

# 24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES (SCHEDULE E)

PAGE 1 OF 8  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>FREEDOMWORKS FOR AMERICA</b>		FEC IDENTIFICATION NUMBER <b>C</b> C00499020
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		MM / DD / YYYY

Full Name (Last, First, Middle Initial) of Payee <b>Adcoprint.com</b>		Date MM / DD / YYYY 10 / 09 / 2012
Mailing Address 8412 Sabal Industrial Blvd.		Amount 915.10
City Tampa	State FL	Zip Code 33619
Purpose of Expenditure IE-Mack-Yard Signs	Category/Type 004	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: CONNIE MACK		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 1249769.05		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Transaction ID : SE.85264

Full Name (Last, First, Middle Initial) of Payee <b>Adcoprint.com</b>		Date MM / DD / YYYY 10 / 11 / 2012
Mailing Address 8412 Sabal Industrial Blvd.		Amount 5778.00
City Tampa	State FL	Zip Code 33619
Purpose of Expenditure IE-Mack-Door Hangers/Palm Cards	Category/Type 004	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: CONNIE MACK		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 1255672.53		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Transaction ID : SE.85261

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	6693.10
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> 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.

*Ryan Hecker*  
Signature

[Electronically Filed]

Date MM / DD / YYYY  
10 / 14 / 2012

# 24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES (SCHEDULE E)

NAME OF COMMITTEE (In Full) <b>FREEDOMWORKS FOR AMERICA</b>		FEC IDENTIFICATION NUMBER <b>C</b> C00499020
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		MM / DD / YYYY

Full Name (Last, First, Middle Initial) of Payee <b>Adcoprint.com</b>		Date MM / DD / YYYY <b>10 / 11 / 2012</b>
Mailing Address <b>8412 Sabal Industrial Blvd.</b>		Amount <b>422.50</b>
City <b>Tampa</b>	State <b>FL</b>	Zip Code <b>33619</b>
Purpose of Expenditure <b>IE-Mack-Yard Sign-Shipping</b>	Category/Type <b>004</b>	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: <b>FL</b> District: <b>00</b>
Name of Federal Candidate Supported or Opposed by Expenditure: <b>CONNIE MACK</b>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <b>1256095.03</b>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Transaction ID : SE.85267

Full Name (Last, First, Middle Initial) of Payee <b>Connection Strategy</b>		Date MM / DD / YYYY <b>09 / 30 / 2012</b>
Mailing Address <b>12841 Braemar Village Plz., #51</b>		Amount <b>412.79</b>
City <b>Bristow</b>	State <b>VA</b>	Zip Code <b>20136</b>
Purpose of Expenditure <b>IE-Mandel-Walk Lists</b>	Category/Type <b>004</b>	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: <b>OH</b> District: <b>00</b>
Name of Federal Candidate Supported or Opposed by Expenditure: <b>JOSH MANDEL</b>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <b>964985.46</b>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Transaction ID : SE.85272

(a) SUBTOTAL of Itemized Independent Expenditures.....	<b>835.29</b>
(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.

*Ryan Hecker*  
Signature

[Electronically Filed] Date **10 / 14 / 2012**

# 24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES (SCHEDULE E)

NAME OF COMMITTEE (In Full) <b>FREEDOMWORKS FOR AMERICA</b>	<b>FEC IDENTIFICATION NUMBER</b> ▼ <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 1.5em; font-weight: bold; border: 1px solid black;">C</span> C00499020         </div>
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: flex; justify-content: space-around; margin-left: 20px;"> <div style="border: 1px solid black; padding: 2px;">M M M /</div> <div style="border: 1px solid black; padding: 2px;">D D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	

Full Name (Last, First, Middle Initial) of Payee <b>Freedomworks</b>		Date <div style="border: 1px solid black; padding: 2px;">M M M / D D D / Y Y Y Y Y Y 10 / 09 / 2012</div>
Mailing Address 400 N CAPITOL STREET NW SUITE 765		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">28.35</div>
City Washington	State DC	
Zip Code 20001	<b>Transaction ID : SE.85260</b>	
Purpose of Expenditure IE-Mack-Travel	Category/ Type <div style="border: 1px solid black; padding: 2px;">002</div>	Office Sought: <input type="checkbox"/> House State: FL <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: CONNIE MACK		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">1248629.29</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee <b>Freedomworks</b>		Date <div style="border: 1px solid black; padding: 2px;">M M M / D D D / Y Y Y Y Y Y 10 / 09 / 2012</div>
Mailing Address 400 N CAPITOL STREET NW SUITE 765		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">224.66</div>
City Washington	State DC	
Zip Code 20001	<b>Transaction ID : SE.85262</b>	
Purpose of Expenditure IE-Mack-Travel	Category/ Type <div style="border: 1px solid black; padding: 2px;">002</div>	Office Sought: <input type="checkbox"/> House State: FL <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: CONNIE MACK		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">1248853.95</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; text-align: right;">253.01</div>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
(c) <b>TOTAL</b> Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>

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.

*Ryan Hecker*
[Electronically Filed]
Date 

M M M / D D D / Y Y Y Y Y Y  
10 / 14 / 2012

Signature \_\_\_\_\_

# 24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES (SCHEDULE E)

NAME OF COMMITTEE (In Full) <b>FREEDOMWORKS FOR AMERICA</b>		FEC IDENTIFICATION NUMBER <b>C</b> C00499020
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		MM / DD / YYYY

Full Name (Last, First, Middle Initial) of Payee <b>Freedomworks</b>		Date MM / DD / YYYY 10 / 09 / 2012
Mailing Address 400 N CAPITOL STREET NW SUITE 765		Amount 125.48
City Washington State DC Zip Code 20001	Transaction ID : SE.85263	
Purpose of Expenditure IE-Mack-Travel	Category/Type 002	Office Sought: <input type="checkbox"/> House State: FL <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: CONNIE MACK		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 1249894.53		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee <b>Freedomworks</b>		Date MM / DD / YYYY 10 / 12 / 2012
Mailing Address 400 N CAPITOL STREET NW SUITE 765		Amount 4450.00
City Washington State DC Zip Code 20001	Transaction ID : SE.85268	
Purpose of Expenditure IE-Mack-Est. Staff & Overhead	Category/Type 001	Office Sought: <input type="checkbox"/> House State: FL <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: CONNIE MACK		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 1263670.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures.....	4575.48
(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.

*Ryan Hecker*  
Signature \_\_\_\_\_ [Electronically Filed] Date MM / DD / YYYY  
10 / 14 / 2012

# 24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES (SCHEDULE E)

NAME OF COMMITTEE (In Full) <b>FREEDOMWORKS FOR AMERICA</b>	<b>FEC IDENTIFICATION NUMBER</b> ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="font-size: 1.2em; font-weight: bold;">C</span> C00499020       </div>
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee <b>Freedomworks</b>		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="font-size: 0.8em;">M M / D D / Y Y Y Y Y Y</span>          10 / 12 / 2012       </div>
Mailing Address 400 N CAPITOL STREET NW SUITE 765		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> <span style="font-size: 0.8em;">M M M M . C C C C</span>          1070.00       </div>
City Washington State DC Zip Code 20001	<b>Transaction ID : SE.85275</b>	
Purpose of Expenditure IE-Mandel-Est. Staff & Overhead	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: JOSH MANDEL		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> <span style="font-size: 0.8em;">M M M M . C C C C</span>          1181156.29       </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee <b>Hughie's</b>		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="font-size: 0.8em;">M M / D D / Y Y Y Y Y Y</span>          10 / 12 / 2012       </div>	
Mailing Address 1260 E. 38th St.		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> <span style="font-size: 0.8em;">M M M M . C C C C</span>          269.38       </div>	
City Cleveland State OH Zip Code 44114		<b>Transaction ID : SE.85273</b>	
Purpose of Expenditure IE-Mandel-Equipment Rental	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: JOSH MANDEL		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> <span style="font-size: 0.8em;">M M M M . C C C C</span>          1179557.33       </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> <span style="font-size: 0.8em;">M M M M . C C C C</span>          1339.38       </div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> <span style="font-size: 0.8em;">M M M M . C C C C</span> </div>
<b>(c) TOTAL</b> Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> <span style="font-size: 0.8em;">M M M M . C C C C</span> </div>

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.

*Ryan Hecker*  
 Signature [Electronically Filed] Date 

M M / D D / Y Y Y Y Y Y  
 10 / 14 / 2012

# 24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES (SCHEDULE E)

NAME OF COMMITTEE (In Full) <b>FREEDOMWORKS FOR AMERICA</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 24px; font-weight: bold; border: 1px solid black;">C</span> C00499020       </div>
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee <b>Odd Lamps Productions LLC</b>		Date <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 24px; font-weight: bold;">M M</span> / <span style="font-size: 24px; font-weight: bold;">D D</span> / <span style="font-size: 24px; font-weight: bold;">Y Y Y Y</span>          10 / 12 / 2012       </div>
Mailing Address 12076 92nd Ave., N		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> <span style="font-size: 24px; font-weight: bold;">1562.50</span> </div>
City State Zip Code Maple Grove MN 55369	<b>Transaction ID : SE.85265</b>	
Purpose of Expenditure IE-Nelson-Video Production	Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>	Office Sought: <input type="checkbox"/> House State: FL <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;"> <span style="font-size: 24px; font-weight: bold;">1257657.53</span> </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee <b>Odd Lamps Productions LLC</b>		Date <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 24px; font-weight: bold;">M M</span> / <span style="font-size: 24px; font-weight: bold;">D D</span> / <span style="font-size: 24px; font-weight: bold;">Y Y Y Y</span>          10 / 12 / 2012       </div>
Mailing Address 12076 92nd Ave., N		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> <span style="font-size: 24px; font-weight: bold;">1562.50</span> </div>
City State Zip Code Maple Grove MN 55369		<b>Transaction ID : SE.85266</b>
Purpose of Expenditure IE-Mack-Video Production	Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>	Office Sought: <input type="checkbox"/> House State: FL <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: CONNIE MACK		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;"> <span style="font-size: 24px; font-weight: bold;">1259220.03</span> </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; text-align: right;"> <span style="font-size: 24px; font-weight: bold;">3125.00</span> </div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; text-align: right;"> <span style="font-size: 24px; font-weight: bold;">0.00</span> </div>
<b>(c) TOTAL</b> Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; text-align: right;"> <span style="font-size: 24px; font-weight: bold;">3125.00</span> </div>

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.

*Ryan Hecker*  
 Signature [Electronically Filed] Date 

M M / D D / Y Y Y Y  
 10 / 14 / 2012

# 24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES (SCHEDULE E)

NAME OF COMMITTEE (In Full) <b>FREEDOMWORKS FOR AMERICA</b>	<b>FEC IDENTIFICATION NUMBER</b> ▼ <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 1.5em; font-weight: bold; border: 1px solid black; display: inline-block; width: 20px; height: 20px; text-align: center; vertical-align: middle;">C</span> <span style="margin-left: 5px;">C00499020</span> </div>
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="float: right; margin-left: 20px;"> <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 40px; text-align: center;">M M /</div> <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 40px; text-align: center;">D D /</div> <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 80px; text-align: center;">Y Y Y Y Y Y</div> </div>	

Full Name (Last, First, Middle Initial) of Payee <b>Odd Lamps Productions LLC</b>		Date <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 40px; text-align: center;">10 /</div> <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 40px; text-align: center;">12 /</div> <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 80px; text-align: center;">2012</div>
Mailing Address 12076 92nd Ave., N		Amount <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">6250.00</div>
City State Zip Code Maple Grove MN 55369	<b>Transaction ID : SE.85269</b>	
Purpose of Expenditure IE-Brown-Video Production	Category/Type <div style="border: 1px solid black; padding: 2px; width: 40px; text-align: center;">004</div>	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: SHERROD BROWN		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">1179287.95</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee <b>Odd Lamps Productions LLC</b>		Date <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 40px; text-align: center;">10 /</div> <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 40px; text-align: center;">12 /</div> <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 80px; text-align: center;">2012</div>
Mailing Address 12076 92nd Ave., N		Amount <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">6250.00</div>
City State Zip Code Maple Grove MN 55369		<b>Transaction ID : SE.85271</b>
Purpose of Expenditure IE-Mandel-Video Production	Category/Type <div style="border: 1px solid black; padding: 2px; width: 40px; text-align: center;">004</div>	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: JOSH MANDEL		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">1187406.29</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">12500.00</div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures .....▶	<div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;"> </div>
<b>(c) TOTAL</b> Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;"> </div>

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.

*Ryan Hecker*  
 Signature [Electronically Filed] Date

10 /

14 /

2012

# 24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES (SCHEDULE E)

NAME OF COMMITTEE (In Full) <b>FREEDOMWORKS FOR AMERICA</b>	<b>FEC IDENTIFICATION NUMBER</b> ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="font-size: 1.2em; font-weight: bold;">C</span> C00499020         </div>
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="float: right; margin-left: 20px;"> <div style="border: 1px solid black; padding: 2px; display: inline-block;">M M / D D / Y Y Y Y Y Y</div> </div>	

Full Name (Last, First, Middle Initial) of Payee <b>Synergy Direct Marketing Solutions</b>		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <div style="border: 1px solid black; padding: 2px; display: inline-block;">M M / D D / Y Y Y Y Y Y</div> </div>
Mailing Address 440 Cell Ct.		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <div style="border: 1px solid black; padding: 2px; display: inline-block;">528.96</div> </div>
City State Zip Code Nokomis FL 34275	Purpose of Expenditure IE-Mandel-Robo Calls	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>
Name of Federal Candidate Supported or Opposed by Expenditure: JOSH MANDEL		Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <div style="border: 1px solid black; padding: 2px; display: inline-block;">1180086.29</div> </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Transaction ID : SE.85274

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

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> <div style="border: 1px solid black; padding: 2px; display: inline-block;">528.96</div> </div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div> </div>
<b>(c) TOTAL</b> Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> <div style="border: 1px solid black; padding: 2px; display: inline-block;">29850.22</div> </div>

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.

*Ryan Hecker*
[Electronically Filed]
Date 

M M / D D / Y Y Y Y Y Y

 10 / 14 / 2012

Signature