, NW City: WASHINGTON State: DC Zip: 20001	Date of Receipt: 09 18 2009 Amount: 2500000	
B. Full Name of Donor: SEPT METAL WORKER POLITICAL EDUCATION FUND Mailing Address of Donor: 1750 NEW YORK AVENUE, NW SUITE 600 City: WASHINGTON State: DC Zip: 20006	Date of Receipt: 09 29 2009 Amount: -2500000 [REFUND]	
C. Full Name of Donor: 1199 SEIU Mailing Address of Donor: PO BOX 2612 City: NEW YORK State: NY Zip: 10108	Date of Receipt: 10 07 2009 Amount: 200000.00	
D. Full Name of Donor: EASTERN MASS. BRICKLAYERS COMMITTEE Mailing Address of Donor: 550 MEDFORD STREET City: BOSTON State: MA Zip: 02129	Date of Receipt: 10 14 2009 Amount: 500000	
E. Full Name of Donor: NEW ENGLAND REGIONAL COUNCIL OF CARPENTERS Mailing Address of Donor: 803 SUMMER STREET 4TH FLOOR City: BOSTON State: MA Zip: 02127	Date of Receipt: 10 30 2009 Amount: 10000.00	

SUBTOTAL of Donations This Page (optional) ▶ 215000.00

TOTAL This Period (last page this line number only) ▶
(carry total from last page to Line 9)

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10030324833

SCHEDULE 9-A
Donation(s) Received

PAGE 3 OF

A. Full Name of Donor: IBEW Local 103 PAC Mailing Address of Donor: 256 Freeport Street City: Dorchester State: MA Zip: 02122	Date of Receipt: 11 04 2009 Amount: 10,000.00	
B. Full Name of Donor: Sheet Metal Workers Local 17 Mailing Address of Donor: 1157 Adams Street 1st Floor City: Dorchester State: MA Zip: 02122	Date of Receipt: 11 04 2009 Amount: 500.00	
C. Full Name of Donor: Elevator Constructors Local 4 Pooled Action Comm. Mailing Address of Donor: 50 Park Street City: Dorchester State: MA Zip: 02122	Date of Receipt: 11 16 2009 Amount: 10,000.00	
D. Full Name of Donor: Zuffa LLC Mailing Address of Donor: PO Box 26959 City: Las Vegas State: NV Zip: 89126	Date of Receipt: 11 24 2009 Amount: 75,000.00	
E. Full Name of Donor: NEA Fund for Children & Public Education Mailing Address of Donor: 1201 16th Street, NW City: Washington State: DC Zip: 20036	Date of Receipt: 01 13 2010 Amount: 40,000.00	

SUBTOTAL of Donations This Page (optional) ▶ 131,000.00

TOTAL This Period (last page this line number only) ▶
(carry total from last page to Line 9)

SCHEDULE 9-A
Donation(s) Received

PAGE 5 OF

A. Full Name of Donor	Date of Receipt

SCHEDULE 9-A
Donation(s) Received

PAGE 4 OF

A. Full Name of Donor: HALLIBURTON COMPANY Mailing Address of Donor: ONE CAESAR'S PALACE DRIVE City: LAS VEGAS State: NV Zip: 89119	Date of Receipt: 04/15/2010 Amount: 37500.00
B. Full Name of Donor: MERMONT USA LIMITED Mailing Address of Donor: 1700 LINCOLN STREET SUITE 3600 City: DENVER State: CO Zip: 80203	Date of Receipt: 04/19/2010 Amount: 35000.00
C. Full Name of Donor: MERMONT USA LIMITED Mailing Address of Donor: 1700 LINCOLN STREET SUITE 3600 City: DENVER State: CO Zip: 80203	Date of Receipt: 04/19/2010 Amount: 40000.00
D. Full Name of Donor: AFSCME Mailing Address of Donor: 1625 L STREET NW City: WASHINGTON State: DC Zip: 20036	Date of Receipt: 04/15/2010 Amount: 100000.00
E. Full Name of Donor: AFSCME Mailing Address of Donor: 1625 L STREET, NW City: WASHINGTON State: DC Zip: 20036	Date of Receipt: 04/15/2010 Amount: 60000.00
SUBTOTAL of Donations This Page (optional) ▶	262500.00
TOTAL This Period (last page this line number only) ▶ (carry total from last page to Line 9)	

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.

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☐ No Postmark	
☐ Overnight Delivery Service (Specify):	Shipping Date
☐ Received from House Records & Registration Office	Date of Receipt
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N/A PREPARER	N/A DATE PREPARED

(5/2004)

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