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)

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