

# 24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

NAME OF COMMITTEE (In Full) Liberty Action PAC		FEC IDENTIFICATION NUMBER <span style="border: 1px solid black; padding: 2px;">C</span> C00508598	
Check If <input checked="" type="checkbox"/> 24-hour report		<input type="checkbox"/> 48-hour report	
<input type="checkbox"/> New report		<input checked="" type="checkbox"/> Amends report filed on	
	MM	DD	YYYY
	11	06	2012

Full Name (Last, First, Middle Initial) of Payee <b>Synergy Direct Marketing Solutions, LLC</b>			Date <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 11 / 05 / 2012		
Mailing Address 480 W. Tuscarawas Ave.			Amount <span style="border: 1px solid black; padding: 2px; float: right;">8768.78</span>		
City Barberton	State OH	Zip Code 44203	Transaction ID : SE.4187		
Purpose of Expenditure telemarketing to potential voters		Category/ Type	Office Sought:		State: _____
			<input type="checkbox"/> House		District: _____
			<input type="checkbox"/> Senate		
			<input checked="" type="checkbox"/> President		
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA			Check One:		<input type="checkbox"/> Support
			<input checked="" type="checkbox"/> Oppose		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px; float: right;">106500.74</span>			Disbursement For:		
			<input type="checkbox"/> Primary		<input checked="" type="checkbox"/> General
			<input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) of Payee			Date <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span>		
Mailing Address			Amount <span style="border: 1px solid black; padding: 2px; float: right;"></span>		
City	State	Zip Code	Office Sought:		
			<input type="checkbox"/> House		State: _____
			<input type="checkbox"/> Senate		District: _____
			<input type="checkbox"/> President		
Name of Federal Candidate Supported or Opposed by Expenditure:			Check One:		<input type="checkbox"/> Support
			<input type="checkbox"/> Oppose		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px; float: right;"></span>			Disbursement For:		
			<input type="checkbox"/> Primary		<input type="checkbox"/> General
			<input type="checkbox"/> Other (specify)		

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures.....	8768.78
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures .....	_____
<b>(c) TOTAL</b> Independent Expenditures.....	8768.78

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Signature Mr. Deryl Madison Edwards [Electronically Filed] Date
MM / DD / YYYY
11 / 30 / 2012