24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

Schedule E)	FOR SE OF FORM 24/48					
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼					
Tea Party Patriots Citizens Fund						
	C C00540898					
Check if X 24-hour report 48-hour report New report Amends report filed on						
Full Name of Payee	Date of Public Distribution/Dissemination					
Active Engagement LLC	05 06 2014					
Mailing Address 44084 Riverside Parkway	Amount					
Ste. 350						
City State Zip Code	500.00					
Lansdowne VA 20176	Transaction ID : SE.243293 Date of Disbursement or Obligation					
Purpose of Expenditure Creative Fees Category/ Type 001	05 28 7 2014					
Name of Federal Candidate Support Office	e Sought: House District: 00					
Samuel Clovis Oppose	President State: IA					
Calendar Year-To-Date Per Election for Office Sought Disbut 2014	ursement For:					
Full Name of Payee Active Engagement LLC	Date of Public Distribution/Dissemination					
Mailing Address 44084 Riverside Parkway	05 06 2014					
Ste. 350	Amount					
City State Zip Code	60.00					
Lansdowne VA 20176	Transaction ID : SE.243294 Date of Disbursement or Obligation					
Purpose of Expenditure Category/ Category/	M M / D D / Y Y Y Y					
Web Content Type 001	05 28 2014					
Name of Federal Candidate Support Offic	e Sought: House District: 00					
Samuel Clovis Oppose	President State: IA					
Calendar Year-To-Date Per Election for Office Sought Disb 2014	ursement For:					
(a) SUBTOTAL of Itemized Independent Expenditures	560.00					
(b) SUBTOTAL of Unitemized Independent Expenditures						
(c) TOTAL Independent Expenditures						
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.						
2 4.10	M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y					
Signature						

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule	E)	INT EXPEND	HOHES		PAGE 2 OF 2 FOR SE OF FORM 24/48	
	OMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼	
rea Par	ty Patriots Citizens Fund				C C00540898	
Check if X 24-hour report 48-hour report New report Amends report filed on						
Full Nam	ne of Payee			Date	e of Public Distribution/Dissemination	
[MEMO					05 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
Mailing A	Address 2295 Towne Lake Pkwy. Ste. 11	6-328		Amo	punt	
City		State	Zip Code		500.00	
Woodst		GA	30189		nsaction ID : SE.259928 e of Disbursement or Obligation	
Purpose Script W	of Expenditure /riting		Category/ Type 001		05 30 / 2014	
Name of	Federal Candidate		Support	Office Sou	ght: House District: 00	
Samuel	Clovis		Oppose	Pres	ident State: IA	
	endar Year-To-Date Election for Office Sought		57060.00	Disburseme 2014	ent For:	
Full Nan	ne of Payee			Dat	e of Public Distribution/Dissemination	
Mailing /	Address			Am	ount	
City		State	Zip Code			
				Dat	e of Disbursement or Obligation	
Purpose	of Expenditure		Category/ Type		M = M / D = D / Y = Y = Y	
Name o	Federal Candidate		Support	Office Sou	ght: House District:	
			Oppose	Pres	ident Senate State:	
	endar Year-To-Date Election for Office Sought	-,,		Disbursem	ent For:	
(a) SUBT	OTAL of Itemized Independent Expendit	ures			0.00	
(b) SUBT	OTAL of Unitemized Independent Expen	ditures		·· •	7 7	
(c) TOTA	L Independent Expenditures			•	560.00	
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.						
Signat	Mr. Paul A Kilgore	[Electron	cically Filed] Date	e 05	30 2014	
J						