

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.   
**FREEDOMWORKS FOR AMERICA**

ADDRESS (number and street)   
 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲  
 3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

4. TYPE OF REPORT (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report (Q1)  
 July 15 Quarterly Report (Q2)  
 October 15 Quarterly Report (Q3)  
 January 31 Year-End Report (YE)  
 July 31 Mid-Year Report (Non-election Year Only) (MY)  
 Termination Report (TER)  
(b) Monthly Report Due On:  
 Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)  
(c) 12-Day PRE-Election Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12S)  
Election on  /  /  in the State of   
(d) 30-Day POST-Election Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on  /  /  in the State of

5. Covering Period  /  /  through  /  /

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.  
Type or Print Name of Treasurer R. Russ Walker

Signature of Treasurer R. Russ Walker [Electronically Filed] Date  /  /

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

**FREEDOMWORKS FOR AMERICA**

Report Covering the Period: From:  /  /  To:  /  /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2014"/>	<input type="text" value="595214.29"/>	<input type="text" value="595214.29"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="392507.50"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="374361.31"/>	<input type="text" value="2110039.78"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="766868.81"/>	<input type="text" value="2705254.07"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="318760.65"/>	<input type="text" value="2257145.91"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="448108.16"/>	<input type="text" value="448108.16"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

**For further information contact:**

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

**FREEDOMWORKS FOR AMERICA**

Report Covering the Period: From:  /  /  To:  /  /

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	267987.71	1236460.71
(ii) Unitemized .....	104529.72	737234.25
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	372517.43	1973694.96
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	372517.43	1973694.96
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	1843.88	136344.82
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	374361.31	2110039.78
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	374361.31	2110039.78

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	96884.55	966468.75
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	96884.55	966468.75
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E) .....	221876.10	1287604.90
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	135.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	135.00
29. Other Disbursements .....	0.00	2937.26
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	318760.65	2257145.91
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	318760.65	2257145.91

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	372517.43	1973694.96
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	135.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	372517.43	1973559.96
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	96884.55	966468.75
37. Offsets to Operating Expenditures (from Line 15, page 3).....	1843.88	136344.82
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	95040.67	830123.93

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 195  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**FREEDOMWORKS FOR AMERICA**

Full Name (Last, First, Middle Initial)  
**A. Florian Aberle**

Mailing Address 1832 Bonn Blvd

City Bismarck      State ND      Zip Code 58502

FEC ID number of contributing federal political committee. **C**

Name of Employer Advanced Cutting      Occupation Cutter

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 14 / 2014  
**Transaction ID : SA11AI.35807**

Amount of Each Receipt this Period  
**50.00**

Full Name (Last, First, Middle Initial)  
**B. Mr. Don L. Adams**

Mailing Address 818 Jeff Davis Dr

City Tyler      State TX      Zip Code 75703

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired      Occupation

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 27 / 2014  
**Transaction ID : SA11AI.35814**

Amount of Each Receipt this Period  
**300.00**

Full Name (Last, First, Middle Initial)  
**C. John Adams**

Mailing Address 1616 S. Peninsula Dr.

City Daytona Beach      State FL      Zip Code 32118

FEC ID number of contributing federal political committee. **C**

Name of Employer Info Requested      Occupation Info Requested

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **215.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 12 / 2014  
**Transaction ID : SA11AI.35819**

Amount of Each Receipt this Period  
**100.00**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **450.00**

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 195  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**FREEDOMWORKS FOR AMERICA**

Full Name (Last, First, Middle Initial)  
**A. Susan Aleshire**

Mailing Address 4930 Sw

City State Zip Code  
Southwest Ranches FL 33332

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Debonair Owner

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 12 / 2014  
**Transaction ID : SA11AI.35847**

Amount of Each Receipt this Period  
500.00

Full Name (Last, First, Middle Initial)  
**B. Mr. William Alley**

Mailing Address 68081 Calle Cerrito

City State Zip Code  
Desert Hot Springs CA 92240

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Retired

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 12 / 2014  
**Transaction ID : SA11AI.35857**

Amount of Each Receipt this Period  
100.00

Full Name (Last, First, Middle Initial)  
**C. Janice Anderson**

Mailing Address 43 Sioux Dr

City State Zip Code  
Rittman OH 44270

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Compt. of the Currency, Wash. D.c. Retired

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
225.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 03 / 2014  
**Transaction ID : SA11AI.35881**

Amount of Each Receipt this Period  
50.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 650.00

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 195
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**FREEDOMWORKS FOR AMERICA**

Full Name (Last, First, Middle Initial)  
**A. Mrs. Sharon Anderson**

Mailing Address P. O. Box 429

City Alton State NH Zip Code 03809

FEC ID number of contributing federal political committee. **C**

Name of Employer Kw Occupation Real Estate Agent

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**06 / 08 / 2014**

**Transaction ID : SA11AI.35885**

Amount of Each Receipt this Period  
**50.00**

Full Name (Last, First, Middle Initial)  
**B. Mr. Ollie Angell**

Mailing Address 2048 N. Hood

City Wichita State KS Zip Code 67203

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**06 / 21 / 2014**

**Transaction ID : SA11AI.35895**

Amount of Each Receipt this Period  
**100.00**

Full Name (Last, First, Middle Initial)  
**C. Austin Arabie**

Mailing Address 576 Austin Arabie Rd

City Deridder State LA Zip Code 70634

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Consultant

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**06 / 27 / 2014**

**Transaction ID : SA11AI.35909**

Amount of Each Receipt this Period  
**225.00**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **375.00**

**TOTAL** This Period (last page this line number only)..... ▶



**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 9 OF 195  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**FREEDOMWORKS FOR AMERICA**

Full Name (Last, First, Middle Initial)  
**A. Robert D. Arnott**

Mailing Address 411 Avocado Ave

City State Zip Code  
Corona Del Mar CA 92625

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Info Requested Info Requested

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
40000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 09 / 2014  
**Transaction ID : SA11AI.35931**

Amount of Each Receipt this Period  
40000.00

Full Name (Last, First, Middle Initial)  
**B. Scott Banister**

Mailing Address Po Box 997

City State Zip Code  
Half Moon Bay CA 94019

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Scott Banister Angel Investor

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
19500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 04 / 2014  
**Transaction ID : SA11AI.35993**

Amount of Each Receipt this Period  
10000.00

Full Name (Last, First, Middle Initial)  
**C. Scott Banister**

Mailing Address Po Box 997

City State Zip Code  
Half Moon Bay CA 94019

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Scott Banister Angel Investor

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
24500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 04 / 2014  
**Transaction ID : SA11AI.35994**

Amount of Each Receipt this Period  
5000.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 55000.00

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 195
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**FREEDOMWORKS FOR AMERICA**

**A. Scott Banister**  
Full Name (Last, First, Middle Initial)

Mailing Address Po Box 997

City State Zip Code  
Half Moon Bay CA 94019

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Scott Banister Angel Investor

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
29500.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
06 / 04 / 2014  
**Transaction ID : SA11AI.35995**

Amount of Each Receipt this Period  
5000.00

**B. Scott Banister**  
Full Name (Last, First, Middle Initial)

Mailing Address Po Box 997

City State Zip Code  
Half Moon Bay CA 94019

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Scott Banister Angel Investor

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
34500.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
06 / 04 / 2014  
**Transaction ID : SA11AI.35996**

Amount of Each Receipt this Period  
5000.00

**C. Scott Banister**  
Full Name (Last, First, Middle Initial)

Mailing Address Po Box 997

City State Zip Code  
Half Moon Bay CA 94019

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Scott Banister Angel Investor

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
39500.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
06 / 04 / 2014  
**Transaction ID : SA11AI.35997**

Amount of Each Receipt this Period  
5000.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 15000.00

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 195
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**FREEDOMWORKS FOR AMERICA**

**A. Scott Banister**  
Full Name (Last, First, Middle Initial)

Mailing Address Po Box 997

City State Zip Code  
Half Moon Bay CA 94019

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Scott Banister Angel Investor

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
44500.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
06 / 04 / 2014  
**Transaction ID : SA11AI.35998**

Amount of Each Receipt this Period  
5000.00

**B. Scott Banister**  
Full Name (Last, First, Middle Initial)

Mailing Address Po Box 997

City State Zip Code  
Half Moon Bay CA 94019

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Scott Banister Angel Investor

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
49500.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
06 / 04 / 2014  
**Transaction ID : SA11AI.35999**

Amount of Each Receipt this Period  
5000.00

**C. Scott Banister**  
Full Name (Last, First, Middle Initial)

Mailing Address Po Box 997

City State Zip Code  
Half Moon Bay CA 94019

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Scott Banister Angel Investor

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
54500.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
06 / 04 / 2014  
**Transaction ID : SA11AI.36000**

Amount of Each Receipt this Period  
5000.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 15000.00

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 195
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**FREEDOMWORKS FOR AMERICA**

Full Name (Last, First, Middle Initial) <b>A. Scott Banister</b>		Date of Receipt MM / DD / YYYY 06 / 04 / 2014 <b>Transaction ID : SA11AI.36001</b>
Mailing Address Po Box 997		Amount of Each Receipt this Period 5000.00
City Half Moon Bay	State CA	Zip Code 94019
FEC ID number of contributing federal political committee. C	Name of Employer Scott Banister	Occupation Angel Investor
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 59500.00	

Full Name (Last, First, Middle Initial) <b>B. Scott Banister</b>		Date of Receipt MM / DD / YYYY 06 / 04 / 2014 <b>Transaction ID : SA11AI.36002</b>
Mailing Address Po Box 997		Amount of Each Receipt this Period 5000.00
City Half Moon Bay	State CA	Zip Code 94019
FEC ID number of contributing federal political committee. C	Name of Employer Scott Banister	Occupation Angel Investor
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 64500.00	

Full Name (Last, First, Middle Initial) <b>C. Scott Banister</b>		Date of Receipt MM / DD / YYYY 06 / 04 / 2014 <b>Transaction ID : SA11AI.36003</b>
Mailing Address Po Box 997		Amount of Each Receipt this Period 5000.00
City Half Moon Bay	State CA	Zip Code 94019
FEC ID number of contributing federal political committee. C	Name of Employer Scott Banister	Occupation Angel Investor
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 69500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	15000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 195
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**FREEDOMWORKS FOR AMERICA**

**A. Scott Banister**  
Full Name (Last, First, Middle Initial)

Mailing Address Po Box 997

City State Zip Code  
Half Moon Bay CA 94019

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Scott Banister Angel Investor

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
74500.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
06 / 04 / 2014  
**Transaction ID : SA11AI.36004**

Amount of Each Receipt this Period  
5000.00

**B. Debra Barth**  
Full Name (Last, First, Middle Initial)

Mailing Address 2111 N Us 23

City State Zip Code  
Harrisville MI 48740

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Home Health Aide

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
06 / 05 / 2014  
**Transaction ID : SA11AI.36038**

Amount of Each Receipt this Period  
250.00

**C. Ms. Zandra Bean**  
Full Name (Last, First, Middle Initial)

Mailing Address 8503 Massey Rd

City State Zip Code  
Pilot Point TX 76258

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Zandra Bean Mgt

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
700.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
06 / 12 / 2014  
**Transaction ID : SA11AI.36076**

Amount of Each Receipt this Period  
200.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	5450.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 195
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**FREEDOMWORKS FOR AMERICA**

**A. Paul Benedict**  
Full Name (Last, First, Middle Initial)

Mailing Address P.o. Box 1654 Quail Trail 1708

City Forest Lakes	State AZ	Zip Code 85931
----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Ge Lufkin	Occupation Optimization Specialist (energy)
-------------------------------	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	05	/	2014

**Transaction ID : SA11AI.36106**

Amount of Each Receipt this Period  

400.00
--------

**B. Donald L. Bice**  
Full Name (Last, First, Middle Initial)

Mailing Address 31629 277th St

City Winner	State SD	Zip Code 57580
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Donald Bice	Occupation Airport Operations
---------------------------------	----------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	14	/	2014

**Transaction ID : SA11AI.36154**

Amount of Each Receipt this Period  

250.00
--------

**C. Al Boden**  
Full Name (Last, First, Middle Initial)

Mailing Address 1813 N. Ft. Thomas Ave.

City Ft. Thomas	State KY	Zip Code 41075
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Boden Plumbing	Occupation Plumber
------------------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	24	/	2014

**Transaction ID : SA11AI.36209**

Amount of Each Receipt this Period  

100.00
--------

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>400.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 195
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**FREEDOMWORKS FOR AMERICA**

**A. Mr. John P. Boike**  
Full Name (Last, First, Middle Initial)

Mailing Address 5304 Rio Vista Ln

City Knoxville State TN Zip Code 37919

FEC ID number of contributing federal political committee. **C**

Name of Employer Franchise Development Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 23 / 2014  
**Transaction ID : SA11AI.36224**

Amount of Each Receipt this Period  
 1000.00

**B. Mr. Joel Bomgaars**  
Full Name (Last, First, Middle Initial)

Mailing Address 5624 Brentwood Dr

City Jackson State MS Zip Code 39211

FEC ID number of contributing federal political committee. **C**

Name of Employer Bomgaar Corporation Occupation Founder & Chairman

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 15000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 05 / 2014  
**Transaction ID : SA11AI.36241**

Amount of Each Receipt this Period  
 10000.00

**C. Mr. Andrew W. Booth**  
Full Name (Last, First, Middle Initial)

Mailing Address 8402 Hilda Dr

City Salisbury State MD Zip Code 21804

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF Occupation ENGINEER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 19 / 2014  
**Transaction ID : SA11AI.36257**

Amount of Each Receipt this Period  
 50.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 11050.00

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 16 OF 195
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**FREEDOMWORKS FOR AMERICA**

**A. Kenneth Boothe**  
Full Name (Last, First, Middle Initial)

Mailing Address 1001 East Fm 700

City State Zip Code  
Big Spring TX 79720

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Info Requested Info Requested

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
450.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
06 / 06 / 2014  
**Transaction ID : SA11AI.36258**

Amount of Each Receipt this Period  
75.00

**B. Mr. David Boyer**  
Full Name (Last, First, Middle Initial)

Mailing Address 3801 N Summer Trail Dr

City State Zip Code  
Fort Worth TX 76137

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Lm Et2

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
06 / 05 / 2014  
**Transaction ID : SA11AI.36298**

Amount of Each Receipt this Period  
250.00

**C. Mr. Carl Brady**  
Full Name (Last, First, Middle Initial)

Mailing Address 1320 Rose St.

City State Zip Code  
Centralia WA 98531

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Disabled Disabled

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
06 / 04 / 2014  
**Transaction ID : SA11AI.36309**

Amount of Each Receipt this Period  
50.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	375.00
<b>TOTAL</b> This Period (last page this line number only).....▶	



**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 17 OF 195  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**FREEDOMWORKS FOR AMERICA**

**A. Mr. John Brandt**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2129 12th Ave E  
 City Hibbing State MN Zip Code 55746  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Retired Occupation Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt 06 / 23 / 2014  
**Transaction ID : SA11AI.36314**  
 Amount of Each Receipt this Period 100.00

**B. Mr. Steve Brandt**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1319 Umpqua Rd.  
 City Woodburn State OR Zip Code 97071  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Retired Occupation Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt 06 / 11 / 2014  
**Transaction ID : SA11AI.36315**  
 Amount of Each Receipt this Period 25.00

**C. James Branscom**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3332 County Road 15  
 City Rayland State OH Zip Code 43943  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Retired Occupation Info Requested  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 06 / 23 / 2014  
**Transaction ID : SA11AI.36316**  
 Amount of Each Receipt this Period 200.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 325.00  
**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 18 OF 195
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**FREEDOMWORKS FOR AMERICA**

Full Name (Last, First, Middle Initial) <b>A. Michael Brashear</b>		Date of Receipt
Mailing Address 7233 W 15th Ave		<input type="text" value="06"/> / <input type="text" value="05"/> / <input type="text" value="2014"/>
City Kennewick	State WA	Zip Code 99338
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : SA11AI.36321</b>
Name of Employer Ben Franklin Transit		Amount of Each Receipt this Period
Occupation Coach Operator		<input type="text" value="50.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
<input type="text" value="450.00"/>		

Full Name (Last, First, Middle Initial) <b>B. Michael Brashear</b>		Date of Receipt
Mailing Address 7233 W 15th Ave		<input type="text" value="06"/> / <input type="text" value="14"/> / <input type="text" value="2014"/>
City Kennewick	State WA	Zip Code 99338
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : SA11AI.36322</b>
Name of Employer Ben Franklin Transit		Amount of Each Receipt this Period
Occupation Coach Operator		<input type="text" value="50.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
<input type="text" value="500.00"/>		

Full Name (Last, First, Middle Initial) <b>C. Mr. Bill Bristor</b>		Date of Receipt
Mailing Address 3621bluehillct		<input type="text" value="06"/> / <input type="text" value="12"/> / <input type="text" value="2014"/>
City Ellicottcity	State MD	Zip Code 21042
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : SA11AI.36346</b>
Name of Employer		Amount of Each Receipt this Period
Occupation Retired		<input type="text" value="100.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
<input type="text" value="300.00"/>		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="200.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 195
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)  
**FREEDOMWORKS FOR AMERICA**

**A. Mr. Bill Bristor**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3621bluehillct  
 City Ellicottcity State MD Zip Code 21042  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 14 / 2014  
**Transaction ID : SA11AI.36347**  
 Amount of Each Receipt this Period  
 50.00

**B. Mr. James A. Brown**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1051 Clark St  
 City Abingdon State VA Zip Code 24210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation Info Requested  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 23 / 2014  
**Transaction ID : SA11AI.36382**  
 Amount of Each Receipt this Period  
 2000.00

**C. Mr. Steven Burleson**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P O Box 2479  
 City Midland State TX Zip Code 79702  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation Geologist  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 16 / 2014  
**Transaction ID : SA11AI.36433**  
 Amount of Each Receipt this Period  
 1000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	3050.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 195
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**FREEDOMWORKS FOR AMERICA**

**A. Jim Casey**  
Full Name (Last, First, Middle Initial)

Mailing Address 9 Canyon Crest Dr

City Corona Del Mar State CA Zip Code 92625

FEC ID number of contributing federal political committee. **C**

Name of Employer Software Sales Occupation Info Requested

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 23 / 2014

**Transaction ID : SA11AI.36527**

Amount of Each Receipt this Period  
 200.00

**B. Cynthia Chace**  
Full Name (Last, First, Middle Initial)

Mailing Address P. O. Box 66

City Medicine Bow State WY Zip Code 82329

FEC ID number of contributing federal political committee. **C**

Name of Employer Cynthia Chace Occupation Transcription

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 550.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 20 / 2014

**Transaction ID : SA11AI.36542**

Amount of Each Receipt this Period  
 50.00

**C. Whitney Challoner**  
Full Name (Last, First, Middle Initial)

Mailing Address 7815 E. Las Piedras Way

City Scottsdale State AZ Zip Code 85266

FEC ID number of contributing federal political committee. **C**

Name of Employer Benchmark School Occupation Teacher

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 26 / 2014

**Transaction ID : SA11AI.36549**

Amount of Each Receipt this Period  
 1000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1250.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 21 OF 195
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**FREEDOMWORKS FOR AMERICA**

**A. Mr. Glenn Child**  
Full Name (Last, First, Middle Initial)

Mailing Address 2309 Cramden Road

City Pittsburgh	State PA	Zip Code 15241
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Data Modeler	Occupation
----------------------------------	------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 05 / 2014

**Transaction ID : SA11AI.36577**

Amount of Each Receipt this Period  
300.00

**B. Mr. Harvey Cody**  
Full Name (Last, First, Middle Initial)

Mailing Address 207 Paul Revere Dr

City Houston	State TX	Zip Code 77024
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Petro Source Investments, Inc.	Occupation Attorney
--	------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 12 / 2014

**Transaction ID : SA11AI.36633**

Amount of Each Receipt this Period  
500.00

**C. Mr. William Corona**  
Full Name (Last, First, Middle Initial)

Mailing Address Po Box 61735

City Sunnyvale	State CA	Zip Code 94088
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Vmware, Inc	Occupation Engineer
---------------------------------	------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
385.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 19 / 2014

**Transaction ID : SA11AI.36711**

Amount of Each Receipt this Period  
50.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	850.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 195
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**FREEDOMWORKS FOR AMERICA**

**A. Mr. Leon Couvillion**  
Full Name (Last, First, Middle Initial)  
Mailing Address P O Box 303

City Montgomery	State TX	Zip Code 77356
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Int Assets Inc.	Occupation Oil and Gas
-------------------------------------	---------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	16	/	2014

**Transaction ID : SA11AI.36725**

Amount of Each Receipt this Period  
500.00

**B. Mr. Paul Covert**  
Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 1449

City Leander	State TX	Zip Code 78646
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation Retired
------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	14	/	2014

**Transaction ID : SA11AI.36727**

Amount of Each Receipt this Period  
100.00

**C. Mr. Lewis Crain**  
Full Name (Last, First, Middle Initial)  
Mailing Address 3512 Sheffield Ct

City Arlington	State TX	Zip Code 76013
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Rutledge Crain & Company, Pc	Occupation Cpa
--	-------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
225.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	09	/	2014

**Transaction ID : SA11AI.36741**

Amount of Each Receipt this Period  
50.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	650.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 195
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**FREEDOMWORKS FOR AMERICA**

Full Name (Last, First, Middle Initial) <b>A. Mr. Wayne Crandall</b>		Date of Receipt
Mailing Address 511 Henley Drive		<input type="text" value="06"/> / <input type="text" value="06"/> / <input type="text" value="2014"/>
City	State	Zip Code
Naples	FL	34104
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
	Retired	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="650.00"/>	
		Amount of Each Receipt this Period
		<input type="text" value="250.00"/>

Full Name (Last, First, Middle Initial) <b>B. Mr. Wayne Crandall</b>		Date of Receipt
Mailing Address 511 Henley Drive		<input type="text" value="06"/> / <input type="text" value="23"/> / <input type="text" value="2014"/>
City	State	Zip Code
Naples	FL	34104
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
	Retired	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="950.00"/>	
		Amount of Each Receipt this Period
		<input type="text" value="300.00"/>

Full Name (Last, First, Middle Initial) <b>C. John Crawford</b>		Date of Receipt
Mailing Address 2434 Culleywood Rd		<input type="text" value="06"/> / <input type="text" value="23"/> / <input type="text" value="2014"/>
City	State	Zip Code
Jackson	MS	39211
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
	Retired	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="550.00"/>	
		Amount of Each Receipt this Period
		<input type="text" value="300.00"/>

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="850.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 195
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**FREEDOMWORKS FOR AMERICA**

**A. Ms. Candice Cullman**  
Full Name (Last, First, Middle Initial)

Mailing Address 1166 Sulphur Lick Rd.

City Willisburg State KY Zip Code 40078

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Info Requested Info Requested

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
210.00

Date of Receipt  
06 / 04 / 2014  
Transaction ID : SA11AI.36789

Amount of Each Receipt this Period  
35.00

**B. Jenny Curran**  
Full Name (Last, First, Middle Initial)

Mailing Address 624 E 73rd St

City Kansas City State MO Zip Code 64131

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
West-ward Sales

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
06 / 20 / 2014  
Transaction ID : SA11AI.36801

Amount of Each Receipt this Period  
250.00

**C. Kimberley Cushman**  
Full Name (Last, First, Middle Initial)

Mailing Address P. O. Box 663

City Kernville State CA Zip Code 93238

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Lake Isabella Koa Owner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
06 / 12 / 2014  
Transaction ID : SA11AI.36807

Amount of Each Receipt this Period  
200.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 485.00

**TOTAL** This Period (last page this line number only)..... ▶



**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 195
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**FREEDOMWORKS FOR AMERICA**

Full Name (Last, First, Middle Initial) <b>A. Mrs. Myrna Darland</b>			Date of Receipt
Mailing Address 2021 102nd PI SE			M M M / D D D / Y Y Y Y Y Y 06 / 05 / 2014
City	State	Zip Code	<b>Transaction ID : SA11AI.36833</b>
Bellevue	WA	98004	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		500.00
Name of Employer	Occupation		
Info Requested	Info Requested		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	500.00		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B. Mr. Dennis Daugherty</b>			Date of Receipt
Mailing Address 480 Buckeye Hills Rd			M M M / D D D / Y Y Y Y Y Y 06 / 10 / 2014
City	State	Zip Code	<b>Transaction ID : SA11AI.36835</b>
Thurman	OH	45685	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		50.00
Name of Employer	Occupation		
	Retired		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	300.00		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C. Mr. Dennis Daugherty</b>			Date of Receipt
Mailing Address 480 Buckeye Hills Rd			M M M / D D D / Y Y Y Y Y Y 06 / 18 / 2014
City	State	Zip Code	<b>Transaction ID : SA11AI.36836</b>
Thurman	OH	45685	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		100.00
Name of Employer	Occupation		
	Retired		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	400.00		
<input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	650.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 195
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**FREEDOMWORKS FOR AMERICA**

**A. Mr. Ronald Davis**  
Full Name (Last, First, Middle Initial)

Mailing Address 4543 Del Rayo Court

City Camarillo State CA Zip Code 93012

FEC ID number of contributing federal political committee. **C**

Name of Employer City of Port Hueneme Occupation Peace Officer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 06 / 2014  
**Transaction ID : SA11AI.36872**

Amount of Each Receipt this Period  
 100.00

**B. Gary Dean**  
Full Name (Last, First, Middle Initial)

Mailing Address 516 5th Ave S

City Surfside Beach State SC Zip Code 29575

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 17 / 2014  
**Transaction ID : SA11AI.36886**

Amount of Each Receipt this Period  
 250.00

**C. Harry Deantonio**  
Full Name (Last, First, Middle Initial)

Mailing Address 3584 Habersham Road

City Atlanta State GA Zip Code 30305

FEC ID number of contributing federal political committee. **C**

Name of Employer Icon Commercial Occupation Real Estate

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 12 / 2014  
**Transaction ID : SA11AI.36890**

Amount of Each Receipt this Period  
 250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 600.00

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 195
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**FREEDOMWORKS FOR AMERICA**

**A. Sagar Desai**  
Full Name (Last, First, Middle Initial)

Mailing Address 600 F St Nw Ste 400

City Washington State DC Zip Code 20002

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Info Requested Info Requested

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
-1.00

Date of Receipt  
06 / 10 / 2014  
**Transaction ID : SA11AI.36916**

Amount of Each Receipt this Period  
-1.00

**B. Sagar Desai**  
Full Name (Last, First, Middle Initial)

Mailing Address 600 F St Nw Ste 400

City Washington State DC Zip Code 20002

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Info Requested Info Requested

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
-26.00

Date of Receipt  
06 / 10 / 2014  
**Transaction ID : SA11AI.36917**

Amount of Each Receipt this Period  
-25.00

**C. Druscilla Doehrman**  
Full Name (Last, First, Middle Initial)

Mailing Address P.o.box 2165

City Naples State FL Zip Code 34106

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Retired Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
800.00

Date of Receipt  
06 / 17 / 2014  
**Transaction ID : SA11AI.36971**

Amount of Each Receipt this Period  
500.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 474.00

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 195
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**FREEDOMWORKS FOR AMERICA**

**A. Mr. Ronald Dondanville**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 420 Andrew Avenue  
 City Encinitas State CA Zip Code 92024  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Unemployed Occupation Service Tech  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 606.75

Date of Receipt 06 / 13 / 2014  
**Transaction ID : SA11AI.36976**  
 Amount of Each Receipt this Period 206.00

**B. Mr. Donald J. Douglass**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 150 Edgewater Way  
 City Merritt Island State FL Zip Code 32953  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Retired Occupation Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt 06 / 23 / 2014  
**Transaction ID : SA11AI.36995**  
 Amount of Each Receipt this Period 500.00

**C. Martha Dunn**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 320 Kings Mt. Rd.  
 City Woodside State CA Zip Code 94062  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Martha Dunn Occupation Riding Instructor  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 06 / 12 / 2014  
**Transaction ID : SA11AI.37037**  
 Amount of Each Receipt this Period 500.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1206.00  
**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 195
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**FREEDOMWORKS FOR AMERICA**

**A. Mr. Dennis E Duval**  
Full Name (Last, First, Middle Initial)

Mailing Address 11183 Kadota Ave

City Pomona	State CA	Zip Code 91766
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Dennis Duval	Occupation Property Manager
----------------------------------	--------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
600.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
06		23		2014

**Transaction ID : SA11AI.37042**

Amount of Each Receipt this Period  
100.00

**B. Mr. Charles K. Eaton**  
Full Name (Last, First, Middle Initial)

Mailing Address 5549 28th Ave. N.e.

City Seattle	State WA	Zip Code 98105
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired	Occupation
-----------------------------	------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
06		23		2014

**Transaction ID : SA11AI.37062**

Amount of Each Receipt this Period  
250.00

**C. Mr. Douglas Edwards**  
Full Name (Last, First, Middle Initial)

Mailing Address 14558 Anchorage Circle

City Seminole	State FL	Zip Code 33776
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Cyberstainless Corp	Occupation Sales
---	---------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
06		14		2014

**Transaction ID : SA11AI.37077**

Amount of Each Receipt this Period  
500.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	850.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 195
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**FREEDOMWORKS FOR AMERICA**

Full Name (Last, First, Middle Initial)  
**A. Clifton Eldred**

Mailing Address 5623 Sunnyview Rd Ne

City Salem State OR Zip Code 97305

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 12 / 2014  
**Transaction ID : SA11AI.37099**

Amount of Each Receipt this Period  
 100.00

Full Name (Last, First, Middle Initial)  
**B. James Eller**

Mailing Address 3587 Conrad Ave.

City San Diego State CA Zip Code 92117

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1200.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 06 / 2014  
**Transaction ID : SA11AI.37107**

Amount of Each Receipt this Period  
 200.00

Full Name (Last, First, Middle Initial)  
**C. Mr. Martin Ennis**

Mailing Address 515 Willowhurst Place

City Louisville State KY Zip Code 40223

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 08 / 2014  
**Transaction ID : SA11AI.37129**

Amount of Each Receipt this Period  
 50.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 350.00

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 31 OF 195  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**FREEDOMWORKS FOR AMERICA**

Full Name (Last, First, Middle Initial)  
**A. Mr. Stephen T. Epps**

Mailing Address 11 Albert St

City State Zip Code  
Shoreham NY 11786

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Retired Retired

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
375.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 18 / 2014  
**Transaction ID : SA11AI.37134**

Amount of Each Receipt this Period  
125.00

Full Name (Last, First, Middle Initial)  
**B. Mr. James Evans**

Mailing Address 50 Mill Run Ln

City State Zip Code  
Springboro OH 45066

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Evans Motorworks Auto Dealer

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 04 / 2014  
**Transaction ID : SA11AI.37154**

Amount of Each Receipt this Period  
500.00

Full Name (Last, First, Middle Initial)  
**C. Steve Fay**

Mailing Address 17365 Barryknoll Way

City State Zip Code  
Granger IN 46530

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Industry Information

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
205.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 20 / 2014  
**Transaction ID : SA11AI.37197**

Amount of Each Receipt this Period  
35.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 660.00

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 195
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**FREEDOMWORKS FOR AMERICA**

**A. Mr. John Fehsenfeld**  
Full Name (Last, First, Middle Initial)

Mailing Address Po Box 35200

City Las Vegas State NV Zip Code 89133

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 24 / 2014  
**Transaction ID : SA11AI.37209**

Amount of Each Receipt this Period  
 500.00

**B. Wm. Feldbaumer**  
Full Name (Last, First, Middle Initial)

Mailing Address 675 Airport Rd

City Lehighton State PA Zip Code 18235

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 12 / 2014  
**Transaction ID : SA11AI.37212**

Amount of Each Receipt this Period  
 250.00

**C. Mr. James Fetter Jr.**  
Full Name (Last, First, Middle Initial)

Mailing Address Po Box 205

City Muncy State PA Zip Code 17756

FEC ID number of contributing federal political committee. **C**

Name of Employer Manager Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 18 / 2014  
**Transaction ID : SA11AI.37232**

Amount of Each Receipt this Period  
 500.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1250.00
<b>TOTAL</b> This Period (last page this line number only).....▶	



**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 33 OF 195  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**FREEDOMWORKS FOR AMERICA**

**A. Ms. Karen J. Fletcher**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 846 Garfield St  
 City Denver State CO Zip Code 80206  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Retired Occupation Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 06 / 23 / 2014  
**Transaction ID : SA11AI.37280**  
 Amount of Each Receipt this Period 50.00

**B. Michael A. Foley**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5201 S Nottingham Ave  
 City Chicago State IL Zip Code 60638  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Info Requested Occupation Info Requested  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 06 / 30 / 2014  
**Transaction ID : SA11AI.37295**  
 Amount of Each Receipt this Period 200.00

**C. Mr. Eugene Frantz**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 608 Stoney Run Rd  
 City Pottsville State PA Zip Code 17901  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Retired Occupation Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 06 / 24 / 2014  
**Transaction ID : SA11AI.37339**  
 Amount of Each Receipt this Period 200.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 450.00  
**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 34 OF 195  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**FREEDOMWORKS FOR AMERICA**

Full Name (Last, First, Middle Initial)  
**A. Ms. Larrilee Frazier**

Mailing Address 161 Brokenwood Lane

City State Zip Code  
Fairfield Glade TN 38558

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Hilltoppers, Inc. P.r. Coordinator

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
385.00

Date of Receipt  
 M  M /  D  D /  Y  Y  Y  Y  
 06 / 05 / 2014  
**Transaction ID : SA11AI.37340**

Amount of Each Receipt this Period  
100.00

Full Name (Last, First, Middle Initial)  
**B. Freedomworks, Inc.**

Mailing Address 400 N Capitol St., NW  
Suite 735

City State Zip Code  
Washington DC 20001

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
239224.49

Date of Receipt  
 M  M /  D  D /  Y  Y  Y  Y  
 06 / 30 / 2014  
**Transaction ID : SA11AI.40889**

Amount of Each Receipt this Period  
2436.92

In-kind - Travel

Full Name (Last, First, Middle Initial)  
**C. Freedomworks, Inc.**

Mailing Address 400 N Capitol St., NW  
Suite 735

City State Zip Code  
Washington DC 20001

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
236787.57

Date of Receipt  
 M  M /  D  D /  Y  Y  Y  Y  
 06 / 30 / 2014  
**Transaction ID : SA11AI.40890**

Amount of Each Receipt this Period  
1250.00

In-kind - Equipment Usage

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 3786.92

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 35 OF 195  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**FREEDOMWORKS FOR AMERICA**

Full Name (Last, First, Middle Initial)  
**A. Freedomworks, Inc.**

Mailing Address 400 N Capitol St., NW  
Suite 735

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
261680.68

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 30 / 2014  
**Transaction ID : SA11AI.40998**

Amount of Each Receipt this Period  
22456.19

In-kind - Travel

Full Name (Last, First, Middle Initial)  
**B. Mr. Charles W. Frost**

Mailing Address 176 S Collier Blvd Unit 405

City Marco Island State FL Zip Code 34145

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Info Requested Info Requested

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
325.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 03 / 2014  
**Transaction ID : SA11AI.37353**

Amount of Each Receipt this Period  
100.00

Full Name (Last, First, Middle Initial)  
**C. Gary Fuderer**

Mailing Address 1276 Windsor Ln.

City Chester State SC Zip Code 29706

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Retired Retired

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 16 / 2014  
**Transaction ID : SA11AI.37358**

Amount of Each Receipt this Period  
100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 22656.19

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 195
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)  
**FREEDOMWORKS FOR AMERICA**

**A. Connie Garrett**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 14505 Valley View Drive  
 City Skiatook State OK Zip Code 74070  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Wsa Sales Company, Inc. Occupation General Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 390.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 08 / 2014  
**Transaction ID : SA11AI.37412**  
 Amount of Each Receipt this Period  
 15.00

**B. Karla Gerome**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1835 E 3210 S  
 City Salt Lake City State UT Zip Code 84106  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer The Grace Company Occupation Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 20 / 2014  
**Transaction ID : SA11AI.37449**  
 Amount of Each Receipt this Period  
 250.00

**C. Earl Gilmartin**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 357 W 200 N  
 City Jerome State ID Zip Code 83338  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Commercial Creamery Occupation Engineer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2770.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 12 / 2014  
**Transaction ID : SA11AI.37467**  
 Amount of Each Receipt this Period  
 50.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	315.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 37 OF 195  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**FREEDOMWORKS FOR AMERICA**

Full Name (Last, First, Middle Initial)  
**A. Mr. Thomas Godfrey**

Mailing Address 950 County Road Qq

City State Zip Code  
Waupaca WI 54981

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Retired Retired

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 23 / 2014  
**Transaction ID : SA11AI.37489**

Amount of Each Receipt this Period  
200.00

Full Name (Last, First, Middle Initial)  
**B. Mr. William L. Grafton**

Mailing Address 3320 S Justin St

City State Zip Code  
Flagstaff AZ 86005

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Retired Retired

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
550.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 15 / 2014  
**Transaction ID : SA11AI.37513**

Amount of Each Receipt this Period  
200.00

Full Name (Last, First, Middle Initial)  
**C. Mr. David W. Gray**

Mailing Address 721 Market St

City State Zip Code  
Lewisburg PA 17837

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Retired Retired

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 18 / 2014  
**Transaction ID : SA11AI.37527**

Amount of Each Receipt this Period  
200.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 600.00

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 38 OF 195  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**FREEDOMWORKS FOR AMERICA**

Full Name (Last, First, Middle Initial)  
**A. Michael Greytak**

Mailing Address 4909 122nd Ave Se

City Bellevue      State WA      Zip Code 98006

FEC ID number of contributing federal political committee. **C**

Name of Employer Michael Greytak      Occupation Retired

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 750.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 12 / 2014  
**Transaction ID : SA11AI.37550**

Amount of Each Receipt this Period  
 100.00

Full Name (Last, First, Middle Initial)  
**B. Jerry Gross**

Mailing Address Po Box 1357

City Coeur D Alene      State ID      Zip Code 83816

FEC ID number of contributing federal political committee. **C**

Name of Employer Bp      Occupation Technician

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 05 / 2014  
**Transaction ID : SA11AI.37570**

Amount of Each Receipt this Period  
 100.00

Full Name (Last, First, Middle Initial)  
**C. Rudy Guerra**

Mailing Address 8945 Ralph Street

City Rosemead      State CA      Zip Code 91776

FEC ID number of contributing federal political committee. **C**

Name of Employer Info Requested      Occupation Info Requested

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 01 / 2014  
**Transaction ID : SA11AI.37584**

Amount of Each Receipt this Period  
 50.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 250.00

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 195
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**FREEDOMWORKS FOR AMERICA**

**A. Mr. Robert Hawkins**  
Full Name (Last, First, Middle Initial)

Mailing Address 5005 Birch Rd

City Fayetteville State NC Zip Code 28304

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **600.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**06 / 18 / 2014**

**Transaction ID : SA11AI.37741**

Amount of Each Receipt this Period  
**200.00**

**B. Mrs. Lona Hendricks**  
Full Name (Last, First, Middle Initial)

Mailing Address 4103 205th Ave Se

City Sammamish State WA Zip Code 98075

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**06 / 17 / 2014**

**Transaction ID : SA11AI.37772**

Amount of Each Receipt this Period  
**100.00**

**C. Mrs. Lona Hendricks**  
Full Name (Last, First, Middle Initial)

Mailing Address 4103 205th Ave Se

City Sammamish State WA Zip Code 98075

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **350.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**06 / 27 / 2014**

**Transaction ID : SA11AI.37773**

Amount of Each Receipt this Period  
**50.00**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **350.00**

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 OF 195
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**FREEDOMWORKS FOR AMERICA**

**A. Mr. George Hinkle**  
Full Name (Last, First, Middle Initial)

Mailing Address 14105 Preston Woods

City Northport State AL Zip Code 35475

FEC ID number of contributing federal political committee. **C**

Name of Employer George Hinkle Occupation Lawn Care

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **235.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 24 / 2014  
**Transaction ID : SA11AI.37826**

Amount of Each Receipt this Period  
**35.00**

**B. Mr. David Holland**  
Full Name (Last, First, Middle Initial)

Mailing Address 3000 N Garfield St Ste 107

City Midland State TX Zip Code 79705

FEC ID number of contributing federal political committee. **C**

Name of Employer Dnh Enterprises Occupation Business Owner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 14 / 2014  
**Transaction ID : SA11AI.37860**

Amount of Each Receipt this Period  
**500.00**

**C. Charles Holmen**  
Full Name (Last, First, Middle Initial)

Mailing Address 463 Towne Oaks Dr.

City Tyler State TX Zip Code 75701

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 12 / 2014  
**Transaction ID : SA11AI.37871**

Amount of Each Receipt this Period  
**200.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>735.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	



**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 195
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**FREEDOMWORKS FOR AMERICA**

Full Name (Last, First, Middle Initial) <b>A. Judith Hook</b>		Date of Receipt
Mailing Address 4166 Dingman Drive		<input type="text" value="06"/> / <input type="text" value="20"/> / <input type="text" value="2014"/>
City	State	Zip Code
Sanibel	FL	33957
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : SA11AI.37883</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
	Investor	<input type="text" value="200.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="700.00"/>	

Full Name (Last, First, Middle Initial) <b>B. Suzanne Hudgens</b>		Date of Receipt
Mailing Address 7509 Hwy. 106 South		<input type="text" value="06"/> / <input type="text" value="13"/> / <input type="text" value="2014"/>
City	State	Zip Code
Hull	GA	30646
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : SA11AI.37913</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
	Homemaker	<input type="text" value="250.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="250.00"/>	

Full Name (Last, First, Middle Initial) <b>C. Mr. Harry H. Hunt Iii</b>		Date of Receipt
Mailing Address 800 Hethwood Blvd		<input type="text" value="06"/> / <input type="text" value="18"/> / <input type="text" value="2014"/>
City	State	Zip Code
Blacksburg	VA	24060
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : SA11AI.37939</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
	Info Requested	<input type="text" value="900.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="900.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="1350.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 OF 195
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**FREEDOMWORKS FOR AMERICA**

**A. Mr. Norman A. Jacobs**  
Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 5462

City	State	Zip Code
Carefree	AZ	85377

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
Retired	Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	23	/	2014

**Transaction ID : SA11AI.37977**

Amount of Each Receipt this Period  
500.00

**B. Mr. Terrence Jacobs**  
Full Name (Last, First, Middle Initial)  
Mailing Address 6247 Louise Cove Drive

City	State	Zip Code
Windermere	FL	34786

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
Penneco Oil Company	Ceo

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	12	/	2014

**Transaction ID : SA11AI.37981**

Amount of Each Receipt this Period  
250.00

**C. Mrs. James Johnson**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1714 E Woodcrest Dr S

City	State	Zip Code
Martinsville	IN	46151

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
James Johnson	Accounting

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
235.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	12	/	2014

**Transaction ID : SA11AI.38031**

Amount of Each Receipt this Period  
35.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	785.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 OF 195
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**FREEDOMWORKS FOR AMERICA**

**A. Joanne Johnson**  
Full Name (Last, First, Middle Initial)

Mailing Address 70 Robley Rd

City Salinas State CA Zip Code 93908

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Homemaker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 05 / 2014

**Transaction ID : SA11AI.38033**

Amount of Each Receipt this Period  
 500.00

**B. Mr. Kenneth Johnson**  
Full Name (Last, First, Middle Initial)

Mailing Address 2165 Stopper Dr

City Montoursville State PA Zip Code 17754

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Info Requested Info Requested

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 16 / 2014

**Transaction ID : SA11AI.38034**

Amount of Each Receipt this Period  
 100.00

**C. Mrs. Sandra Johnson**  
Full Name (Last, First, Middle Initial)

Mailing Address 2161 Menzel Pl.

City Santa Clara State CA Zip Code 95050

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Retired Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 12 / 2014

**Transaction ID : SA11AI.38048**

Amount of Each Receipt this Period  
 100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 700.00

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 OF 195
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**FREEDOMWORKS FOR AMERICA**

Full Name (Last, First, Middle Initial) <b>A. Bill Jones</b>		Date of Receipt
Mailing Address 2930 Burns Lane		<input type="text" value="06"/> / <input type="text" value="03"/> / <input type="text" value="2014"/>
City	State	Zip Code
Normangee	TX	77871
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
	Retired	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="450.00"/>	
		Amount of Each Receipt this Period
		<input type="text" value="250.00"/>

Full Name (Last, First, Middle Initial) <b>B. Bill Jones</b>		Date of Receipt
Mailing Address 2930 Burns Lane		<input type="text" value="06"/> / <input type="text" value="11"/> / <input type="text" value="2014"/>
City	State	Zip Code
Normangee	TX	77871
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
	Retired	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="550.00"/>	
		Amount of Each Receipt this Period
		<input type="text" value="100.00"/>

Full Name (Last, First, Middle Initial) <b>C. Joseph Kakaty</b>		Date of Receipt
Mailing Address 9804 Moon Valley Pl		<input type="text" value="06"/> / <input type="text" value="12"/> / <input type="text" value="2014"/>
City	State	Zip Code
Las Vegas	NV	89134
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
Edvisors Network	Management	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="6000.00"/>	
		Amount of Each Receipt this Period
		<input type="text" value="1000.00"/>

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="1350.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 OF 195
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**FREEDOMWORKS FOR AMERICA**

**A. Cary Katz**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 9021 Grove Crest Ln  
 City Las Vegas State NV Zip Code 89134  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer College Loan Corporation Occupation Board Member  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **125000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 06 / 2014  
**Transaction ID : SA11AI.38129**  
 Amount of Each Receipt this Period  
**25000.00**

**B. Bruce Kehr**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5920 Hubbard Drive  
 City Rockville State MD Zip Code 20852  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Potomac Psychiatry Occupation Psychiatrist  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 11 / 2014  
**Transaction ID : SA11AI.38146**  
 Amount of Each Receipt this Period  
**1000.00**

**C. Diane Kenison**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1423 W 11150 S  
 City South Jordan State UT Zip Code 84095  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Homemaker Occupation Homemaker  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **1400.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 09 / 2014  
**Transaction ID : SA11AI.38161**  
 Amount of Each Receipt this Period  
**200.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>26200.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 46 OF 195  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**FREEDOMWORKS FOR AMERICA**

**A. Diane Kenison**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1423 W 11150 S  
 City South Jordan State UT Zip Code 84095  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Homemaker Occupation Homemaker  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 23 / 2014  
**Transaction ID : SA11AI.38162**  
 Amount of Each Receipt this Period  
 100.00

**B. Timothy Kinsman**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 309 E. Desert Park Ln.  
 City Phoenix State AZ Zip Code 85020  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Info Requested Occupation Info Requested  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 16 / 2014  
**Transaction ID : SA11AI.38211**  
 Amount of Each Receipt this Period  
 500.00

**C. Mr. Danny Kirkpatrick**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 35656 Babara Lane  
 City Yucaipa State CA Zip Code 92399  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Rcrmc Occupation Access Control Tech  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 17 / 2014  
**Transaction ID : SA11AI.38217**  
 Amount of Each Receipt this Period  
 50.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 650.00  
**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 OF 195
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**FREEDOMWORKS FOR AMERICA**

**A. Barbara Kleimola**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1149 Golf Club Lane  
 City Crossville State TN Zip Code 38571  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 16 / 2014  
**Transaction ID : SA11AI.38232**  
 Amount of Each Receipt this Period  
 50.00

**B. Lionel Korb**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 10498 Se 179th Ln  
 City Summerfield State FL Zip Code 34491  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 30 / 2014  
**Transaction ID : SA11AI.38265**  
 Amount of Each Receipt this Period  
 200.00

**C. Mr. Carl Kroening**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 999 41st Ave NE Apt 302  
 City Minneapolis State MN Zip Code 55421  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 24 / 2014  
**Transaction ID : SA11AI.38292**  
 Amount of Each Receipt this Period  
 100.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	350.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 OF 195
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**FREEDOMWORKS FOR AMERICA**

**A. Mr. Jay M. Lapeyre Jr.**  
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 50699

City New Orleans State LA Zip Code 70150

FEC ID number of contributing federal political committee. **C**

Name of Employer President Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
06 / 09 / 2014  
Transaction ID : SA11AI.38373

Amount of Each Receipt this Period  
5000.00

**B. Ms. Victoria Lechelt-furth**  
Full Name (Last, First, Middle Initial)

Mailing Address 13076 Ditto Creek Rd.

City Mountain Home State ID Zip Code 83647

FEC ID number of contributing federal political committee. **C**

Name of Employer Info Requested Occupation Info Requested

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
210.00

Date of Receipt  
06 / 18 / 2014  
Transaction ID : SA11AI.38411

Amount of Each Receipt this Period  
10.00

**C. Mary Leifer**  
Full Name (Last, First, Middle Initial)

Mailing Address 84 Kingsley Way

City Freehold State NJ Zip Code 07728

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
225.00

Date of Receipt  
06 / 09 / 2014  
Transaction ID : SA11AI.38428

Amount of Each Receipt this Period  
100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 5110.00

**TOTAL** This Period (last page this line number only)..... ▶



**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 OF 195
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**FREEDOMWORKS FOR AMERICA**

**A. Mr. Miles Lemmon**  
Full Name (Last, First, Middle Initial)

Mailing Address 14661 Junkite Street Northwest

City Anoka	State MN	Zip Code 55303
---------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Info Requested	Occupation Info Requested
------------------------------------	------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	23	/	2014

**Transaction ID : SA11AI.38437**

Amount of Each Receipt this Period  
50.00

**B. Gary Leonard**  
Full Name (Last, First, Middle Initial)

Mailing Address 3014 White Sands Ter

City Green Bay	State WI	Zip Code 54313
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired	Occupation Retired
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
210.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	17	/	2014

**Transaction ID : SA11AI.38442**

Amount of Each Receipt this Period  
10.00

**C. Ms. Goga Lise**  
Full Name (Last, First, Middle Initial)

Mailing Address 95-1089 Paemoku PI

City Mililani	State HI	Zip Code 96789
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Info Requested	Occupation Info Requested
------------------------------------	------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	16	/	2014

**Transaction ID : SA11AI.38481**

Amount of Each Receipt this Period  
300.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....	▶	360.00
<b>TOTAL</b> This Period (last page this line number only).....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 50 OF 195  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**FREEDOMWORKS FOR AMERICA**

Full Name (Last, First, Middle Initial)  
**A. Thomas Little**

Mailing Address **Box 26091**

City **Charlotte**      State **NC**      Zip Code **28221**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Little Hoffman Inc.**      Occupation **Owner**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
**06 / 12 / 2014**

**Transaction ID : SA11AI.38487**

Amount of Each Receipt this Period  
**500.00**

Full Name (Last, First, Middle Initial)  
**B. Fern Love**

Mailing Address **793 Fm 2161**

City **Panhandle**      State **TX**      Zip Code **79068**

FEC ID number of contributing federal political committee. **C**

Name of Employer \_\_\_\_\_      Occupation **Homemaker**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **550.00**

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
**06 / 10 / 2014**

**Transaction ID : SA11AI.38525**

Amount of Each Receipt this Period  
**50.00**

Full Name (Last, First, Middle Initial)  
**C. Fern Love**

Mailing Address **793 Fm 2161**

City **Panhandle**      State **TX**      Zip Code **79068**

FEC ID number of contributing federal political committee. **C**

Name of Employer \_\_\_\_\_      Occupation **Homemaker**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **600.00**

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
**06 / 10 / 2014**

**Transaction ID : SA11AI.38526**

Amount of Each Receipt this Period  
**50.00**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **600.00**

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 OF 195
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**FREEDOMWORKS FOR AMERICA**

**A. Fern Love**  
Full Name (Last, First, Middle Initial)  
Mailing Address 793 Fm 2161

City Panhandle	State TX	Zip Code 79068
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation Homemaker
------------------	-------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **650.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	10	/	2014

**Transaction ID : SA11AI.38527**

Amount of Each Receipt this Period  

50.00
-------

**B. Fern Love**  
Full Name (Last, First, Middle Initial)  
Mailing Address 793 Fm 2161

City Panhandle	State TX	Zip Code 79068
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation Homemaker
------------------	-------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **750.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	26	/	2014

**Transaction ID : SA11AI.38524**

Amount of Each Receipt this Period  

100.00
--------

**C. Mark Mabie**  
Full Name (Last, First, Middle Initial)  
Mailing Address 272 Majestic View Dr.

City Kingwood	State WV	Zip Code 26537
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer First Energy	Occupation Lineman
----------------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	23	/	2014

**Transaction ID : SA11AI.38580**

Amount of Each Receipt this Period  

100.00
--------

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>250.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 OF 195
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**FREEDOMWORKS FOR AMERICA**

**A. Mr. Joseph Magoun**  
Full Name (Last, First, Middle Initial)

Mailing Address 124 Lake Park Dr

City Hendersonville State TN Zip Code 37075

FEC ID number of contributing federal political committee. **C**

Name of Employer Woebegone Occupation Physician

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 06 / 2014  
**Transaction ID : SA11AI.38613**

Amount of Each Receipt this Period  
 100.00

**B. Mr. David Marion**  
Full Name (Last, First, Middle Initial)

Mailing Address 10276 N Dowling Rd

City College Station State TX Zip Code 77845

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 18 / 2014  
**Transaction ID : SA11AI.38649**

Amount of Each Receipt this Period  
 100.00

**C. Mrs. Marina McGee**  
Full Name (Last, First, Middle Initial)

Mailing Address 4720 E. Melinda Lane

City Phoenix State AZ Zip Code 85050

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 05 / 2014  
**Transaction ID : SA11AI.38783**

Amount of Each Receipt this Period  
 50.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 250.00

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 OF 195
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**FREEDOMWORKS FOR AMERICA**

Full Name (Last, First, Middle Initial) <b>A. Dena Meek</b>		Date of Receipt
Mailing Address 560 Diamond Point		<input type="text" value="06"/> / <input type="text" value="16"/> / <input type="text" value="2014"/>
City	State	Zip Code
Oak Point	TX	75068
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
	Retired	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="250.00"/>	
		Amount of Each Receipt this Period
		<input type="text" value="250.00"/>

Full Name (Last, First, Middle Initial) <b>B. Ms. Sandra Meekhof</b>		Date of Receipt
Mailing Address 6950 Leonard St		<input type="text" value="06"/> / <input type="text" value="23"/> / <input type="text" value="2014"/>
City	State	Zip Code
Coopersville	MI	49404
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
Retired	Retired	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="350.00"/>	
		Amount of Each Receipt this Period
		<input type="text" value="100.00"/>

Full Name (Last, First, Middle Initial) <b>C. Mr. Gary Milhous</b>		Date of Receipt
Mailing Address 15808 Rushford St.		<input type="text" value="06"/> / <input type="text" value="12"/> / <input type="text" value="2014"/>
City	State	Zip Code
Whittier	CA	90603
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
Retired	Retired	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="300.00"/>	
		Amount of Each Receipt this Period
		<input type="text" value="100.00"/>

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="450.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 54 OF 195
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**FREEDOMWORKS FOR AMERICA**

**A. Mrs. Connie Miller**  
Full Name (Last, First, Middle Initial)

Mailing Address 30600 Hidden Valley Place

City State Zip Code  
Kiowa CO 80117

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Heritage Church Office Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
700.00

Date of Receipt  
06 / 23 / 2014  
**Transaction ID : SA11AI.38913**

Amount of Each Receipt this Period  
100.00

**B. Mr. Michael Miller**  
Full Name (Last, First, Middle Initial)

Mailing Address 123 West Main St

City State Zip Code  
Barrington IL 60010

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Michael Miller Jeweler

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
210.00

Date of Receipt  
06 / 08 / 2014  
**Transaction ID : SA11AI.38931**

Amount of Each Receipt this Period  
35.00

**C. Nancy Miller**  
Full Name (Last, First, Middle Initial)

Mailing Address 132 Hyland Road

City State Zip Code  
Monticello AR 71655

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
06 / 17 / 2014  
**Transaction ID : SA11AI.38933**

Amount of Each Receipt this Period  
100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 235.00

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 55 OF 195
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**FREEDOMWORKS FOR AMERICA**

**A. Michael Minner**  
Full Name (Last, First, Middle Initial)

Mailing Address 211 Elcerrito Dr.

City	State	Zip Code
Bakersfield	CA	93305

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
Michael Minner	Building Contractor

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**06 / 12 / 2014**

**Transaction ID : SA11AI.38951**

Amount of Each Receipt this Period  
**100.00**

**B. Susan Moore Vault**  
Full Name (Last, First, Middle Initial)

Mailing Address 7150 E. River Canyon Road

City	State	Zip Code
Tucson	AZ	85750

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
Moore Financial Strategies	Financial Services

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1000.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**06 / 12 / 2014**

**Transaction ID : SA11AI.38999**

Amount of Each Receipt this Period  
**1000.00**

**C. Don Morrison**  
Full Name (Last, First, Middle Initial)

Mailing Address 184 Pine Crest Cir

City	State	Zip Code
Montgomery	TX	77316

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
United	Pilot

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**06 / 30 / 2014**

**Transaction ID : SA11AI.39023**

Amount of Each Receipt this Period  
**100.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>1200.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 56 OF 195
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**FREEDOMWORKS FOR AMERICA**

**A. Gregory Morrow**  
Full Name (Last, First, Middle Initial)  
Mailing Address 17111 111th St E  
City Bonney Lake State WA Zip Code 98391  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Info Requested Info Requested  
Receipt For:  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼  
**210.00**

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
**06 / 08 / 2014**  
**Transaction ID : SA11AI.39027**  
Amount of Each Receipt this Period  
**35.00**

**B. Carl Mortensen**  
Full Name (Last, First, Middle Initial)  
Mailing Address 5211 70th St  
City Lubbock State TX Zip Code 79424  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Carl Mortensen Real Estate Developer  
Receipt For:  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼  
**300.00**

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
**06 / 17 / 2014**  
**Transaction ID : SA11AI.39032**  
Amount of Each Receipt this Period  
**100.00**

**C. Mr. Roy Mosser**  
Full Name (Last, First, Middle Initial)  
Mailing Address P O Box 1066  
City Decatur State IL Zip Code 62525  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Roy Mosser Real Estate Developer  
Receipt For:  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼  
**629.00**

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
**06 / 05 / 2014**  
**Transaction ID : SA11AI.39043**  
Amount of Each Receipt this Period  
**177.60**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>312.60</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	



**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 57 OF 195
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**FREEDOMWORKS FOR AMERICA**

**A. Richard Mudge**  
Full Name (Last, First, Middle Initial)

Mailing Address 1291 Beaupre Ave.

City Madison Hts State MI Zip Code 48071

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 04 / 2014  
**Transaction ID : SA11AI.39054**

Amount of Each Receipt this Period  
 100.00

**B. Richard Mudge**  
Full Name (Last, First, Middle Initial)

Mailing Address 1291 Beaupre Ave.

City Madison Hts State MI Zip Code 48071

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 549.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 12 / 2014  
**Transaction ID : SA11AI.39053**

Amount of Each Receipt this Period  
 199.00

**C. Mr. Terence Murphree**  
Full Name (Last, First, Middle Initial)

Mailing Address 1330 Enclave Pkwy

City Houston State TX Zip Code 77077

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Construction Exec.  
United Steel Structures

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 30000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 09 / 2014  
**Transaction ID : SA11AI.39069**

Amount of Each Receipt this Period  
 5000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	5299.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 OF 195
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**FREEDOMWORKS FOR AMERICA**

**A. Dave Napier**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1012 W Bella Casa Dr  
 City Pueblo West State CO Zip Code 81007  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Dave Napier Occupation Restaurant.  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 06 / 30 / 2014  
**Transaction ID : SA11AI.39080**  
 Amount of Each Receipt this Period  
 50.00

**B. Walter Negley**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3359 Chevy Chase Dr  
 City Houston State TX Zip Code 77019  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer self-employed Occupation  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 06 / 19 / 2014  
**Transaction ID : SA11AI.39096**  
 Amount of Each Receipt this Period  
 5000.00

**C. Mr. Peter Neves**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 23820 Gyle Rd  
 City Gerber State CA Zip Code 96035  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Peter Neves Occupation Farmer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt  
 06 / 24 / 2014  
**Transaction ID : SA11AI.39106**  
 Amount of Each Receipt this Period  
 500.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	5550.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 59 OF 195  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**FREEDOMWORKS FOR AMERICA**

Full Name (Last, First, Middle Initial)  
**A. Marlene Olsen**

Mailing Address 1050 Fleetwood Drive

City San Jose State CA Zip Code 95120

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
N/A Disabled

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 24 / 2014  
**Transaction ID : SA11AI.39196**

Amount of Each Receipt this Period  
100.00

Full Name (Last, First, Middle Initial)  
**B. Robert Osher**

Mailing Address 125 N. Raymond Avenue #309

City Pasadena State CA Zip Code 91103

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Robert Osher Investments

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
700.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 16 / 2014  
**Transaction ID : SA11AI.39213**

Amount of Each Receipt this Period  
200.00

Full Name (Last, First, Middle Initial)  
**C. Mrs. Claudette Ostrozny**

Mailing Address 1778 Trapper Drive

City Hernando State MS Zip Code 38632

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Retired

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 12 / 2014  
**Transaction ID : SA11AI.39220**

Amount of Each Receipt this Period  
100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 400.00

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 60 OF 195  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**FREEDOMWORKS FOR AMERICA**

Full Name (Last, First, Middle Initial)  
**A. Mrs. Lisa W. Pandelidis**

Mailing Address 1871 Grantley Rd

City York State PA Zip Code 17403

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Phylician

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 02 / 2014  
**Transaction ID : SA11AI.39251**

Amount of Each Receipt this Period  
1000.00

Full Name (Last, First, Middle Initial)  
**B. Barbara Peacock**

Mailing Address 7286 Snowberry Lane

City Canal Winchester State OH Zip Code 43110

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Retired

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
240.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 05 / 2014  
**Transaction ID : SA11AI.39302**

Amount of Each Receipt this Period  
50.00

Full Name (Last, First, Middle Initial)  
**C. Ms. Rochelle Pearl**

Mailing Address 5 Whispering Oaks Dr

City New Orleans State LA Zip Code 70123

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Retired

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
324.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 24 / 2014  
**Transaction ID : SA11AI.39305**

Amount of Each Receipt this Period  
54.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1104.00

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 61 OF 195
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**FREEDOMWORKS FOR AMERICA**

**A. Larry Peltier**  
Full Name (Last, First, Middle Initial)

Mailing Address 17953 Tribune Pl

City Granada Hills State CA Zip Code 91344

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Sales

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
550.00

Date of Receipt  
06 / 17 / 2014  
Transaction ID : SA11AI.39323

Amount of Each Receipt this Period  
250.00

**B. Ms. Darlene Pendery**  
Full Name (Last, First, Middle Initial)

Mailing Address 5700 Lighthouse Drive

City Flower Mound State TX Zip Code 75022

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
10000.00

Date of Receipt  
06 / 05 / 2014  
Transaction ID : SA11AI.39325

Amount of Each Receipt this Period  
10000.00

**C. Ambassador Augusta Petrone**  
Full Name (Last, First, Middle Initial)

Mailing Address P O Box 1037

City Dublin State NH Zip Code 03444

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
06 / 16 / 2014  
Transaction ID : SA11AI.39351

Amount of Each Receipt this Period  
300.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	10550.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 62 OF 195
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**FREEDOMWORKS FOR AMERICA**

**A. Mrs. Eugene Pinchuk**  
Full Name (Last, First, Middle Initial)

Mailing Address 5381 Ocean View Blvd

City La Canada Flintridge State CA Zip Code 91011

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
06 / 23 / 2014  
Transaction ID : SA11AI.39383

Amount of Each Receipt this Period  
200.00

**B. Richard L Poss**  
Full Name (Last, First, Middle Initial)

Mailing Address 568 Settlers Ridge Pkwy

City Woodbury State MN Zip Code 55129

FEC ID number of contributing federal political committee. **C**

Name of Employer Info Requested Occupation Info Requested

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
06 / 10 / 2014  
Transaction ID : SA11AI.39419

Amount of Each Receipt this Period  
50.00

**C. Jorja Price**  
Full Name (Last, First, Middle Initial)

Mailing Address 4000 Lemar Road

City Mercersburg State PA Zip Code 17236

FEC ID number of contributing federal political committee. **C**

Name of Employer Mercersburg Academy Occupation Accounts Payable Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
06 / 12 / 2014  
Transaction ID : SA11AI.39451

Amount of Each Receipt this Period  
200.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 450.00

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 63 OF 195
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**FREEDOMWORKS FOR AMERICA**

Full Name (Last, First, Middle Initial) <b>A. Arrow Pride</b>		Date of Receipt
Mailing Address 1845 128 Ave Se		<input type="text" value="06"/> / <input type="text" value="12"/> / <input type="text" value="2014"/>
City	State	Zip Code
Bellevue	WA	98005
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : SA11AI.39452</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
	Retired	<input type="text" value="100.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="250.00"/>	

Full Name (Last, First, Middle Initial) <b>B. W.j. Putnam</b>		Date of Receipt
Mailing Address 105 Dawson Trl		<input type="text" value="06"/> / <input type="text" value="10"/> / <input type="text" value="2014"/>
City	State	Zip Code
Georgetown	TX	78633
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : SA11AI.39471</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
	Retired	<input type="text" value="200.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="500.00"/>	

Full Name (Last, First, Middle Initial) <b>C. Donald Randolph</b>		Date of Receipt
Mailing Address 236 S Santa Cruz Ave. Ste D		<input type="text" value="06"/> / <input type="text" value="14"/> / <input type="text" value="2014"/>
City	State	Zip Code
Modesto	CA	95354
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : SA11AI.39498</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
Donald Randolph	Owner	<input type="text" value="50.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="400.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="350.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 64 OF 195
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**FREEDOMWORKS FOR AMERICA**

**A. Dr. Thomas Rathmann**  
Full Name (Last, First, Middle Initial)

Mailing Address 339 E Greens Dr

City Baton Rouge	State LA	Zip Code 70810
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Thomas Rathmann	Occupation Chiropractor
-------------------------------------	----------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	13	/	2014

**Transaction ID : SA11AI.39505**

Amount of Each Receipt this Period  
100.00

**B. Mrs. Patricia Remaklus**  
Full Name (Last, First, Middle Initial)

Mailing Address P O Box 35025

City North Chesterfield	State VA	Zip Code 23235
----------------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Willmann-bell, Inc.	Occupation Businesswoman
---	-----------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
350.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	16	/	2014

**Transaction ID : SA11AI.39536**

Amount of Each Receipt this Period  
350.00

**C. Tom Remyey**  
Full Name (Last, First, Middle Initial)

Mailing Address 970 Cove Point Ln.

City Tega Cay	State SC	Zip Code 29708
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation Retired
------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
395.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	09	/	2014

**Transaction ID : SA11AI.39537**

Amount of Each Receipt this Period  
50.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	



**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 65 OF 195  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**FREEDOMWORKS FOR AMERICA**

**A. Paul Richards**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1221 W. Pleasant St.  
 City Avon Park State FL Zip Code 33825  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Bravo Airlines Occupation Pilot  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 04 / 2014  
**Transaction ID : SA11AI.39562**  
 Amount of Each Receipt this Period  
 50.00

**B. Mrs. Lori Riecken**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 612 County Road U  
 City Lyons State NE Zip Code 68038  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Lori Riecken Occupation House Wife  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 09 / 2014  
**Transaction ID : SA11AI.39575**  
 Amount of Each Receipt this Period  
 75.00

**C. Wilfredo Rios**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 727 Waverly Point  
 City MacOn State GA Zip Code 31210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Wilfredo Rios Md Occupation Physician  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 13 / 2014  
**Transaction ID : SA11AI.39582**  
 Amount of Each Receipt this Period  
 200.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 325.00  
**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 66 OF 195
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**FREEDOMWORKS FOR AMERICA**

**A. Patricia Rodman**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5379 East Lake Road  
 City State Zip Code  
 Conesus NY 14435  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Diocese of Rochester Director of Religious Education  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 07 / 2014  
**Transaction ID : SA11AI.39622**  
 Amount of Each Receipt this Period  
 50.00

**B. Ms. Ernestina Rodriguez**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 9216 Samoline Ave  
 City State Zip Code  
 Downey CA 90240  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Retired  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 270.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 05 / 2014  
**Transaction ID : SA11AI.39624**  
 Amount of Each Receipt this Period  
 25.00

**C. Mr. Penn W. Rooker**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2473 Kirk Ln NW  
 City State Zip Code  
 Kennesaw GA 30152  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Retired  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 2000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 13 / 2014  
**Transaction ID : SA11AI.39655**  
 Amount of Each Receipt this Period  
 2000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	2075.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 67 OF 195
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**FREEDOMWORKS FOR AMERICA**

**A. Mr. John Roper**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 15 Providence Rd  
 City Westford State MA Zip Code 01886  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer John Roper Occupation Autobody  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 09 / 2014  
**Transaction ID : SA11AI.39658**  
 Amount of Each Receipt this Period  
 50.00

**B. Mr. Lawrence Russell Iii**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4275 Owens Rd Apt 531  
 City Evans State GA Zip Code 30809  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Info Requested Occupation Info Requested  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 23 / 2014  
**Transaction ID : SA11AI.39725**  
 Amount of Each Receipt this Period  
 250.00

**C. Michael Ryan**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 109 Donlin Ave  
 City Pass Christian State MS Zip Code 39571  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Retired Occupation Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 16 / 2014  
**Transaction ID : SA11AI.39738**  
 Amount of Each Receipt this Period  
 100.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	400.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 68 OF 195
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**FREEDOMWORKS FOR AMERICA**

**A. Mr. John Santner**  
Full Name (Last, First, Middle Initial)

Mailing Address 5399 Playa Vista Dr E307

City State Zip Code  
Playa Vista CA 90094

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Retired Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
240.00

Date of Receipt  
06 / 12 / 2014  
Transaction ID : SA11AI.39777

Amount of Each Receipt this Period  
200.00

**B. Marcelyn Sawyer Hirth**  
Full Name (Last, First, Middle Initial)

Mailing Address 104 E. Silverwood Ranch Estates

City State Zip Code  
Conroe TX 77384

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Chi St. Lukes Hospital the Woodlands Nurse Practitioner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
06 / 19 / 2014  
Transaction ID : SA11AI.39787

Amount of Each Receipt this Period  
100.00

**C. Ms. Grace Schnakenberg**  
Full Name (Last, First, Middle Initial)

Mailing Address 8541 E. Tonbridge Ct.

City State Zip Code  
Tucson AZ 85715

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Casa De La Luz Hospice Rn

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
06 / 27 / 2014  
Transaction ID : SA11AI.39824

Amount of Each Receipt this Period  
25.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 145.00

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 69 OF 195
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**FREEDOMWORKS FOR AMERICA**

**A. Mr. Phillip Schubert**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 44239 W Granite Dr  
 City Maricopa State AZ Zip Code 85139  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Sob-sea Robotics Occupation  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **300.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 23 / 2014  
**Transaction ID : SA11AI.39852**  
 Amount of Each Receipt this Period  
**300.00**

**B. Steven Schumacher**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 522 County Road 600n  
 City Neoga State IL Zip Code 62447  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Effingham Taxi Occupation Business Owner  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **300.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 15 / 2014  
**Transaction ID : SA11AI.39864**  
 Amount of Each Receipt this Period  
**50.00**

**C. Paul Silva**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 98 Isaacks Rd Apt 104  
 City Humble State TX Zip Code 77338  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Calvary Christian Fellowship Occupation Administration  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **230.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 12 / 2014  
**Transaction ID : SA11AI.39955**  
 Amount of Each Receipt this Period  
**50.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>400.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 70 OF 195
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**FREEDOMWORKS FOR AMERICA**

**A. Allen Simon**  
Full Name (Last, First, Middle Initial)

Mailing Address 1383 N Criss St

City Chandler State AZ Zip Code 85226

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 25 / 2014  
**Transaction ID : SA11AI.39965**

Amount of Each Receipt this Period  
 500.00

**B. Frank Slavik**  
Full Name (Last, First, Middle Initial)

Mailing Address 6232 Durban Dr

City Galloway State OH Zip Code 43119

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Restaurateur

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 04 / 2014  
**Transaction ID : SA11AI.39984**

Amount of Each Receipt this Period  
 50.00

**C. Mr. Burr Smith**  
Full Name (Last, First, Middle Initial)

Mailing Address 453 N. Lindbergh Blvd, 2nd Floor

City Saint Louis State MO Zip Code 63141

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Investor

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 25000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 30 / 2014  
**Transaction ID : SA11AI.39993**

Amount of Each Receipt this Period  
 25000.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 25550.00

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 71 OF 195
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**FREEDOMWORKS FOR AMERICA**

**A. Mrs. Margaret K. Smith**  
Full Name (Last, First, Middle Initial)

Mailing Address 9732 Lindsey Blake Ln

City State Zip Code  
Great Falls VA 22066

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
450.00

Date of Receipt  
06 / 18 / 2014  
Transaction ID : SA11AI.40027

Amount of Each Receipt this Period  
100.00

**B. Steve Smith**  
Full Name (Last, First, Middle Initial)

Mailing Address 7 Ledges Dr.

City State Zip Code  
Huntsville AL 35802

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Steve Smith Physician

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
700.00

Date of Receipt  
06 / 16 / 2014  
Transaction ID : SA11AI.40046

Amount of Each Receipt this Period  
500.00

**C. Richard Srednicki**  
Full Name (Last, First, Middle Initial)

Mailing Address 33575 Dreamcatcher Trl

City State Zip Code  
Steamboat Springs CO 80487

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
06 / 13 / 2014  
Transaction ID : SA11AI.40100

Amount of Each Receipt this Period  
500.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1100.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 72 OF 195  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**FREEDOMWORKS FOR AMERICA**

**A. Mr. Norman M Stern**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4017 Sable Loop Dr  
 City Lake Wales State FL Zip Code 33859  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ -70.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 23 / 2014  
**Transaction ID : SA11AI.40147**  
 Amount of Each Receipt this Period  
 20.00

**B. Karen Stokes**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 117 Osteen Hill Rd  
 City Pelzer State SC Zip Code 29669  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation Realtor  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 14 / 2014  
**Transaction ID : SA11AI.40177**  
 Amount of Each Receipt this Period  
 15.00

**C. Karen Stokes**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 117 Osteen Hill Rd  
 City Pelzer State SC Zip Code 29669  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation Realtor  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 30 / 2014  
**Transaction ID : SA11AI.40176**  
 Amount of Each Receipt this Period  
 100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 135.00  
**TOTAL** This Period (last page this line number only)..... ▶



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 73 OF 195
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**FREEDOMWORKS FOR AMERICA**

**A. Cary Strickland**  
Full Name (Last, First, Middle Initial)  
Mailing Address 2700 Shady Hill Ct  
City Grapevine State TX Zip Code 76051  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Southwest Airlines Occupation Pilot  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1100.00

Date of Receipt 06 / 09 / 2014  
**Transaction ID : SA11AI.40205**  
Amount of Each Receipt this Period 100.00

**B. Ms. Grace Strittmatter**  
Full Name (Last, First, Middle Initial)  
Mailing Address 943 Janet Ave  
City Lancaster State PA Zip Code 17601  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Info Requested Occupation Info Requested  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 350.00

Date of Receipt 06 / 18 / 2014  
**Transaction ID : SA11AI.40208**  
Amount of Each Receipt this Period 100.00

**C. Richard Sugden**  
Full Name (Last, First, Middle Initial)  
Mailing Address P O Box 2468  
City Jackson State WY Zip Code 83001  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Info Requested Occupation Info Requested  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 500.00

Date of Receipt 06 / 09 / 2014  
**Transaction ID : SA11AI.40224**  
Amount of Each Receipt this Period 500.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 700.00  
**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 74 OF 195
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**FREEDOMWORKS FOR AMERICA**

**A. Mr. Glenn Summerlin**  
Full Name (Last, First, Middle Initial)

Mailing Address 1133 Ragley Hall Rd NE

City	State	Zip Code
Atlanta	GA	30319

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
Retired	Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **350.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	18	/	2014

**Transaction ID : SA11AI.40239**

Amount of Each Receipt this Period  

100.00
--------

**B. Mr. Richard Swenson**  
Full Name (Last, First, Middle Initial)

Mailing Address 7011 W Sandpiper Ct

City	State	Zip Code
Milwaukee	WI	53223

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
	Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1200.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	12	/	2014

**Transaction ID : SA11AI.40260**

Amount of Each Receipt this Period  

200.00
--------

**C. Mr John Taylor**  
Full Name (Last, First, Middle Initial)

Mailing Address Po Box 416

City	State	Zip Code
Wink	TX	79789

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
John Taylor	Oilfield

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	04	/	2014

**Transaction ID : SA11AI.40298**

Amount of Each Receipt this Period  

100.00
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<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>400.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:	PAGE 75 OF 195
(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 12
	<input type="checkbox"/> 16
	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**FREEDOMWORKS FOR AMERICA**

Full Name (Last, First, Middle Initial)  
**A. William Thomas**

Mailing Address P. O. Box 7168

City	State	Zip Code
Clearlake	CA	95422

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
	Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **220.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**06 / 12 / 2014**

**Transaction ID : SA11AI.40339**

Amount of Each Receipt this Period  
**100.00**

Full Name (Last, First, Middle Initial)  
**B. Richard Thum**

Mailing Address 9606 Huebner Rd  
Ste 1

City	State	Zip Code
San Antonio	TX	78240

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
Five Star Cleaners	Owner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **450.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**06 / 23 / 2014**

**Transaction ID : SA11AI.40357**

Amount of Each Receipt this Period  
**100.00**

Full Name (Last, First, Middle Initial)  
**C. Mel Tolhurst**

Mailing Address 24 Alpine Dr

City	State	Zip Code
Perrineville	NJ	08535

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
	Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**06 / 28 / 2014**

**Transaction ID : SA11AI.40379**

Amount of Each Receipt this Period  
**100.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>300.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 76 OF 195
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**FREEDOMWORKS FOR AMERICA**

Full Name (Last, First, Middle Initial)  
**A. Mrs. Elsie M. Towner**

Mailing Address PO Box 549

City Litchfield Park State AZ Zip Code 85340

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
06 / 27 / 2014  
**Transaction ID : SA11AI.40392**

Amount of Each Receipt this Period  
50.00

Full Name (Last, First, Middle Initial)  
**B. Barry Traub**

Mailing Address P O Box 7908

City Rocky Mount State NC Zip Code 27804

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
06 / 25 / 2014  
**Transaction ID : SA11AI.40399**

Amount of Each Receipt this Period  
500.00

Full Name (Last, First, Middle Initial)  
**C. Ms. Yvonne Tschudi**

Mailing Address 1885 Saint Andrews Drive

City Moraga State CA Zip Code 94556

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
325.00

Date of Receipt  
06 / 12 / 2014  
**Transaction ID : SA11AI.40415**

Amount of Each Receipt this Period  
75.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 625.00

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 77 OF 195
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**FREEDOMWORKS FOR AMERICA**

Full Name (Last, First, Middle Initial) <b>A. Crystal Tucker</b>		Date of Receipt
Mailing Address 5913 Republic of Texas Blvd.		<input type="text" value="06"/> / <input type="text" value="20"/> / <input type="text" value="2014"/>
City	State	Zip Code
Austin	TX	78735
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : SA11AI.40417</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
	Homemaker	<input type="text" value="250.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="250.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Ralph Tucker</b>		Date of Receipt
Mailing Address 2539 Seven Pines Road		<input type="text" value="06"/> / <input type="text" value="06"/> / <input type="text" value="2014"/>
City	State	Zip Code
Greenville	NC	27834
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : SA11AI.40418</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
Ralph Tucker	Farmer	<input type="text" value="50.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="300.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Mrs. Carolyn Udell</b>		Date of Receipt
Mailing Address 409 10th St		<input type="text" value="06"/> / <input type="text" value="24"/> / <input type="text" value="2014"/>
City	State	Zip Code
New Orleans	LA	70124
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : SA11AI.40443</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
Info Requested	Info Requested	<input type="text" value="100.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="220.00"/>	
<input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="400.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 78 OF 195
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**FREEDOMWORKS FOR AMERICA**

Full Name (Last, First, Middle Initial) <b>A. Mrs. Linda Verhey</b>		Date of Receipt
Mailing Address 4170 N Marine Dr		M M M / D D D / Y Y Y Y Y Y 06 / 09 / 2014
City	State	Zip Code
Chicago	IL	60613
FEC ID number of contributing federal political committee.	Transaction ID : SA11AI.40491	
	Amount of Each Receipt this Period	
	35.00	
Name of Employer	Occupation	
Info Requested	Info Requested	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	245.00	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. John Verlander</b>		Date of Receipt
Mailing Address 4710 Rosinante Rd.		M M M / D D D / Y Y Y Y Y Y 06 / 04 / 2014
City	State	Zip Code
El Paso	TX	79922
FEC ID number of contributing federal political committee.	Transaction ID : SA11AI.40492	
	Amount of Each Receipt this Period	
	500.00	
Name of Employer	Occupation	
Verlander Enterprises Llc	Executive	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	600.00	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Eric A Vigen</b>		Date of Receipt
Mailing Address 23642 Clover Trl		M M M / D D D / Y Y Y Y Y Y 06 / 25 / 2014
City	State	Zip Code
Calabasas	CA	91302
FEC ID number of contributing federal political committee.	Transaction ID : SA11AI.40500	
	Amount of Each Receipt this Period	
	199.00	
Name of Employer	Occupation	
Airespring, Inc.	Cfo	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	398.00	
<input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	734.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 79 OF 195
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**FREEDOMWORKS FOR AMERICA**

Full Name (Last, First, Middle Initial) <b>A. Theresa Vinas</b>		Date of Receipt
Mailing Address 50 Harbour Drive South		<input type="text" value="06"/> / <input type="text" value="07"/> / <input type="text" value="2014"/>
City	State	Zip Code
Ocean Ridge	FL	33435
FEC ID number of contributing federal political committee.		Transaction ID : <b>SA11AI.40501</b>
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="50.00"/>
Name of Employer	Occupation	
Unemployed	Rn	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="300.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Mr. Chris Vinson</b>		Date of Receipt
Mailing Address 1989 Ethanwood Ave		<input type="text" value="06"/> / <input type="text" value="24"/> / <input type="text" value="2014"/>
City	State	Zip Code
The Villages	FL	32162
FEC ID number of contributing federal political committee.		Transaction ID : <b>SA11AI.40503</b>
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="300.00"/>
Name of Employer	Occupation	
Info Requested	Info Requested	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="300.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Ms. Carolyn Vollrath</b>		Date of Receipt
Mailing Address 10413 Fox Borough Ct.		<input type="text" value="06"/> / <input type="text" value="04"/> / <input type="text" value="2014"/>
City	State	Zip Code
Oakdale	CA	95361
FEC ID number of contributing federal political committee.		Transaction ID : <b>SA11AI.40513</b>
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="250.00"/>
Name of Employer	Occupation	
Carolyn Vollrath	Homemaker	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="350.00"/>	
<input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="600.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 80 OF 195
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**FREEDOMWORKS FOR AMERICA**

Full Name (Last, First, Middle Initial) <b>A. Ms. Janis Wash</b>		Date of Receipt MM / DD / YYYY 06 / 12 / 2014 <b>Transaction ID : SA11AI.40592</b>
Mailing Address 2055 N Recker Rd		Amount of Each Receipt this Period 100.00
City Mesa	State AZ	Zip Code 85215
FEC ID number of contributing federal political committee. C	Name of Employer University of Phoenix	Occupation Enrollment
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) <b>B. Ms. Janis Wash</b>		Date of Receipt MM / DD / YYYY 06 / 23 / 2014 <b>Transaction ID : SA11AI.40593</b>
Mailing Address 2055 N Recker Rd		Amount of Each Receipt this Period 150.00
City Mesa	State AZ	Zip Code 85215
FEC ID number of contributing federal political committee. C	Name of Employer University of Phoenix	Occupation Enrollment
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	

Full Name (Last, First, Middle Initial) <b>C. Wayne Wealer</b>		Date of Receipt MM / DD / YYYY 06 / 09 / 2014 <b>Transaction ID : SA11AI.40612</b>
Mailing Address 7921 W Blue Heron Way		Amount of Each Receipt this Period 100.00
City Tucson	State AZ	Zip Code 85743
FEC ID number of contributing federal political committee. C	Name of Employer	Occupation Retired
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 850.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	350.00
<b>TOTAL</b> This Period (last page this line number only).....▶	



**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 81 OF 195
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**FREEDOMWORKS FOR AMERICA**

**A. Mr. Lester L. Weindling**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 570 Lexington Ave  
 City New York State NY Zip Code 10022  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Retired Occupation  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **5000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 09 / 2014  
**Transaction ID : SA11AI.40629**  
 Amount of Each Receipt this Period  
**5000.00**

**B. Jeffrey Welsh**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 60 Commerce St  
 City Clinton State CT Zip Code 06413  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Bard Financial Services Occupation Investment Advisor  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 16 / 2014  
**Transaction ID : SA11AI.40646**  
 Amount of Each Receipt this Period  
**200.00**

**C. Thomas Welte**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 13360 Chambord St  
 City Brooksville State FL Zip Code 34613  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Rusco, Inc Occupation Owner  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 12 / 2014  
**Transaction ID : SA11AI.40650**  
 Amount of Each Receipt this Period  
**1000.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>6200.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 82 OF 195
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**FREEDOMWORKS FOR AMERICA**

**A. Mr. Robert White**  
Full Name (Last, First, Middle Initial)  
Mailing Address 15245 Gresham Road

City Mackinaw	State IL	Zip Code 61755
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Robert White	Occupation Cemetery Maintenance
----------------------------------	------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	24	/	2014

**Transaction ID : SA11AI.40682**

Amount of Each Receipt this Period  

50.00
-------

**B. Mr. Roger C. Wicks**  
Full Name (Last, First, Middle Initial)  
Mailing Address 3063 County Road 180

City Rainsville	State AL	Zip Code 35986
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Info Requested	Occupation Info Requested
------------------------------------	------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2014

**Transaction ID : SA11AI.40695**

Amount of Each Receipt this Period  

100.00
--------

**C. Mr. Scott Wilcox**  
Full Name (Last, First, Middle Initial)  
Mailing Address 3618 Rampart St

City Bakersfield	State CA	Zip Code 93306
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Heather Wilcox	Occupation Personal Caregiver
------------------------------------	----------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	15	/	2014

**Transaction ID : SA11AI.40702**

Amount of Each Receipt this Period  

50.00
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<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>200.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 83 OF 195
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**FREEDOMWORKS FOR AMERICA**

**A. Miss Joan Wright**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2232 Cabrillo Cir  
 City Lodi State CA Zip Code 95242  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation Retired Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 24 / 2014  
**Transaction ID : SA11AI.40806**  
 Amount of Each Receipt this Period  
 100.00

**B. Ms Michaelon Wright**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 201 W. Big Beaver Suite 1420  
 City Troy State MI Zip Code 48084  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation Homemaker  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 05 / 2014  
**Transaction ID : SA11AI.40810**  
 Amount of Each Receipt this Period  
 1000.00

**C. Mr. Earle Wymer**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3531 Hanover Ave  
 City Richmond State VA Zip Code 23221  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation Retired Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 18 / 2014  
**Transaction ID : SA11AI.40816**  
 Amount of Each Receipt this Period  
 300.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1400.00
<b>TOTAL</b> This Period (last page this line number only).....▶	267987.71

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 84 OF 195  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**FREEDOMWORKS FOR AMERICA**

**A.** Full Name (Last, First, Middle Initial)  
**JW, LLC**

Mailing Address 771 Corporate Drive Suite 300

City Lexington State KY Zip Code 40503

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1843.88

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : SA15.40888**

Amount of Each Receipt this Period  
1843.88

Security Deposit Refund

**B.** Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

**C.** Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1843.88
<b>TOTAL</b> This Period (last page this line number only).....▶	1843.88

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**FREEDOMWORKS FOR AMERICA**

Full Name (Last, First, Middle Initial)

**A. American Express-Merchant**

Mailing Address PO Box 360001

City Ft. Lauderdale State FL Zip Code 33336

Purpose of Disbursement  
Merchant Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
06 / 30 / 2014

Transaction ID : **SB21B.40886**

Amount of Each Disbursement this Period

312.55

Full Name (Last, First, Middle Initial)

**B. Anybill**

Mailing Address 1801 Pennsylvania Ave Suite 700

City Washington State DC Zip Code 20006

Purpose of Disbursement  
Accounting Services

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
06 / 17 / 2014

Transaction ID : **SB21B.40875**

Amount of Each Disbursement this Period

343.00

Full Name (Last, First, Middle Initial)

**C. AT&T**

Mailing Address 8005 Tysons Corner Center Ste. 3L

City McLean State VA Zip Code 22102

Purpose of Disbursement  
Telephone

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
06 / 13 / 2014

Transaction ID : **SB21B.40887**

Amount of Each Disbursement this Period

1180.50

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

1836.05

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**FREEDOMWORKS FOR AMERICA**

Full Name (Last, First, Middle Initial)

**A. AT&T**

Mailing Address 8005 Tysons Corner Center  
Ste. 3L

City McLean State VA Zip Code 22102

Purpose of Disbursement  
Mobile Devices

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : **SB21B.40881**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. Direct Mail Processors, Inc.**

Mailing Address 1150 Conrad Ct.

City Hagerstown State MD Zip Code 21740

Purpose of Disbursement  
Caging

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : **SB21B.40872**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. Freedomworks, Inc.**

Mailing Address 400 N Capitol St., NW  
Suite 735

City Washington State DC Zip Code 20001

Purpose of Disbursement  
Email/Social Media/Printing

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : **SB21B.40878**

Amount of Each Disbursement this Period

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**FREEDOMWORKS FOR AMERICA**

Full Name (Last, First, Middle Initial)

**A. Freedomworks, Inc.**

Mailing Address 400 N Capitol St., NW  
Suite 735

City Washington State DC Zip Code 20001

Purpose of Disbursement  
Fundraising Direct Mail Production

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
06 / 30 / 2014

**Transaction ID : SB21B.40879**

Amount of Each Disbursement this Period

37425.47

Full Name (Last, First, Middle Initial)

**B. Freedomworks, Inc.**

Mailing Address 400 N Capitol St., NW  
Suite 735

City Washington State DC Zip Code 20001

Purpose of Disbursement  
In-kind - Equipment Usage

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
06 / 30 / 2014

**Transaction ID : SB21B.40891**

Amount of Each Disbursement this Period

1250.00

Full Name (Last, First, Middle Initial)

**C. Freedomworks, Inc.**

Mailing Address 400 N Capitol St., NW  
Suite 735

City Washington State DC Zip Code 20001

Purpose of Disbursement  
In-kind - Travel

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
06 / 30 / 2014

**Transaction ID : SB21B.40892**

Amount of Each Disbursement this Period

2436.92

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

41112.39

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**FREEDOMWORKS FOR AMERICA**

Full Name (Last, First, Middle Initial)

**A. Freedomworks, Inc.**

Mailing Address 400 N Capitol St., NW  
Suite 735

City Washington State DC Zip Code 20001

Purpose of Disbursement  
In-kind - Travel

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
06 / 30 / 2014

**Transaction ID : SB21B.40999**

Amount of Each Disbursement this Period

22456.19

Full Name (Last, First, Middle Initial)

**B. Freedomworks, Inc.**

Mailing Address 400 N Capitol St., NW  
Suite 735

City Washington State DC Zip Code 20001

Purpose of Disbursement  
Adjust for IE In kinds

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
06 / 30 / 2014

**Transaction ID : SB21B.41000**

Amount of Each Disbursement this Period

-22456.19

Full Name (Last, First, Middle Initial)

**C. FTI Consulting Technology LLC**

Mailing Address 909 Commerce Road

City Annapolis State MD Zip Code 21401

Purpose of Disbursement  
Data Storage

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
06 / 17 / 2014

**Transaction ID : SB21B.40876**

Amount of Each Disbursement this Period

6345.00

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

6345.00



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**FREEDOMWORKS FOR AMERICA**

Full Name (Last, First, Middle Initial)

**A. Global Pay**

Mailing Address 10 Glenlake Pkwy, NE

City Atlanta State GA Zip Code 30328

Purpose of Disbursement  
Merchant Fees

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
06 / 30 / 2014

**Transaction ID : SB21B.40882**

Amount of Each Disbursement this Period

274.67

Full Name (Last, First, Middle Initial)

**B. Linemark**

Mailing Address 501 Prince Georges Blvd

City Upper Marlboro State MD Zip Code 20774

Purpose of Disbursement  
Postage

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
06 / 30 / 2014

**Transaction ID : SB21B.40880**

Amount of Each Disbursement this Period

1384.14

Full Name (Last, First, Middle Initial)

**C. Paypal**

Mailing Address 2211 N. First St.

City San Jose State CA Zip Code 95131

Purpose of Disbursement  
Online Processing

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
06 / 30 / 2014

**Transaction ID : SB21B.40883**

Amount of Each Disbursement this Period

2093.61

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

3752.42

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**FREEDOMWORKS FOR AMERICA**

Full Name (Last, First, Middle Initial)

**A. Paypal**

Mailing Address 2211 N. First St.

City San Jose State CA Zip Code 95131

Purpose of Disbursement  
Online Processing

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
06 / 30 / 2014

**Transaction ID : SB21B.40884**

Amount of Each Disbursement this Period

4119.01

Full Name (Last, First, Middle Initial)

**B. Paypal**

Mailing Address 2211 N. First St.

City San Jose State CA Zip Code 95131

Purpose of Disbursement  
Online Processing

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
06 / 30 / 2014

**Transaction ID : SB21B.40885**

Amount of Each Disbursement this Period

55.04

Full Name (Last, First, Middle Initial)

**C. Politico LLC**

Mailing Address 1100 Wilson Blvd  
6th Floor

City Arlington State VA Zip Code 22209

Purpose of Disbursement  
Research

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
06 / 17 / 2014

**Transaction ID : SB21B.40873**

Amount of Each Disbursement this Period

6281.55

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

10455.60

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**FREEDOMWORKS FOR AMERICA**

Full Name (Last, First, Middle Initial)

**A. Voter Gravity**

Mailing Address 121 East Main St.

City Purcellville State VA Zip Code 20132

Purpose of Disbursement  
Software

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
06 / 17 / 2014

**Transaction ID : SB21B.40877**

Amount of Each Disbursement this Period

8100.00

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

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

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

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

Amount of Each Disbursement this Period

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

8100.00

96884.55

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
FREEDOMWORKS FOR AMERICA
FEC IDENTIFICATION NUMBER
C C00499020
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee
AOL Advertising LLC
Mailing Address
770 Broadway-6th Floor
City
New York State
NY Zip Code
10003
Purpose of Expenditure
IE-McDaniel-Online Ads Category/
Type 004
Name of Federal Candidate
CHRISTOPHER BRIAN MCDANIEL
Support Oppose
Calendar Year-To-Date
Per Election for Office Sought 137702.20

Date of Public Distribution/Dissemination
06 / 16 / 2014
Amount
6500.00
Transaction ID : SE.35346
Date of Disbursement or Obligation
06 / 16 / 2014
Office Sought: House District: 00
Senate State: MS
Disbursement For: Primary General
2014 Other (specify) Runoff

Full Name of Payee
AOL Advertising LLC
Mailing Address
770 Broadway-6th Floor
City
New York State
NY Zip Code
10003
Purpose of Expenditure
IE-Cochran-Online Ads Category/
Type 004
Name of Federal Candidate
THAD COCHRAN
Support Oppose
Calendar Year-To-Date
Per Election for Office Sought 144202.20

Date of Public Distribution/Dissemination
06 / 16 / 2014
Amount
6500.00
Transaction ID : SE.35347
Date of Disbursement or Obligation
06 / 16 / 2014
Office Sought: House District: 00
Senate State: MS
Disbursement For: Primary General
2014 Other (specify) Runoff

(a) SUBTOTAL of Itemized Independent Expenditures 13000.00
(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.

R. Russ Walker
[Electronically Filed]
Date 07 / 18 / 2014
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
FREEDOMWORKS FOR AMERICA
FEC IDENTIFICATION NUMBER
C C00499020
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee
AOL Advertising LLC
Mailing Address
770 Broadway-6th Floor
City
New York State
NY Zip Code
10003
Purpose of Expenditure
IE-Lankford-Online Ads Category/
Type
004

Date of Public Distribution/Dissemination
06 / 18 / 2014
Amount
5850.00
Transaction ID : SE.35774
Date of Disbursement or Obligation
06 / 18 / 2014

Name of Federal Candidate
JAMES PAUL LANKFORD
Support
Oppose
Office Sought:
House
Senate
District: 00
State: OK

Disbursement For:
Primary
General
Other (specify)

Full Name of Payee
Arrowhead Graphics, Inc.
Mailing Address
508 Houston St
City
Greensboro State
NC Zip Code
27401
Purpose of Expenditure
IE-McDaniel-Bumper Stickers Category/
Type
004

Date of Public Distribution/Dissemination
06 / 11 / 2014
Amount
511.56
Transaction ID : SE.32583
Date of Disbursement or Obligation
06 / 11 / 2014

Name of Federal Candidate
CHRISTOPHER BRIAN MCDANIEL
Support
Oppose
Office Sought:
House
Senate
District: 00
State: MS

Disbursement For:
Primary
General
Other (specify)
Runoff

(a) SUBTOTAL of Itemized Independent Expenditures 6361.56
(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.

R. Russ Walker
[Electronically Filed]
Date 07 / 18 / 2014
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
FREEDOMWORKS FOR AMERICA
FEC IDENTIFICATION NUMBER
C C00499020
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee
Arrowhead Graphics, Inc.
Mailing Address 508 Houston St
City Greensboro State NC Zip Code 27401
Purpose of Expenditure IE-McDaniel-Lapel Pins Category/Type 004
Name of Federal Candidate CHRISTOPHER BRIAN MCDANIEL Support
Office Sought: Senate State: MS
Calendar Year-To-Date Per Election for Office Sought 5777.19
Disbursement For: Other (specify) Runoff

Full Name of Payee
Arrowhead Graphics, Inc.
Mailing Address 508 Houston St
City Greensboro State NC Zip Code 27401
Purpose of Expenditure IE-McDaniel-Door Hangers Category/Type 004
Name of Federal Candidate CHRISTOPHER BRIAN MCDANIEL Support
Office Sought: Senate State: MS
Calendar Year-To-Date Per Election for Office Sought 9894.08
Disbursement For: Other (specify) Runoff

(a) SUBTOTAL of Itemized Independent Expenditures 4213.14
(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.
R. Russ Walker
[Electronically Filed]
Date 07 / 18 / 2014
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
FREEDOMWORKS FOR AMERICA
FEC IDENTIFICATION NUMBER
C C00499020
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee
Arrowhead Graphics, Inc.
Mailing Address 508 Houston St
City Greensboro State NC Zip Code 27401
Purpose of Expenditure IE-McDaniel-Door Hangers Category/Type 004
Date of Public Distribution/Dissemination 06/12/2014
Amount 36148.51
Transaction ID : SE.32591
Date of Disbursement or Obligation 06/12/2014
Name of Federal Candidate CHRISTOPHER BRIAN MCDANIEL Support
Office Sought: Senate State: MS
Calendar Year-To-Date Per Election for Office Sought 46486.46
Disbursement For: Other (specify) Runoff

Full Name of Payee
Biloxi Airport
Mailing Address 14035 Airport Rd.
City Gulfport State MS Zip Code 39503
Purpose of Expenditure IE-McDaniel-Travel Category/Type 002
Date of Public Distribution/Dissemination 06/24/2014
Amount 4.48
Transaction ID : SE.40981
Date of Disbursement or Obligation 06/24/2014
Name of Federal Candidate CHRISTOPHER BRIAN MCDANIEL Support
Office Sought: Senate State: MS
Calendar Year-To-Date Per Election for Office Sought 171421.40
Disbursement For: Other (specify) Runoff

(a) SUBTOTAL of Itemized Independent Expenditures 36152.99
(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.
R. Russ Walker
[Electronically Filed]
Date 07/18/2014
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
FREEDOMWORKS FOR AMERICA
FEC IDENTIFICATION NUMBER
C C00499020
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee
Blue Top Cab
Mailing Address
1115 West Broad St.
City
Falls Church
State
VA
Zip Code
22046
Date of Public Distribution/Dissemination
06 / 24 / 2014
Amount
20.55
Transaction ID : SE.40984
Date of Disbursement or Obligation
06 / 24 / 2014
Purpose of Expenditure
IE-McDaniel-Travel
Category/Type
002
Name of Federal Candidate
CHRISTOPHER BRIAN MCDANIEL
Support
Office Sought:
Senate
State: MS
Calendar Year-To-Date
Per Election for Office Sought
171491.95
Disbursement For:
Other (specify)
Runoff

Full Name of Payee
Bright Roll
Mailing Address
343 Sansome St.
Ste. 600
City
San Francisco
State
CA
Zip Code
94104
Date of Public Distribution/Dissemination
06 / 14 / 2014
Amount
1250.00
Transaction ID : SE.32609
Date of Disbursement or Obligation
06 / 14 / 2014
Purpose of Expenditure
IE-McDaniel-Online Ads
Category/Type
004
Name of Federal Candidate
CHRISTOPHER BRIAN MCDANIEL
Support
Office Sought:
Senate
State: MS
Calendar Year-To-Date
Per Election for Office Sought
88504.43
Disbursement For:
Other (specify)
Runoff

(a) SUBTOTAL of Itemized Independent Expenditures..... 1270.55
(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.
R. Russ Walker
[Electronically Filed]
Date
07 / 18 / 2014
Signature



SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
FREEDOMWORKS FOR AMERICA
FEC IDENTIFICATION NUMBER
C C00499020
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee
Bright Roll
Mailing Address
343 Sansome St.
Ste. 600
City
San Francisco State
CA Zip Code
94104
Purpose of Expenditure
IE-Cochran-Online Ads
Category/
Type
004
Name of Federal Candidate
THAD COCHRAN
Support
Oppose
Calendar Year-To-Date
Per Election for Office Sought
89754.43

Date of Public Distribution/Dissemination
06 / 14 / 2014
Amount
1250.00
Transaction ID : SE.32610
Date of Disbursement or Obligation
06 / 14 / 2014
Office Sought:
House
Senate
District: 00
State: MS
Disbursement For:
Primary
General
Other (specify)
Runoff

Full Name of Payee
Cefco
Mailing Address
103 Grants Ferry Rd.
City
Brandon State
MS Zip Code
39042
Purpose of Expenditure
IE-McDaniel-Travel
Category/
Type
002
Name of Federal Candidate
CHRISTOPHER BRIAN MCDANIEL
Support
Oppose
Calendar Year-To-Date
Per Election for Office Sought
162107.80

Date of Public Distribution/Dissemination
06 / 23 / 2014
Amount
8.29
Transaction ID : SE.35727
Date of Disbursement or Obligation
06 / 23 / 2014
Office Sought:
House
Senate
District: 00
State: MS
Disbursement For:
Primary
General
Other (specify)
Runoff

(a) SUBTOTAL of Itemized Independent Expenditures..... 1258.29
(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.

R. Russ Walker
[Electronically Filed]
Date
07 / 18 / 2014
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
FREEDOMWORKS FOR AMERICA
FEC IDENTIFICATION NUMBER
C C00499020
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee: Cefco
Mailing Address: 103 Grants Ferry Rd.
City: Brandon, State: MS, Zip Code: 39042
Purpose of Expenditure: IE-McDaniel-Travel, Category/Type: 002
Date of Public Distribution/Dissemination: 06/24/2014
Amount: 5.38
Transaction ID: SE.35758
Date of Disbursement or Obligation: 06/24/2014
Name of Federal Candidate: CHRISTOPHER BRIAN MCDANIEL, Support
Office Sought: Senate, State: MS
Calendar Year-To-Date Per Election for Office Sought: 167541.98
Disbursement For: Other (specify) Runoff

Full Name of Payee: Chevron-MS
Mailing Address: 401 Hwy 40
City: McHenry, State: MS, Zip Code: 39561
Purpose of Expenditure: IE-McDaniel-Travel, Category/Type: 002
Date of Public Distribution/Dissemination: 06/20/2014
Amount: 39.89
Transaction ID: SE.35616
Date of Disbursement or Obligation: 06/20/2014
Name of Federal Candidate: CHRISTOPHER BRIAN MCDANIEL, Support
Office Sought: Senate, State: MS
Calendar Year-To-Date Per Election for Office Sought: 154671.98
Disbursement For: Other (specify) Runoff

(a) SUBTOTAL of Itemized Independent Expenditures: 45.27
(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.

R. Russ Walker
[Electronically Filed]
Date: 07/18/2014
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
FREEDOMWORKS FOR AMERICA
FEC IDENTIFICATION NUMBER
C C00499020
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee: Chick Fil-A-MS
Mailing Address: 3403 Halls Ferrd Rd.
City: Vicksburg, State: MS, Zip Code: 79180
Purpose of Expenditure: IE-Travel-McDaniel, Category/Type: 002
Date of Public Distribution/Dissemination: 06/21/2014
Amount: 48.01
Transaction ID: SE.35658
Date of Disbursement or Obligation: 06/21/2014
Name of Federal Candidate: CHRISTOPHER BRIAN MCDANIEL, Support
Office Sought: Senate, State: MS
Calendar Year-To-Date Per Election for Office Sought: 154838.02
Disbursement For: Other (specify) Runoff

Full Name of Payee: Corner Bakery-UT
Mailing Address: SLC Airport
City: Salt Lake City, State: UT, Zip Code: 84122
Purpose of Expenditure: IE-McDaniel-Travel, Category/Type: 002
Date of Public Distribution/Dissemination: 06/20/2014
Amount: 12.81
Transaction ID: SE.35620
Date of Disbursement or Obligation: 06/20/2014
Name of Federal Candidate: CHRISTOPHER BRIAN MCDANIEL, Support
Office Sought: Senate, State: MS
Calendar Year-To-Date Per Election for Office Sought: 154684.79
Disbursement For: Other (specify) Runoff

(a) SUBTOTAL of Itemized Independent Expenditures: 60.82
(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.
Signature: R. Russ Walker
Date: 07/18/2014
[Electronically Filed]

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
FREEDOMWORKS FOR AMERICA
FEC IDENTIFICATION NUMBER
C C00499020
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee: Cracker Barrel-MS
Mailing Address: 410 Riverwind Dr.
City: Pearl, State: MS, Zip Code: 39208
Purpose of Expenditure: IE-Travel-McDaniel, Category/Type: 002
Date of Public Distribution/Dissemination: 06/21/2014
Amount: 16.60
Transaction ID: SE.35662
Date of Disbursement or Obligation: 06/21/2014
Name of Federal Candidate: CHRISTOPHER BRIAN MCDANIEL, Support
Office Sought: Senate, State: MS
Calendar Year-To-Date Per Election for Office Sought: 154864.52
Disbursement For: Other (specify) Runoff

Full Name of Payee: Cracker Barrel-MS
Mailing Address: 410 Riverwind Dr.
City: Pearl, State: MS, Zip Code: 39208
Purpose of Expenditure: IE-Travel-McDaniel, Category/Type: 002
Date of Public Distribution/Dissemination: 06/22/2014
Amount: 9.84
Transaction ID: SE.35675
Date of Disbursement or Obligation: 06/22/2014
Name of Federal Candidate: CHRISTOPHER BRIAN MCDANIEL, Support
Office Sought: Senate, State: MS
Calendar Year-To-Date Per Election for Office Sought: 158742.90
Disbursement For: Other (specify) Runoff

(a) SUBTOTAL of Itemized Independent Expenditures: 26.44
(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.
Signature: R. Russ Walker
Date: 07/18/2014
[Electronically Filed]

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
FREEDOMWORKS FOR AMERICA
FEC IDENTIFICATION NUMBER
C C00499020
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee: Cracker Barrel-MS
Mailing Address: 410 Riverwind Dr.
City: Pearl, State: MS, Zip Code: 39208
Purpose of Expenditure: IE-McDaniel-Travel, Category/Type: 002
Date of Public Distribution/Dissemination: 06/23/2014
Amount: 18.33
Transaction ID: SE.35717
Date of Disbursement or Obligation: 06/23/2014
Name of Federal Candidate: CHRISTOPHER BRIAN MCDANIEL, Support
Office Sought: Senate, State: MS
Calendar Year-To-Date Per Election for Office Sought: 161372.91
Disbursement For: Other (specify) Runoff

Full Name of Payee: Cracker Barrel-MS
Mailing Address: 410 Riverwind Dr.
City: Pearl, State: MS, Zip Code: 39208
Purpose of Expenditure: IE-McDaniel-Travel, Category/Type: 002
Date of Public Distribution/Dissemination: 06/24/2014
Amount: 16.04
Transaction ID: SE.35756
Date of Disbursement or Obligation: 06/24/2014
Name of Federal Candidate: CHRISTOPHER BRIAN MCDANIEL, Support
Office Sought: Senate, State: MS
Calendar Year-To-Date Per Election for Office Sought: 167486.33
Disbursement For: Other (specify) Runoff

(a) SUBTOTAL of Itemized Independent Expenditures: 34.37
(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.
Signature: R. Russ Walker
[Electronically Filed]
Date: 07/18/2014

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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

Full Name of Payee <b>Crescent City Grill-MS</b>	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 06 / 22 / 2014
Mailing Address 3810 Hardy St.	Amount <span style="border: 1px solid black; padding: 2px;">96.58</span>
City Hattiesburg State MS Zip Code 39402	<b>Transaction ID : SE.35671</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 06 / 22 / 2014
Purpose of Expenditure IE-Travel-McDaniel Category/Type <span style="border: 1px solid black; padding: 2px;">002</span>	Name of Federal Candidate CHRISTOPHER BRIAN MCDANIEL <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: MS
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">158717.56</span>	Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▶ Runoff

Full Name of Payee <b>Crescent City Grill-MS</b>	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 06 / 23 / 2014
Mailing Address 3810 Hardy St.	Amount <span style="border: 1px solid black; padding: 2px;">15.00</span>
City Hattiesburg State MS Zip Code 39402	<b>Transaction ID : SE.35714</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 06 / 23 / 2014
Purpose of Expenditure IE-McDaniel-Travel Category/Type <span style="border: 1px solid black; padding: 2px;">002</span>	Name of Federal Candidate CHRISTOPHER BRIAN MCDANIEL <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: MS
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">161254.60</span>	Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▶ Runoff

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<span style="border: 1px solid black; padding: 2px;">111.58</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<span style="border: 1px solid black; padding: 2px;"> </span>
(c) <b>TOTAL</b> Independent Expenditures..... ▶	<span style="border: 1px solid black; padding: 2px;"> </span>

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.

*R. Russ Walker* [Electronically Filed] Date M M / D D / Y Y Y Y Y Y 07 / 18 / 2014

Signature \_\_\_\_\_

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
FREEDOMWORKS FOR AMERICA
FEC IDENTIFICATION NUMBER
C C00499020
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee
D'Lo Truck Stop-MS
Mailing Address Hwy 49
City DLo State MS Zip Code 39062
Purpose of Expenditure IE-Travel-McDaniel Category/Type 002
Name of Federal Candidate CHRISTOPHER BRIAN MCDANIEL
Calendar Year-To-Date Per Election for Office Sought 158733.06
Date of Public Distribution/Dissemination 06/22/2014
Amount 2.76
Transaction ID : SE.35674
Date of Disbursement or Obligation 06/22/2014
Office Sought: Senate State: MS
Disbursement For: Other (specify) Runoff

Full Name of Payee
D'Lo Truck Stop-MS
Mailing Address Hwy 49
City DLo State MS Zip Code 39062
Purpose of Expenditure IE-McDaniel-Travel Category/Type 002
Name of Federal Candidate CHRISTOPHER BRIAN MCDANIEL
Calendar Year-To-Date Per Election for Office Sought 162099.51
Date of Public Distribution/Dissemination 06/23/2014
Amount 34.57
Transaction ID : SE.35726
Date of Disbursement or Obligation 06/23/2014
Office Sought: Senate State: MS
Disbursement For: Other (specify) Runoff

(a) SUBTOTAL of Itemized Independent Expenditures 37.33
(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.
R. Russ Walker
[Electronically Filed]
Date 07/18/2014
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
FREEDOMWORKS FOR AMERICA
FEC IDENTIFICATION NUMBER
C C00499020
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee: Delta Airlines
Mailing Address: PO Box 20706
City: Atlanta, State: GA, Zip Code: 30320
Purpose of Expenditure: IE-McDaniel-Travel, Category/Type: 002
Name of Federal Candidate: CHRISTOPHER BRIAN MCDANIEL, Support
Office Sought: Senate, State: MS
Calendar Year-To-Date Per Election for Office Sought: 327663.35
Disbursement For: Primary, 2014
Transaction ID: SE.32557

Full Name of Payee: Delta Airlines
Mailing Address: PO Box 20706
City: Atlanta, State: GA, Zip Code: 30320
Purpose of Expenditure: IE-McDaniel-Travel, Category/Type: 002
Name of Federal Candidate: CHRISTOPHER BRIAN MCDANIEL, Support
Office Sought: Senate, State: MS
Calendar Year-To-Date Per Election for Office Sought: 131202.20
Disbursement For: Other (specify) Runoff, 2014
Transaction ID: SE.32627

(a) SUBTOTAL of Itemized Independent Expenditures: 479.00
(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.

R. Russ Walker
[Electronically Filed]
Date: 07 / 18 / 2014
Signature



SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
FREEDOMWORKS FOR AMERICA
FEC IDENTIFICATION NUMBER
C C00499020
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee: Delta Airlines
Mailing Address: PO Box 20706
City: Atlanta, State: GA, Zip Code: 30320
Purpose of Expenditure: IE-McDaniel-Travel, Category/Type: 002
Name of Federal Candidate: CHRISTOPHER BRIAN MCDANIEL, Support
Office Sought: Senate, State: MS
Calendar Year-To-Date Per Election for Office Sought: 152539.60
Disbursement For: Other (specify) Runoff

Full Name of Payee: Delta Airlines
Mailing Address: PO Box 20706
City: Atlanta, State: GA, Zip Code: 30320
Purpose of Expenditure: IE-Travel-McDaniel, Category/Type: 002
Name of Federal Candidate: CHRISTOPHER BRIAN MCDANIEL, Support
Office Sought: Senate, State: MS
Calendar Year-To-Date Per Election for Office Sought: 158127.79
Disbursement For: Other (specify) Runoff

(a) SUBTOTAL of Itemized Independent Expenditures: 3978.02
(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.
Signature: R. Russ Walker
Date: 07/18/2014

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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

Full Name of Payee <b>Delta Airlines</b>	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 06 / 24 / 2014
Mailing Address PO Box 20706	Amount <span style="border: 1px solid black; padding: 2px;">60.00</span>
City State Zip Code Atlanta GA 30320	<b>Transaction ID : SE.40973</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 06 / 24 / 2014
Purpose of Expenditure IE-McDaniel-Travel	Category/Type <span style="border: 1px solid black; padding: 2px;">002</span>
Name of Federal Candidate CHRISTOPHER BRIAN MCDANIEL	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: <u>00</u> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>MS</u>
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">171373.72</span>	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input checked="" type="checkbox"/> Other (specify) ▶ <u>Runoff</u>

Full Name of Payee <b>Delta Airlines</b>	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 06 / 24 / 2014
Mailing Address PO Box 20706	Amount <span style="border: 1px solid black; padding: 2px;">50.00</span>
City State Zip Code Atlanta GA 30320	<b>Transaction ID : SE.40983</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 06 / 24 / 2014
Purpose of Expenditure IE-McDaniel-Travel	Category/Type <span style="border: 1px solid black; padding: 2px;">002</span>
Name of Federal Candidate CHRISTOPHER BRIAN MCDANIEL	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: <u>00</u> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>MS</u>
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">171471.40</span>	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input checked="" type="checkbox"/> Other (specify) ▶ <u>Runoff</u>

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<span style="border: 1px solid black; padding: 2px;">110.00</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<span style="border: 1px solid black; padding: 2px;"> </span>
(c) <b>TOTAL</b> Independent Expenditures..... ▶	<span style="border: 1px solid black; padding: 2px;"> </span>

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.

*R. Russ Walker*

Signature \_\_\_\_\_ [Electronically Filed] Date M M / D D / Y Y Y Y Y Y  
07 / 18 / 2014

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
FREEDOMWORKS FOR AMERICA
FEC IDENTIFICATION NUMBER
C C00499020
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee: Delta Airlines
Mailing Address: PO Box 20706
City: Atlanta, State: GA, Zip Code: 30320
Purpose of Expenditure: IE-McDaniel-Travel
Category/Type: 002
Date of Public Distribution/Dissemination: 06/24/2014
Amount: 9.99
Transaction ID: SE.40987
Date of Disbursement or Obligation: 06/24/2014
Name of Federal Candidate: CHRISTOPHER BRIAN MCDANIEL
Support: [X]
Office Sought: Senate
State: MS
Calendar Year-To-Date Per Election for Office Sought: 171497.66
Disbursement For: Other (specify) Runoff

Full Name of Payee: Mary Ensor
Mailing Address: 310 Hamlet Rd.
City: Summerville, State: SC, Zip Code: 29485
Purpose of Expenditure: IE-McDaniel-Travel Stipend
Category/Type: 002
Date of Public Distribution/Dissemination: 06/20/2014
Amount: 500.00
Transaction ID: SE.35591
Date of Disbursement or Obligation: 06/20/2014
Name of Federal Candidate: CHRISTOPHER BRIAN MCDANIEL
Support: [X]
Office Sought: Senate
State: MS
Calendar Year-To-Date Per Election for Office Sought: 154049.14
Disbursement For: Other (specify) Runoff

(a) SUBTOTAL of Itemized Independent Expenditures: 509.99
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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Signature: R. Russ Walker
Date: 07/18/2014

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
FREEDOMWORKS FOR AMERICA
FEC IDENTIFICATION NUMBER
C C00499020
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee
Enterprise Rent A Car-MS
Mailing Address
8455 Tennessee Ave.
City
Gulfport State
MS Zip Code
39501
Purpose of Expenditure
IE-Travel-McDaniel Category/
Type 002
Name of Federal Candidate
CHRISTOPHER BRIAN MCDANIEL
Support
Office Sought:
House District: 00
Senate State: MS
Calendar Year-To-Date
Per Election for Office Sought
158620.98

Date of Public Distribution/Dissemination
06 / 22 / 2014
Amount
131.69
Transaction ID : SE.35670
Date of Disbursement or Obligation
06 / 22 / 2014
Disbursement For:
Primary General
Other (specify) Runoff

Full Name of Payee
Enterprise Rent A Car-MS
Mailing Address
8455 Tennessee Ave.
City
Gulfport State
MS Zip Code
39501
Purpose of Expenditure
IE-McDaniel-Travel Adjustment Category/
Type 002
Name of Federal Candidate
CHRISTOPHER BRIAN MCDANIEL
Support
Office Sought:
House District: 00
Senate State: MS
Calendar Year-To-Date
Per Election for Office Sought
171487.67

Date of Public Distribution/Dissemination
06 / 24 / 2014
Amount
-4.28
Transaction ID : SE.40986
Date of Disbursement or Obligation
06 / 24 / 2014
Disbursement For:
Primary General
Other (specify) Runoff

(a) SUBTOTAL of Itemized Independent Expenditures 127.41
(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.

R. Russ Walker
[Electronically Filed]
Date 07 / 18 / 2014
Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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

Full Name of Payee <b>Facebook</b>	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 06 / 14 / 2014
Mailing Address 15161 Collection Center Dr.	Amount <span style="border: 1px solid black; padding: 2px;">4000.00</span>
City State Zip Code Chicago IL 60693	
Purpose of Expenditure IE-McDaniel-Online Ads	Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>
Name of Federal Candidate CHRISTOPHER BRIAN MCDANIEL	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 06 / 14 / 2014
Name of Federal Candidate CHRISTOPHER BRIAN MCDANIEL	Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: MS
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">93754.43</span>	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input checked="" type="checkbox"/> Other (specify) ▶ Runoff

Full Name of Payee <b>Facebook</b>	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 06 / 14 / 2014
Mailing Address 15161 Collection Center Dr.	Amount <span style="border: 1px solid black; padding: 2px;">4000.00</span>
City State Zip Code Chicago IL 60693	
Purpose of Expenditure IE-Cochran-Online Ads	Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>
Name of Federal Candidate THAD COCHRAN	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 06 / 14 / 2014
Name of Federal Candidate THAD COCHRAN	Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: MS
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">97754.43</span>	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input checked="" type="checkbox"/> Other (specify) ▶ Runoff

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<span style="border: 1px solid black; padding: 2px;">8000.00</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<span style="border: 1px solid black; padding: 2px;"> </span>
(c) <b>TOTAL</b> Independent Expenditures..... ▶	<span style="border: 1px solid black; padding: 2px;"> </span>

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.

*R. Russ Walker*

Signature \_\_\_\_\_ [Electronically Filed] Date M M / D D / Y Y Y Y Y Y  
07 / 18 / 2014

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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

Full Name of Payee <b>Facebook</b>	Date of Public Distribution/Dissemination MM / DD / YYYY 06 / 17 / 2014
Mailing Address 15161 Collection Center Dr.	Amount 4918.68
City Chicago      State IL      Zip Code 60693	<b>Transaction ID : SE.35543</b>
Purpose of Expenditure IE-Shannon-Online Ads	Date of Disbursement or Obligation MM / DD / YYYY 06 / 17 / 2014
Name of Federal Candidate T W SHANNON	<input checked="" type="checkbox"/> Support    Office Sought: <input type="checkbox"/> House    District: 00 <input type="checkbox"/> Oppose <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate    State: OK
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

5346.92

Full Name of Payee <b>Facebook</b>	Date of Public Distribution/Dissemination MM / DD / YYYY 06 / 17 / 2014
Mailing Address 15161 Collection Center Dr.	Amount 2000.00
City Chicago      State IL      Zip Code 60693	<b>Transaction ID : SE.35544</b>
Purpose of Expenditure IE-Lankford-Online Ads	Date of Disbursement or Obligation MM / DD / YYYY 06 / 17 / 2014
Name of Federal Candidate JAMES PAUL LANKFORD	<input type="checkbox"/> Support    Office Sought: <input type="checkbox"/> House    District: 00 <input checked="" type="checkbox"/> Oppose <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate    State: OK
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

7346.92

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	6918.68
(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.

*R. Russ Walker*  
Signature

[Electronically Filed]

Date MM / DD / YYYY  
07 / 18 / 2014

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
FREEDOMWORKS FOR AMERICA
FEC IDENTIFICATION NUMBER
C C00499020
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee
Freedomworks, Inc.
Mailing Address
400 N Capitol St., NW
Suite 735
City
Washington State
DC Zip Code
20001
Purpose of Expenditure
IE-McDaniel-Travel
Category/Type
002
Name of Federal Candidate
CHRISTOPHER BRIAN MCDANIEL
Support
Calendar Year-To-Date
Per Election for Office Sought
327456.35

Date of Public Distribution/Dissemination
06 / 01 / 2014
Amount
148.19
Transaction ID : SE.32561
Date of Disbursement or Obligation
06 / 01 / 2014
Office Sought:
House District: 00
Senate State: MS
Disbursement For:
Primary General
Other (specify)

Full Name of Payee
Freedomworks, Inc.
Mailing Address
400 N Capitol St., NW
Suite 735
City
Washington State
DC Zip Code
20001
Purpose of Expenditure
IE-McDaniel-Email/Social Media/Printing
Category/Type
004
Name of Federal Candidate
CHRISTOPHER BRIAN MCDANIEL
Support
Calendar Year-To-Date
Per Election for Office Sought
328928.71

Date of Public Distribution/Dissemination
06 / 02 / 2014
Amount
1183.68
Transaction ID : SE.32560
Date of Disbursement or Obligation
06 / 02 / 2014
Office Sought:
House District: 00
Senate State: MS
Disbursement For:
Primary General
Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 1331.87
(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.

R. Russ Walker
[Electronically Filed]
Date 07 / 18 / 2014
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
FREEDOMWORKS FOR AMERICA
FEC IDENTIFICATION NUMBER
C C00499020
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee
Freedomworks, Inc.
Mailing Address
400 N Capitol St., NW
Suite 735
City
Washington State
DC Zip Code
20001
Purpose of Expenditure
IE-McDaniel-Travel
Category/Type
002
Name of Federal Candidate
CHRISTOPHER BRIAN MCDANIEL
Support
Office Sought:
House District: 00
President Senate State: MS
Calendar Year-To-Date
Per Election for Office Sought
330988.38

Date of Public Distribution/Dissemination
06 / 02 / 2014
Amount
2059.67
Transaction ID : SE.32562
Date of Disbursement or Obligation
06 / 02 / 2014
Disbursement For:
Primary General
Other (specify)

Full Name of Payee
Freedomworks, Inc.
Mailing Address
400 N Capitol St., NW
Suite 735
City
Washington State
DC Zip Code
20001
Purpose of Expenditure
IE-Birman-Email/Social Media/Printing
Category/Type
004
Name of Federal Candidate
IGOR A BIRMAN
Support
Office Sought:
House District: 07
President Senate State: CA
Calendar Year-To-Date
Per Election for Office Sought
28969.79

Date of Public Distribution/Dissemination
06 / 02 / 2014
Amount
43.37
Transaction ID : SE.40893
Date of Disbursement or Obligation
06 / 02 / 2014
Disbursement For:
Primary General
Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 2103.04
(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.

R. Russ Walker
[Electronically Filed]
Date 07 / 18 / 2014
Signature



**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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

Full Name of Payee <b>Freedomworks, Inc.</b>	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 06 / 02 / 2014
Mailing Address 400 N Capitol St., NW Suite 735	Amount <span style="border: 1px solid black; padding: 2px;">4.56</span>
City Washington State DC Zip Code 20001	<b>Transaction ID : SE.40894</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 06 / 02 / 2014
Purpose of Expenditure IE-Schultz-Email/Social Media/Printing	Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>
Name of Federal Candidate MATTHEW DAVID SCHULTZ	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 03 State: IA
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">10859.53</span>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <b>Freedomworks, Inc.</b>	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 06 / 02 / 2014
Mailing Address 400 N Capitol St., NW Suite 735	Amount <span style="border: 1px solid black; padding: 2px;">4.56</span>
City Washington State DC Zip Code 20001	<b>Transaction ID : SE.40895</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 06 / 02 / 2014
Purpose of Expenditure IE-Mathis-Email/Social Media/Printing	Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>
Name of Federal Candidate CHAD DR MATHIS	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 06 State: AL
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">30572.72</span>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....▶	<span style="border: 1px solid black; padding: 2px;">9.12</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures.....▶	<span style="border: 1px solid black; padding: 2px;"> </span>
(c) <b>TOTAL</b> Independent Expenditures.....▶	<span style="border: 1px solid black; padding: 2px;"> </span>

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.

*R. Russ Walker*  
Signature

[Electronically Filed]

Date M M / D D / Y Y Y Y Y Y  
07 / 18 / 2014

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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

Full Name of Payee <b>Freedomworks, Inc.</b>	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 06 / 02 / 2014
Mailing Address 400 N Capitol St., NW Suite 735	Amount <span style="border: 1px solid black; padding: 2px;">4.56</span>
City Washington State DC Zip Code 20001	<b>Transaction ID : SE.40896</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 06 / 02 / 2014
Purpose of Expenditure IE-Rosendale-Email/Social Media/Printing	Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>
Name of Federal Candidate MATT ROSENDALE	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> President State: MT
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">4.56</span>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <b>Freedomworks, Inc.</b>	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 06 / 03 / 2014
Mailing Address 400 N Capitol St., NW Suite 735	Amount <span style="border: 1px solid black; padding: 2px;">519.39</span>
City Washington State DC Zip Code 20001	<b>Transaction ID : SE.32569</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 06 / 03 / 2014
Purpose of Expenditure IE-McDaniel-Travel	Category/Type <span style="border: 1px solid black; padding: 2px;">002</span>
Name of Federal Candidate CHRISTOPHER BRIAN MCDANIEL	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President State: MS
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">331507.77</span>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<span style="border: 1px solid black; padding: 2px;">523.95</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<span style="border: 1px solid black; padding: 2px;"> </span>
(c) <b>TOTAL</b> Independent Expenditures..... ▶	<span style="border: 1px solid black; padding: 2px;"> </span>

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.

*R. Russ Walker* [Electronically Filed] Date M M / D D / Y Y Y Y Y Y  
07 / 18 / 2014

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
FREEDOMWORKS FOR AMERICA
FEC IDENTIFICATION NUMBER
C C00499020
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee
Freedomworks, Inc.
Mailing Address
400 N Capitol St., NW
Suite 735
City
Washington State
DC Zip Code
20001
Purpose of Expenditure
IE-McDaniel-Email/Social Media/Printing
Category/Type
004
Name of Federal Candidate
CHRISTOPHER BRIAN MCDANIEL
Support
Office Sought:
House District: 00
Senate State: MS
Calendar Year-To-Date
Per Election for Office Sought
333573.43

Date of Public Distribution/Dissemination
06 / 03 / 2014
Amount
2065.66
Transaction ID : SE.32570
Date of Disbursement or Obligation
06 / 03 / 2014
Disbursement For:
Primary General
Other (specify)

Full Name of Payee
Freedomworks, Inc.
Mailing Address
400 N Capitol St., NW
Suite 735
City
Washington State
DC Zip Code
20001
Purpose of Expenditure
IE-Birman-Email/Social Media/Printing
Category/Type
004
Name of Federal Candidate
IGOR A BIRMAN
Support
Office Sought:
House District: 07
Senate State: CA
Calendar Year-To-Date
Per Election for Office Sought
29085.93

Date of Public Distribution/Dissemination
06 / 03 / 2014
Amount
116.14
Transaction ID : SE.40897
Date of Disbursement or Obligation
06 / 03 / 2014
Disbursement For:
Primary General
Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 2181.80
(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.

R. Russ Walker
[Electronically Filed]
Date
07 / 18 / 2014
Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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

Full Name of Payee <b>Freedomworks, Inc.</b>	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 06 / 03 / 2014
Mailing Address 400 N Capitol St., NW Suite 735	Amount <span style="border: 1px solid black; padding: 2px;">38.51</span>
City Washington State DC Zip Code 20001	<b>Transaction ID : SE.40899</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 06 / 03 / 2014
Purpose of Expenditure IE-Schultz-Email/Social Media/Printing	Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>
Name of Federal Candidate MATTHEW DAVID SCHULTZ	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 03 State: IA
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">10898.04</span>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <b>Freedomworks, Inc.</b>	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 06 / 03 / 2014
Mailing Address 400 N Capitol St., NW Suite 735	Amount <span style="border: 1px solid black; padding: 2px;">77.33</span>
City Washington State DC Zip Code 20001	<b>Transaction ID : SE.40900</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 06 / 03 / 2014
Purpose of Expenditure IE-Mathis-Email/Social Media/Printing	Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>
Name of Federal Candidate CHAD DR MATHIS	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 06 State: AL
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">30650.05</span>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....▶	<span style="border: 1px solid black; padding: 2px;">115.84</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures.....▶	<span style="border: 1px solid black; padding: 2px;"> </span>
(c) <b>TOTAL</b> Independent Expenditures.....▶	<span style="border: 1px solid black; padding: 2px;"> </span>

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.

*R. Russ Walker*  
Signature

[Electronically Filed] Date M M / D D / Y Y Y Y Y Y  
07 / 18 / 2014

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
FREEDOMWORKS FOR AMERICA
FEC IDENTIFICATION NUMBER
C C00499020
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee: Freedomworks, Inc.
Mailing Address: 400 N Capitol St., NW Suite 735
City: Washington State: DC Zip Code: 20001
Purpose of Expenditure: IE-Rosendale-Email/Social Media/Printing
Category/Type: 004
Name of Federal Candidate: MATT ROSENDALE
Support: [X] Oppose: [ ]
Office Sought: [X] House District: 01 State: MT
Amount: 38.51
Transaction ID: SE.40901
Date of Disbursement or Obligation: 06/03/2014
Calendar Year-To-Date Per Election for Office Sought: 43.07
Disbursement For: [X] Primary [ ] General 2014

Full Name of Payee: Freedomworks, Inc.
Mailing Address: 400 N Capitol St., NW Suite 735
City: Washington State: DC Zip Code: 20001
Purpose of Expenditure: IE-Landrieu-Email/Social Media/Printing
Category/Type: 004
Name of Federal Candidate: MARY L LANDRIEU
Support: [ ] Oppose: [X]
Office Sought: [ ] House District: 00 State: LA
Amount: 38.82
Transaction ID: SE.40902
Date of Disbursement or Obligation: 06/03/2014
Calendar Year-To-Date Per Election for Office Sought: 7956.78
Disbursement For: [X] Primary [ ] General 2014

(a) SUBTOTAL of Itemized Independent Expenditures: 77.33
(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.
Signature: R. Russ Walker [Electronically Filed] Date: 07/18/2014

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
FREEDOMWORKS FOR AMERICA
FEC IDENTIFICATION NUMBER
C C00499020
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee: Freedomworks, Inc.
Mailing Address: 400 N Capitol St., NW Suite 735
City: Washington State: DC Zip Code: 20001
Purpose of Expenditure: IE-McDaniel-Travel Category/Type: 002
Name of Federal Candidate: CHRISTOPHER BRIAN MCDANIEL
Calendar Year-To-Date Per Election for Office Sought: 3064.23
Date of Public Distribution/Dissemination: 06/04/2014
Amount: 2422.23
Transaction ID: SE.35748
Date of Disbursement or Obligation: 06/04/2014
Office Sought: Senate State: MS
Disbursement For: Other (specify) Runoff

Full Name of Payee: Freedomworks, Inc.
Mailing Address: 400 N Capitol St., NW Suite 735
City: Washington State: DC Zip Code: 20001
Purpose of Expenditure: IE-McDaniel-Email/Social Media/Printing Category/Type: 004
Name of Federal Candidate: CHRISTOPHER BRIAN MCDANIEL
Calendar Year-To-Date Per Election for Office Sought: 4123.33
Date of Public Distribution/Dissemination: 06/04/2014
Amount: 1059.10
Transaction ID: SE.35749
Date of Disbursement or Obligation: 06/04/2014
Office Sought: Senate State: MS
Disbursement For: Other (specify) Runoff

(a) SUBTOTAL of Itemized Independent Expenditures: 3481.33
(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.

R. Russ Walker
[Electronically Filed]
Date: 07/18/2014
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
FREEDOMWORKS FOR AMERICA
FEC IDENTIFICATION NUMBER
C C00499020
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee: Freedomworks, Inc.
Mailing Address: 400 N Capitol St., NW Suite 735
City: Washington State: DC Zip Code: 20001
Purpose of Expenditure: IE-McDaniel-Email/Social Media/Printing
Category/Type: 004
Name of Federal Candidate: CHRISTOPHER BRIAN MCDANIEL
Office Sought: Senate State: MS
Amount: 250.67
Transaction ID: SE.32574
Date of Disbursement or Obligation: 06/05/2014
Calendar Year-To-Date Per Election for Office Sought: 4374.00
Disbursement For: Other (specify) Runoff

Full Name of Payee: Freedomworks, Inc.
Mailing Address: 400 N Capitol St., NW Suite 735
City: Washington State: DC Zip Code: 20001
Purpose of Expenditure: IE-Begich-Email/Social Media/Printing
Category/Type: 004
Name of Federal Candidate: MARK BEGICH
Office Sought: Senate State: AK
Amount: 6.62
Transaction ID: SE.40903
Date of Disbursement or Obligation: 06/05/2014
Calendar Year-To-Date Per Election for Office Sought: 6.62
Disbursement For: General

(a) SUBTOTAL of Itemized Independent Expenditures: 257.29
(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.

R. Russ Walker
[Electronically Filed]
Date: 07/18/2014
Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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

Full Name of Payee <b>Freedomworks, Inc.</b>	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 06 / 05 / 2014
Mailing Address 400 N Capitol St., NW Suite 735	Amount <span style="border: 1px solid black; padding: 2px;">6.62</span>
City Washington State DC Zip Code 20001	<b>Transaction ID : SE.40904</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 06 / 05 / 2014
Purpose of Expenditure IE-Pryor-Email/Social Media/Printing	Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>
Name of Federal Candidate MARK LUNSFORD PRYOR	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: 00 State: AR
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">14.85</span>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <b>Freedomworks, Inc.</b>	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 06 / 05 / 2014
Mailing Address 400 N Capitol St., NW Suite 735	Amount <span style="border: 1px solid black; padding: 2px;">6.62</span>
City Washington State DC Zip Code 20001	<b>Transaction ID : SE.40905</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 06 / 05 / 2014
Purpose of Expenditure IE-Landrieu-Email/Social Media/Printing	Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>
Name of Federal Candidate MARY L LANDRIEU	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: 00 State: LA
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">7963.40</span>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<span style="border: 1px solid black; padding: 2px;">13.24</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<span style="border: 1px solid black; padding: 2px;"> </span>
(c) <b>TOTAL</b> Independent Expenditures..... ▶	<span style="border: 1px solid black; padding: 2px;"> </span>

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.

*R. Russ Walker* [Electronically Filed] Date M M / D D / Y Y Y Y Y Y  
07 / 18 / 2014

Signature



SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
FREEDOMWORKS FOR AMERICA
FEC IDENTIFICATION NUMBER
C C00499020
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee
Freedomworks, Inc.
Mailing Address
400 N Capitol St., NW
Suite 735
City
Washington State
DC Zip Code
20001
Purpose of Expenditure
IE-Brannon-Email/Social Media/Printing
Category/Type
004
Name of Federal Candidate
GREGORY JOSEPH BRANNON
Support
Office Sought:
Senate State:
NC
Calendar Year-To-Date
Per Election for Office Sought
6.62

Date of Public Distribution/Dissemination
06 / 05 / 2014
Amount
6.62
Transaction ID : SE.40906
Date of Disbursement or Obligation
06 / 05 / 2014
Disbursement For:
Other (specify)
Runoff

Full Name of Payee
Freedomworks, Inc.
Mailing Address
400 N Capitol St., NW
Suite 735
City
Washington State
DC Zip Code
20001
Purpose of Expenditure
IE-Sasse-Email/Social Media/Printing
Category/Type
004
Name of Federal Candidate
BENJAMIN E SASSE
Support
Office Sought:
Senate State:
NE
Calendar Year-To-Date
Per Election for Office Sought
18.11

Date of Public Distribution/Dissemination
06 / 05 / 2014
Amount
18.11
Transaction ID : SE.40907
Date of Disbursement or Obligation
06 / 05 / 2014
Disbursement For:
General
Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures..... 24.73
(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.

R. Russ Walker
[Electronically Filed]
Date
07 / 18 / 2014
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
FREEDOMWORKS FOR AMERICA
FEC IDENTIFICATION NUMBER
C C00499020
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee
Freedomworks, Inc.
Mailing Address
400 N Capitol St., NW
Suite 735
City
Washington State
DC Zip Code
20001
Purpose of Expenditure
IE-Franken-Email/Social Media/Printing
Category/Type
004
Name of Federal Candidate
AL FRANKEN
Support Oppose
Calendar Year-To-Date
Per Election for Office Sought
6.62

Date of Public Distribution/Dissemination
06 / 05 / 2014
Amount
6.62
Transaction ID : SE.40908
Date of Disbursement or Obligation
06 / 05 / 2014
Office Sought:
House District: 00
President Senate State: MN
Disbursement For:
Primary General
Other (specify)

Full Name of Payee
Freedomworks, Inc.
Mailing Address
400 N Capitol St., NW
Suite 735
City
Washington State
DC Zip Code
20001
Purpose of Expenditure
IE-Walsh-Email/Social Media/Printing
Category/Type
004
Name of Federal Candidate
JOHN E WALSH
Support Oppose
Calendar Year-To-Date
Per Election for Office Sought
6.62

Date of Public Distribution/Dissemination
06 / 05 / 2014
Amount
6.62
Transaction ID : SE.40910
Date of Disbursement or Obligation
06 / 05 / 2014
Office Sought:
House District: 00
President Senate State: MT
Disbursement For:
Primary General
Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures..... 13.24
(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.

R. Russ Walker
[Electronically Filed]
Date
07 / 18 / 2014
Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>FREEDOMWORKS FOR AMERICA</b>	FEC IDENTIFICATION NUMBER <b>C</b> C00499020
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Check if  24-hour report  48-hour report  New report  Amends report filed on  /  /

Full Name of Payee <b>Freedomworks, Inc.</b>		Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>	
Mailing Address 400 N Capitol St., NW Suite 735		Amount <input type="text"/>	
City Washington	State DC	Zip Code 20001	Transaction ID : <b>SE.32575</b>
Purpose of Expenditure IE-McDaniel-Email/Social Media/Printing		Category/Type <input type="text"/> 004	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate CHRISTOPHER BRIAN MCDANIEL		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <u>00</u> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>MS</u>
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 4488.99		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input checked="" type="checkbox"/> Other (specify) ▶ <u>Runoff</u>	

Full Name of Payee <b>Freedomworks, Inc.</b>		Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>	
Mailing Address 400 N Capitol St., NW Suite 735		Amount <input type="text"/>	
City Washington	State DC	Zip Code 20001	Transaction ID : <b>SE.40912</b>
Purpose of Expenditure IE-Begich-Email/Social Media/Printing		Category/Type <input type="text"/> 004	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate MARK BEGICH		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <u>00</u> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>AK</u>
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 918.69		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<input type="text"/> 121.53
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<input type="text"/>
(c) <b>TOTAL</b> Independent Expenditures..... ▶	<input type="text"/>

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.

R. Russ Walker [Electronically Filed] Date  /  /

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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

Full Name of Payee <b>Freedomworks, Inc.</b>	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 06 / 06 / 2014
Mailing Address 400 N Capitol St., NW Suite 735	Amount <span style="border: 1px solid black; padding: 2px;">6.54</span>
City Washington State DC Zip Code 20001	<b>Transaction ID : SE.40913</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 06 / 06 / 2014
Purpose of Expenditure IE-Pryor-Email/Social Media/Printing	Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>
Name of Federal Candidate MARK LUNSFORD PRYOR	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: 00 State: AR
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">21.39</span>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <b>Freedomworks, Inc.</b>	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 06 / 06 / 2014
Mailing Address 400 N Capitol St., NW Suite 735	Amount <span style="border: 1px solid black; padding: 2px;">6.54</span>
City Washington State DC Zip Code 20001	<b>Transaction ID : SE.40914</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 06 / 06 / 2014
Purpose of Expenditure IE-Landrieu-Email/Social Media/Printing	Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>
Name of Federal Candidate MARY L LANDRIEU	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: 00 State: LA
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">7969.94</span>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<span style="border: 1px solid black; padding: 2px;">13.08</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<span style="border: 1px solid black; padding: 2px;"> </span>
(c) <b>TOTAL</b> Independent Expenditures..... ▶	<span style="border: 1px solid black; padding: 2px;"> </span>

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.

*R. Russ Walker* [Electronically Filed] Date M M / D D / Y Y Y Y Y Y 07 / 18 / 2014

Signature \_\_\_\_\_

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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

Full Name of Payee <b>Freedomworks, Inc.</b>	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 06 / 06 / 2014
Mailing Address 400 N Capitol St., NW Suite 735	Amount <span style="border: 1px solid black; padding: 2px;">6.54</span>
City    State    Zip Code Washington    DC    20001	<b>Transaction ID : SE.40915</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 06 / 06 / 2014
Purpose of Expenditure IE-Brannon-Email/Social Media/Printing	Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>
Name of Federal Candidate <b>GREGORY JOSEPH BRANNON</b>	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House    District: <u>00</u> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate    State: <u>NC</u>
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">13.16</span>	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input checked="" type="checkbox"/> Other (specify) ▶ <u>Runoff</u>

Full Name of Payee <b>Freedomworks, Inc.</b>	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 06 / 06 / 2014
Mailing Address 400 N Capitol St., NW Suite 735	Amount <span style="border: 1px solid black; padding: 2px;">6.54</span>
City    State    Zip Code Washington    DC    20001	<b>Transaction ID : SE.40916</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 06 / 06 / 2014
Purpose of Expenditure IE-Franken-Email/Social Media/Printing	Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>
Name of Federal Candidate <b>AL FRANKEN</b>	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House    District: <u>00</u> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate    State: <u>MN</u>
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">13.16</span>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<span style="border: 1px solid black; padding: 2px;">13.08</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<span style="border: 1px solid black; padding: 2px;"> </span>
(c) <b>TOTAL</b> Independent Expenditures..... ▶	<span style="border: 1px solid black; padding: 2px;"> </span>

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.

*R. Russ Walker*  
 \_\_\_\_\_  
 Signature

[Electronically Filed]      Date MM / DD / YYYY  
 07 / 18 / 2014

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
FREEDOMWORKS FOR AMERICA
FEC IDENTIFICATION NUMBER
C C00499020
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee
Freedomworks, Inc.
Mailing Address
400 N Capitol St., NW
Suite 735
City Washington State DC Zip Code 20001
Purpose of Expenditure
IE-Udall-Email/Social Media/Printing
Category/Type 004
Name of Federal Candidate
MARK E UDALL
Support Oppose
Calendar Year-To-Date
Per Election for Office Sought 3.80

Date of Public Distribution/Dissemination
06 / 06 / 2014
Amount
3.80
Transaction ID : SE.40917
Date of Disbursement or Obligation
06 / 06 / 2014
Office Sought: House District: 00
Senate State: CO
Disbursement For: Primary General
Other (specify)

Full Name of Payee
Freedomworks, Inc.
Mailing Address
400 N Capitol St., NW
Suite 735
City Washington State DC Zip Code 20001
Purpose of Expenditure
IE-Walsh-Email/Social Media/Printing
Category/Type 004
Name of Federal Candidate
JOHN E WALSH
Support Oppose
Calendar Year-To-Date
Per Election for Office Sought 9.36

Date of Public Distribution/Dissemination
06 / 06 / 2014
Amount
2.74
Transaction ID : SE.40919
Date of Disbursement or Obligation
06 / 06 / 2014
Office Sought: House District: 00
Senate State: MT
Disbursement For: Primary General
Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 6.54
(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.
R. Russ Walker
[Electronically Filed]
Date 07 / 18 / 2014
Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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

Full Name of Payee <b>Freedomworks, Inc.</b>	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 06 / 09 / 2014
Mailing Address 400 N Capitol St., NW Suite 735	Amount <span style="border: 1px solid black; padding: 2px;">322.42</span>
City State Zip Code Washington DC 20001	<b>Transaction ID : SE.32576</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 06 / 09 / 2014
Purpose of Expenditure IE-McDaniel-Email/Social Media/Printing	Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>
Name of Federal Candidate CHRISTOPHER BRIAN MCDANIEL	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: 00 State: MS
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">4811.41</span>	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input checked="" type="checkbox"/> Other (specify) ▶ Runoff

Full Name of Payee <b>Freedomworks, Inc.</b>	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 06 / 09 / 2014
Mailing Address 400 N Capitol St., NW Suite 735	Amount <span style="border: 1px solid black; padding: 2px;">38.40</span>
City State Zip Code Washington DC 20001	<b>Transaction ID : SE.40920</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 06 / 09 / 2014
Purpose of Expenditure IE-Begich-Email/Social Media/Printing	Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>
Name of Federal Candidate MARK BEGICH	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: 00 State: AK
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">957.09</span>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<span style="border: 1px solid black; padding: 2px;">360.82</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<span style="border: 1px solid black; padding: 2px;"> </span>
(c) <b>TOTAL</b> Independent Expenditures..... ▶	<span style="border: 1px solid black; padding: 2px;"> </span>

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.

*R. Russ Walker*

Signature \_\_\_\_\_ [Electronically Filed] Date M M / D D / Y Y Y Y Y Y  
07 / 18 / 2014

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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

Full Name of Payee <b>Freedomworks, Inc.</b>		Date of Public Distribution/Dissemination 06 / 09 / 2014	
Mailing Address 400 N Capitol St., NW Suite 735		Amount 38.40	
City Washington	State DC	Zip Code 20001	Transaction ID : <b>SE.40921</b>
Purpose of Expenditure IE-Pryor-Email/Social Media/Printing		Category/Type 004	Date of Disbursement or Obligation 06 / 09 / 2014
Name of Federal Candidate MARK LUNSFORD PRYOR		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House    District: <u>00</u> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate    State: <u>AR</u>
Calendar Year-To-Date Per Election for Office Sought 59.79		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <b>Freedomworks, Inc.</b>		Date of Public Distribution/Dissemination 06 / 09 / 2014	
Mailing Address 400 N Capitol St., NW Suite 735		Amount 30.63	
City Washington	State DC	Zip Code 20001	Transaction ID : <b>SE.40922</b>
Purpose of Expenditure IE-Landrieu-Email/Social Media/Printing		Category/Type 004	Date of Disbursement or Obligation 06 / 09 / 2014
Name of Federal Candidate MARY L LANDRIEU		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House    District: <u>00</u> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate    State: <u>LA</u>
Calendar Year-To-Date Per Election for Office Sought 8000.57		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	69.03
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	[Empty Box]
<b>(c) TOTAL</b> Independent Expenditures..... ▶	[Empty Box]

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.

*R. Russ Walker*  
 Signature

[Electronically Filed]

Date 07 / 18 / 2014



SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
FREEDOMWORKS FOR AMERICA
FEC IDENTIFICATION NUMBER
C C00499020
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee: Freedomworks, Inc.
Mailing Address: 400 N Capitol St., NW Suite 735
City: Washington State: DC Zip Code: 20001
Purpose of Expenditure: IE-Brannon-Email/Social Media/Printing
Category/Type: 004
Name of Federal Candidate: GREGORY JOSEPH BRANNON
Support
Office Sought: Senate State: NC
Amount: 18.99
Transaction ID: SE.40923
Date of Disbursement or Obligation: 06/09/2014
Calendar Year-To-Date Per Election for Office Sought: 32.15
Disbursement For: Other (specify) Runoff

Full Name of Payee: Freedomworks, Inc.
Mailing Address: 400 N Capitol St., NW Suite 735
City: Washington State: DC Zip Code: 20001
Purpose of Expenditure: IE-Sasse-Email/Social Media/Printing
Category/Type: 004
Name of Federal Candidate: BENJAMIN E SASSE
Support
Office Sought: Senate State: NE
Amount: 19.41
Transaction ID: SE.40924
Date of Disbursement or Obligation: 06/09/2014
Calendar Year-To-Date Per Election for Office Sought: 37.52
Disbursement For: General

(a) SUBTOTAL of Itemized Independent Expenditures: 38.40
(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.
Signature: R. Russ Walker [Electronically Filed] Date: 07/18/2014

**SCHEDULE E (FEC Form 3X)  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>FREEDOMWORKS FOR AMERICA</b>		FEC IDENTIFICATION NUMBER <b>C</b> C00499020
--	--	---

Check if  24-hour report  48-hour report  New report  Amends report filed on  /  /

Full Name of Payee <b>Freedomworks, Inc.</b>		Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>	
Mailing Address 400 N Capitol St., NW Suite 735		Amount <input type="text"/>	
City Washington	State DC	Zip Code 20001	Transaction ID : <b>SE.40925</b>
Purpose of Expenditure IE-Franken-Email/Social Media/Printing		Category/ Type <input type="text"/>	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate AL FRANKEN		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <u>00</u> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>MN</u>
Calendar Year-To-Date Per Election for Office Sought		<input type="text"/>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <b>Freedomworks, Inc.</b>		Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>	
Mailing Address 400 N Capitol St., NW Suite 735		Amount <input type="text"/>	
City Washington	State DC	Zip Code 20001	Transaction ID : <b>SE.40926</b>
Purpose of Expenditure IE-Udall-Email/Social Media/Printing		Category/ Type <input type="text"/>	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate MARK E UDALL		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <u>00</u> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>CO</u>
Calendar Year-To-Date Per Election for Office Sought		<input type="text"/>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....▶	<input type="text"/>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures.....▶	<input type="text"/>
(c) <b>TOTAL</b> Independent Expenditures.....▶	<input type="text"/>

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 R. Russ Walker [Electronically Filed] Date  /  /

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
FREEDOMWORKS FOR AMERICA
FEC IDENTIFICATION NUMBER
C C00499020
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee
Freedomworks, Inc.
Mailing Address
400 N Capitol St., NW
Suite 735
City Washington State DC Zip Code 20001
Purpose of Expenditure
IE-Walsh-Email/Social Media/Printing
Category/Type 004
Name of Federal Candidate
JOHN E WALSH
Support Oppose
Calendar Year-To-Date
Per Election for Office Sought 43.96

Date of Public Distribution/Dissemination
06 / 09 / 2014
Amount
34.60
Transaction ID : SE.40927
Date of Disbursement or Obligation
06 / 09 / 2014
Office Sought: House District: 00
Senate State: MT
Disbursement For: Primary General
2014 Other (specify)

Full Name of Payee
Freedomworks, Inc.
Mailing Address
400 N Capitol St., NW
Suite 735
City Washington State DC Zip Code 20001
Purpose of Expenditure
IE-McDaniel-Email/Social Media/Printing
Category/Type 004
Name of Federal Candidate
CHRISTOPHER BRIAN MCDANIEL
Support Oppose
Calendar Year-To-Date
Per Election for Office Sought 5169.38

Date of Public Distribution/Dissemination
06 / 10 / 2014
Amount
357.97
Transaction ID : SE.32577
Date of Disbursement or Obligation
06 / 10 / 2014
Office Sought: House District: 00
Senate State: MS
Disbursement For: Primary General
2014 Other (specify) Runoff

(a) SUBTOTAL of Itemized Independent Expenditures 392.57
(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.

R. Russ Walker
[Electronically Filed]
Date 07 / 18 / 2014
Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>FREEDOMWORKS FOR AMERICA</b>		<b>FEC IDENTIFICATION NUMBER ▼</b> <b>C</b> C00499020
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		M M M / D D D / Y Y Y Y Y Y

Full Name of Payee <b>Freedomworks, Inc.</b>		Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y <b>06 / 10 / 2014</b>	
Mailing Address 400 N Capitol St., NW Suite 735		Amount <b>18.27</b>	
City Washington	State DC	Zip Code 20001	<b>Transaction ID : SE.40928</b>
Purpose of Expenditure IE-Begich-Email/Social Media/Printing		Category/Type 004	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y <b>06 / 10 / 2014</b>
Name of Federal Candidate MARK BEGICH		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <u>00</u> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>AK</u>
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	
		<b>975.36</b>	

Full Name of Payee <b>Freedomworks, Inc.</b>		Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y <b>06 / 10 / 2014</b>	
Mailing Address 400 N Capitol St., NW Suite 735		Amount <b>14.39</b>	
City Washington	State DC	Zip Code 20001	<b>Transaction ID : SE.40929</b>
Purpose of Expenditure IE-Pryor-Email/Social Media/Printing		Category/Type 004	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y <b>06 / 10 / 2014</b>
Name of Federal Candidate MARK LUNSFORD PRYOR		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <u>00</u> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>AR</u>
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	
		<b>74.18</b>	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<b>32.66</b>
(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.

*R. Russ Walker*

[Electronically Filed]

Signature \_\_\_\_\_ Date **07 / 18 / 2014**

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
FREEDOMWORKS FOR AMERICA
FEC IDENTIFICATION NUMBER
C C00499020
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee
Freedomworks, Inc.
Mailing Address
400 N Capitol St., NW
Suite 735
City
Washington State
DC Zip Code
20001
Purpose of Expenditure
IE-Landrieu-Email/Social Media/Printing
Category/Type
004
Name of Federal Candidate
MARY L LANDRIEU
Support
Oppose
Calendar Year-To-Date
Per Election for Office Sought
8042.13

Date of Public Distribution/Dissemination
06 / 10 / 2014
Amount
41.56
Transaction ID : SE.40930
Date of Disbursement or Obligation
06 / 10 / 2014
Office Sought:
House District: 00
Senate State: LA
Disbursement For:
Primary General
Other (specify)

Full Name of Payee
Freedomworks, Inc.
Mailing Address
400 N Capitol St., NW
Suite 735
City
Washington State
DC Zip Code
20001
Purpose of Expenditure
IE-Brannon-Email/Social Media/Printing
Category/Type
004
Name of Federal Candidate
GREGORY JOSEPH BRANNON
Support
Oppose
Calendar Year-To-Date
Per Election for Office Sought
34.89

Date of Public Distribution/Dissemination
06 / 10 / 2014
Amount
2.74
Transaction ID : SE.40931
Date of Disbursement or Obligation
06 / 10 / 2014
Office Sought:
House District: 00
Senate State: NC
Disbursement For:
Primary General
Other (specify)
Runoff

(a) SUBTOTAL of Itemized Independent Expenditures 44.30
(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.

R. Russ Walker
[Electronically Filed]
Date 07 / 18 / 2014
Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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

Full Name of Payee <b>Freedomworks, Inc.</b>	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 06 / 10 / 2014
Mailing Address 400 N Capitol St., NW Suite 735	Amount <span style="border: 1px solid black; padding: 2px;">38.82</span>
City State Zip Code Washington DC 20001	<b>Transaction ID : SE.40932</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 06 / 10 / 2014
Purpose of Expenditure IE-Sasse-Email/Social Media/Printing	Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>
Name of Federal Candidate BENJAMIN E SASSE	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: <u>00</u> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>NE</u>
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">76.34</span>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <b>Freedomworks, Inc.</b>	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 06 / 10 / 2014
Mailing Address 400 N Capitol St., NW Suite 735	Amount <span style="border: 1px solid black; padding: 2px;">41.56</span>
City State Zip Code Washington DC 20001	<b>Transaction ID : SE.40933</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 06 / 10 / 2014
Purpose of Expenditure IE-Franken-Email/Social Media/Printing	Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>
Name of Federal Candidate AL FRANKEN	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: <u>00</u> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>MN</u>
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">104.76</span>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<span style="border: 1px solid black; padding: 2px;">80.38</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<span style="border: 1px solid black; padding: 2px;"> </span>
(c) <b>TOTAL</b> Independent Expenditures..... ▶	<span style="border: 1px solid black; padding: 2px;"> </span>

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.

*R. Russ Walker*

Signature \_\_\_\_\_ [Electronically Filed] Date M M / D D / Y Y Y Y Y Y  
07 / 18 / 2014

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
FREEDOMWORKS FOR AMERICA
FEC IDENTIFICATION NUMBER
C C00499020
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee
Freedomworks, Inc.
Mailing Address
400 N Capitol St., NW
Suite 735
City
Washington State
DC Zip Code
20001
Date of Public Distribution/Dissemination
06 / 10 / 2014
Amount
14.39
Transaction ID : SE.40934
Date of Disbursement or Obligation
06 / 10 / 2014
Purpose of Expenditure
IE-Walsh-Email/Social Media/Printing
Category/Type
004
Name of Federal Candidate
JOHN E WALSH
Support
Oppose
Office Sought:
House
Senate
District: 00
State: MT
Calendar Year-To-Date
Per Election for Office Sought
58.35
Disbursement For:
Primary
General
Other (specify)

Full Name of Payee
Freedomworks, Inc.
Mailing Address
400 N Capitol St., NW
Suite 735
City
Washington State
DC Zip Code
20001
Date of Public Distribution/Dissemination
06 / 11 / 2014
Amount
163.54
Transaction ID : SE.32586
Date of Disbursement or Obligation
06 / 11 / 2014
Purpose of Expenditure
IE-McDaniel-Travel
Category/Type
002
Name of Federal Candidate
CHRISTOPHER BRIAN MCDANIEL
Support
Oppose
Office Sought:
House
Senate
District: 00
State: MS
Calendar Year-To-Date
Per Election for Office Sought
10057.62
Disbursement For:
Primary
General
Other (specify)
Runoff

(a) SUBTOTAL of Itemized Independent Expenditures 177.93
(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.
R. Russ Walker
[Electronically Filed]
Date 07 / 18 / 2014
Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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 type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		MM / DD / YYYY

Full Name of Payee <b>Freedomworks, Inc.</b>	Date of Public Distribution/Dissemination MM / DD / YYYY <b>06 / 11 / 2014</b>
Mailing Address 400 N Capitol St., NW Suite 735	Amount <b>2.74</b>
City Washington State DC Zip Code 20001	Transaction ID : <b>SE.40935</b>
Purpose of Expenditure IE-Begich-Email/Social Media/Printing	Date of Disbursement or Obligation MM / DD / YYYY <b>06 / 11 / 2014</b>
Name of Federal Candidate <b>MARK BEGICH</b>	Office Sought: <input type="checkbox"/> House District: <u>00</u> <input checked="" type="checkbox"/> Senate State: <u>AK</u>
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

978.10

Full Name of Payee <b>Freedomworks, Inc.</b>	Date of Public Distribution/Dissemination MM / DD / YYYY <b>06 / 11 / 2014</b>
Mailing Address 400 N Capitol St., NW Suite 735	Amount <b>2.74</b>
City Washington State DC Zip Code 20001	Transaction ID : <b>SE.40936</b>
Purpose of Expenditure IE-Pryor-Email/Social Media/Printing	Date of Disbursement or Obligation MM / DD / YYYY <b>06 / 11 / 2014</b>
Name of Federal Candidate <b>MARK LUNSFORD PRYOR</b>	Office Sought: <input type="checkbox"/> House District: <u>00</u> <input checked="" type="checkbox"/> Senate State: <u>AR</u>
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

76.92

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....▶	<b>5.48</b>
(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.

R. Russ Walker  
Signature

[Electronically Filed]

Date MM / DD / YYYY  
**07 / 18 / 2014**



SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
FREEDOMWORKS FOR AMERICA
FEC IDENTIFICATION NUMBER
C C00499020
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee
Freedomworks, Inc.
Mailing Address
400 N Capitol St., NW
Suite 735
City
Washington State
DC Zip Code
20001
Purpose of Expenditure
IE-Landrieu-Email/Social Media/Printing
Category/Type
004
Name of Federal Candidate
MARY L LANDRIEU
Support Oppose
Calendar Year-To-Date
Per Election for Office Sought
8044.87

Date of Public Distribution/Dissemination
06 / 11 / 2014
Amount
2.74
Transaction ID : SE.40937
Date of Disbursement or Obligation
06 / 11 / 2014
Office Sought: House District: 00
Senate State: LA
Disbursement For: Primary General
Other (specify)

Full Name of Payee
Freedomworks, Inc.
Mailing Address
400 N Capitol St., NW
Suite 735
City
Washington State
DC Zip Code
20001
Purpose of Expenditure
IE-Brannon-Email/Social Media/Printing
Category/Type
004
Name of Federal Candidate
GREGORY JOSEPH BRANNON
Support Oppose
Calendar Year-To-Date
Per Election for Office Sought
37.63

Date of Public Distribution/Dissemination
06 / 11 / 2014
Amount
2.74
Transaction ID : SE.40938
Date of Disbursement or Obligation
06 / 11 / 2014
Office Sought: House District: 00
Senate State: NC
Disbursement For: Primary General
Other (specify) Runoff

(a) SUBTOTAL of Itemized Independent Expenditures 5.48
(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.

R. Russ Walker
[Electronically Filed]
Date 07 / 18 / 2014
Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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 type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		<input type="checkbox"/> M M M / <input type="checkbox"/> D D D / <input type="checkbox"/> Y Y Y Y Y Y

Full Name of Payee <b>Freedomworks, Inc.</b>		Date of Public Distribution/Dissemination <input type="checkbox"/> M M M / <input type="checkbox"/> D D D / <input type="checkbox"/> Y Y Y Y Y Y 06 / 11 / 2014
Mailing Address 400 N Capitol St., NW Suite 735		Amount 2.74
City Washington	State DC	Zip Code 20001
Purpose of Expenditure IE-Franken-Email/Social Media/Printing	Category/Type 004	Transaction ID : <b>SE.40939</b> Date of Disbursement or Obligation <input type="checkbox"/> M M M / <input type="checkbox"/> D D D / <input type="checkbox"/> Y Y Y Y Y Y 06 / 11 / 2014
Name of Federal Candidate AL FRANKEN	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: MN
Calendar Year-To-Date Per Election for Office Sought 107.50		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <b>Freedomworks, Inc.</b>		Date of Public Distribution/Dissemination <input type="checkbox"/> M M M / <input type="checkbox"/> D D D / <input type="checkbox"/> Y Y Y Y Y Y 06 / 11 / 2014
Mailing Address 400 N Capitol St., NW Suite 735		Amount 2.74
City Washington	State DC	Zip Code 20001
Purpose of Expenditure IE-Walsh-Email/Social Media/Printing	Category/Type 004	Transaction ID : <b>SE.40940</b> Date of Disbursement or Obligation <input type="checkbox"/> M M M / <input type="checkbox"/> D D D / <input type="checkbox"/> Y Y Y Y Y Y 06 / 11 / 2014
Name of Federal Candidate JOHN E WALSH	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: MT
Calendar Year-To-Date Per Election for Office Sought 61.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....▶	5.48
(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.

R. Russ Walker [Electronically Filed] Date  M M M /  D D D /  Y Y Y Y Y Y  
07 / 18 / 2014

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
FREEDOMWORKS FOR AMERICA
FEC IDENTIFICATION NUMBER
C C00499020
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee: Freedomworks, Inc.
Mailing Address: 400 N Capitol St., NW Suite 735
City: Washington State: DC Zip Code: 20001
Purpose of Expenditure: IE-Poliquin-Email/Social Media/Printing
Category/Type: 004
Name of Federal Candidate: BRUCE L POLIQUIN
Support: [X] Oppose: [ ]
Office Sought: [X] House District: 02 State: ME
Amount: 11.39
Transaction ID: SE.40941
Date of Disbursement or Obligation: 06/11/2014
Disbursement For: [X] General 2014

Full Name of Payee: Freedomworks, Inc.
Mailing Address: 400 N Capitol St., NW Suite 735
City: Washington State: DC Zip Code: 20001
Purpose of Expenditure: IE-McDaniel-Email/Social Media/Printing
Category/Type: 004
Name of Federal Candidate: CHRISTOPHER BRIAN MCDANIEL
Support: [X] Oppose: [ ]
Office Sought: [X] Senate District: 00 State: MS
Amount: 280.33
Transaction ID: SE.41001
Date of Disbursement or Obligation: 06/11/2014
Disbursement For: [X] Other (specify) Runoff

(a) SUBTOTAL of Itemized Independent Expenditures: 291.72
(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.
Signature: R. Russ Walker
Date: 07/18/2014

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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 type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		MM / DD / YYYY

Full Name of Payee <b>Freedomworks, Inc.</b>		Date of Public Distribution/Dissemination MM / DD / YYYY 06 / 12 / 2014
Mailing Address 400 N Capitol St., NW Suite 735		Amount 132.69
City Washington	State DC	Zip Code 20001
Purpose of Expenditure IE-McDaniel-Travel	Category/ Type 002	Transaction ID : <b>SE.32592</b> Date of Disbursement or Obligation MM / DD / YYYY 06 / 12 / 2014
Name of Federal Candidate CHRISTOPHER BRIAN MCDANIEL	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: MS
Calendar Year-To-Date Per Election for Office Sought	46619.15	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input checked="" type="checkbox"/> Other (specify) ▶ Runoff

Full Name of Payee <b>Freedomworks, Inc.</b>		Date of Public Distribution/Dissemination MM / DD / YYYY 06 / 12 / 2014
Mailing Address 400 N Capitol St., NW Suite 735		Amount 330.88
City Washington	State DC	Zip Code 20001
Purpose of Expenditure IE-McDaniel-Email/Social Media/Printing	Category/ Type 004	Transaction ID : <b>SE.32593</b> Date of Disbursement or Obligation MM / DD / YYYY 06 / 12 / 2014
Name of Federal Candidate CHRISTOPHER BRIAN MCDANIEL	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: MS
Calendar Year-To-Date Per Election for Office Sought	46950.03	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input checked="" type="checkbox"/> Other (specify) ▶ Runoff

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	463.57
(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.

R. Russ Walker

[Electronically Filed]

Date

MM / DD / YYYY  
07 / 18 / 2014

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
FREEDOMWORKS FOR AMERICA
FEC IDENTIFICATION NUMBER
C C00499020
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee
Freedomworks, Inc.
Mailing Address
400 N Capitol St., NW
Suite 735
City Washington State DC Zip Code 20001
Purpose of Expenditure
IE-Begich-Email/Social Media/Printing
Category/Type 004
Name of Federal Candidate
MARK BEGICH
Support Oppose
Calendar Year-To-Date Per Election for Office Sought 980.84

Date of Public Distribution/Dissemination
06 / 12 / 2014
Amount
2.74
Transaction ID : SE.40942
Date of Disbursement or Obligation
06 / 12 / 2014
Office Sought: House District: 00
Senate State: AK
Disbursement For: Primary General
Other (specify)

Full Name of Payee
Freedomworks, Inc.
Mailing Address
400 N Capitol St., NW
Suite 735
City Washington State DC Zip Code 20001
Purpose of Expenditure
IE-Pryor-Email/Social Media/Printing
Category/Type 004
Name of Federal Candidate
MARK LUNSFORD PRYOR
Support Oppose
Calendar Year-To-Date Per Election for Office Sought 79.66

Date of Public Distribution/Dissemination
06 / 12 / 2014
Amount
2.74
Transaction ID : SE.40943
Date of Disbursement or Obligation
06 / 12 / 2014
Office Sought: House District: 00
Senate State: AR
Disbursement For: Primary General
Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 5.48
(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.
R. Russ Walker
[Electronically Filed]
Date 07 / 18 / 2014
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
FREEDOMWORKS FOR AMERICA
FEC IDENTIFICATION NUMBER
C C00499020
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee
Freedomworks, Inc.
Mailing Address
400 N Capitol St., NW
Suite 735
City Washington State DC Zip Code 20001
Purpose of Expenditure
IE-Landrieu-Email/Social Media/Printing
Category/Type 004
Name of Federal Candidate
MARY L LANDRIEU
Support Oppose
Calendar Year-To-Date
Per Election for Office Sought 8047.61

Date of Public Distribution/Dissemination
06 / 12 / 2014
Amount
2.74
Transaction ID : SE.40944
Date of Disbursement or Obligation
06 / 12 / 2014
Office Sought: House District: 00
Senate State: LA
Disbursement For: Primary General
Other (specify)

Full Name of Payee
Freedomworks, Inc.
Mailing Address
400 N Capitol St., NW
Suite 735
City Washington State DC Zip Code 20001
Purpose of Expenditure
IE-Brannon-Email/Social Media/Printing
Category/Type 004
Name of Federal Candidate
GREGORY JOSEPH BRANNON
Support Oppose
Calendar Year-To-Date
Per Election for Office Sought 40.37

Date of Public Distribution/Dissemination
06 / 12 / 2014
Amount
2.74
Transaction ID : SE.40945
Date of Disbursement or Obligation
06 / 12 / 2014
Office Sought: House District: 00
Senate State: NC
Disbursement For: Primary General
Other (specify) Runoff

(a) SUBTOTAL of Itemized Independent Expenditures 5.48
(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.

R. Russ Walker
[Electronically Filed]
Date 07 / 18 / 2014
Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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

Full Name of Payee <b>Freedomworks, Inc.</b>	Date of Public Distribution/Dissemination MM / DD / YYYY <b>06 / 12 / 2014</b>
Mailing Address 400 N Capitol St., NW Suite 735	Amount <b>2.74</b>
City: Washington    State: DC    Zip Code: 20001	<b>Transaction ID : SE.40946</b>
Purpose of Expenditure IE-Franken-Email/Social Media/Printing	Date of Disbursement or Obligation MM / DD / YYYY <b>06 / 12 / 2014</b>
Name of Federal Candidate <b>AL FRANKEN</b>	Office Sought: <input type="checkbox"/> House    District: <u>00</u> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate    State: <u>MN</u>
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶
<b>110.24</b>	

Full Name of Payee <b>Freedomworks, Inc.</b>	Date of Public Distribution/Dissemination MM / DD / YYYY <b>06 / 12 / 2014</b>
Mailing Address 400 N Capitol St., NW Suite 735	Amount <b>2.74</b>
City: Washington    State: DC    Zip Code: 20001	<b>Transaction ID : SE.40947</b>
Purpose of Expenditure IE-Walsh-Email/Social Media/Printing	Date of Disbursement or Obligation MM / DD / YYYY <b>06 / 12 / 2014</b>
Name of Federal Candidate <b>JOHN E WALSH</b>	Office Sought: <input type="checkbox"/> House    District: <u>00</u> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate    State: <u>MT</u>
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶
<b>63.83</b>	

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<b>5.48</b>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	
<b>(c) 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.

*R. Russ Walker*

Signature \_\_\_\_\_ [Electronically Filed] Date MM / DD / YYYY **07 / 18 / 2014**

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
FREEDOMWORKS FOR AMERICA
FEC IDENTIFICATION NUMBER
C C00499020
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee
Freedomworks, Inc.
Mailing Address
400 N Capitol St., NW
Suite 735
City
Washington State
DC Zip Code
20001
Purpose of Expenditure
IE-McDaniel-Travel
Category/Type
002
Name of Federal Candidate
CHRISTOPHER BRIAN MCDANIEL
Support
Office Sought:
Senate State: MS
Calendar Year-To-Date
Per Election for Office Sought
50083.78

Date of Public Distribution/Dissemination
06 / 13 / 2014
Amount
3133.75
Transaction ID : SE.32599
Date of Disbursement or Obligation
06 / 13 / 2014
Disbursement For:
Other (specify)
Runoff

Full Name of Payee
Freedomworks, Inc.
Mailing Address
400 N Capitol St., NW
Suite 735
City
Washington State
DC Zip Code
20001
Purpose of Expenditure
IE-McDaniel-Email/Social Media/Printing
Category/Type
004
Name of Federal Candidate
CHRISTOPHER BRIAN MCDANIEL
Support
Office Sought:
Senate State: MS
Calendar Year-To-Date
Per Election for Office Sought
87254.43

Date of Public Distribution/Dissemination
06 / 13 / 2014
Amount
1891.66
Transaction ID : SE.32603
Date of Disbursement or Obligation
06 / 13 / 2014
Disbursement For:
Other (specify)
Runoff

(a) SUBTOTAL of Itemized Independent Expenditures..... 5025.41
(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.

R. Russ Walker
[Electronically Filed]
Date
07 / 18 / 2014
Signature



SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
FREEDOMWORKS FOR AMERICA
FEC IDENTIFICATION NUMBER
C C00499020
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee
Freedomworks, Inc.
Mailing Address
400 N Capitol St., NW
Suite 735
City Washington State DC Zip Code 20001
Purpose of Expenditure
IE-Begich-Email/Social Media/Printing
Category/Type 004
Name of Federal Candidate
MARK BEGICH
Support Oppose
Calendar Year-To-Date
Per Election for Office Sought 1029.03

Date of Public Distribution/Dissemination
06 / 13 / 2014
Amount
48.19
Transaction ID : SE.40948
Date of Disbursement or Obligation
06 / 13 / 2014
Office Sought: House District: 00
Senate State: AK
Disbursement For: Primary General
Other (specify)

Full Name of Payee
Freedomworks, Inc.
Mailing Address
400 N Capitol St., NW
Suite 735
City Washington State DC Zip Code 20001
Purpose of Expenditure
IE-Pryor-Email/Social Media/Printing
Category/Type 004
Name of Federal Candidate
MARK LUNSFORD PRYOR
Support Oppose
Calendar Year-To-Date
Per Election for Office Sought 127.85

Date of Public Distribution/Dissemination
06 / 13 / 2014
Amount
48.19
Transaction ID : SE.40949
Date of Disbursement or Obligation
06 / 13 / 2014
Office Sought: House District: 00
Senate State: AR
Disbursement For: Primary General
Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 96.38
(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.
R. Russ Walker
[Electronically Filed]
Date 07 / 18 / 2014
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
FREEDOMWORKS FOR AMERICA
FEC IDENTIFICATION NUMBER
C C00499020
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee
Freedomworks, Inc.
Mailing Address
400 N Capitol St., NW
Suite 735
City Washington State DC Zip Code 20001
Purpose of Expenditure
IE-Landrieu-Email/Social Media/Printing
Category/Type 004
Name of Federal Candidate
MARY L LANDRIEU
Support Oppose
Calendar Year-To-Date
Per Election for Office Sought 8183.99

Date of Public Distribution/Dissemination
06 / 13 / 2014
Amount
136.38
Transaction ID : SE.40950
Date of Disbursement or Obligation
06 / 13 / 2014
Office Sought: House District: 00
President Senate State: LA
Disbursement For: Primary General
Other (specify)

Full Name of Payee
Freedomworks, Inc.
Mailing Address
400 N Capitol St., NW
Suite 735
City Washington State DC Zip Code 20001
Purpose of Expenditure
IE-Brannon-Email/Social Media/Printing
Category/Type 004
Name of Federal Candidate
GREGORY JOSEPH BRANNON
Support Oppose
Calendar Year-To-Date
Per Election for Office Sought 49.74

Date of Public Distribution/Dissemination
06 / 13 / 2014
Amount
9.37
Transaction ID : SE.40951
Date of Disbursement or Obligation
06 / 13 / 2014
Office Sought: House District: 00
President Senate State: NC
Disbursement For: Primary General
Other (specify) Runoff

(a) SUBTOTAL of Itemized Independent Expenditures 145.75
(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.
Signature R. Russ Walker [Electronically Filed] Date 07 / 18 / 2014

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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

Full Name of Payee <b>Freedomworks, Inc.</b>	Date of Public Distribution/Dissemination MM / DD / YYYY <b>06 / 13 / 2014</b>
Mailing Address 400 N Capitol St., NW Suite 735	Amount <b>38.82</b>
City State Zip Code Washington DC 20001	<b>Transaction ID : SE.40952</b> Date of Disbursement or Obligation MM / DD / YYYY <b>06 / 13 / 2014</b>
Purpose of Expenditure IE-Sasse-Email/Social Media/Printing	Category/Type <b>004</b>
Name of Federal Candidate <b>BENJAMIN E SASSE</b>	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: <u>00</u> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>NE</u>
Calendar Year-To-Date Per Election for Office Sought	<b>115.16</b> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <b>Freedomworks, Inc.</b>	Date of Public Distribution/Dissemination MM / DD / YYYY <b>06 / 13 / 2014</b>
Mailing Address 400 N Capitol St., NW Suite 735	Amount <b>48.19</b>
City State Zip Code Washington DC 20001	<b>Transaction ID : SE.40953</b> Date of Disbursement or Obligation MM / DD / YYYY <b>06 / 13 / 2014</b>
Purpose of Expenditure IE-Franken-Email/Social Media/Printing	Category/Type <b>004</b>
Name of Federal Candidate <b>AL FRANKEN</b>	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: <u>00</u> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>MN</u>
Calendar Year-To-Date Per Election for Office Sought	<b>158.43</b> Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<b>87.01</b>
(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.

R. Russ Walker
[Electronically Filed]
Date

Signature MM / DD / YYYY  
**07 / 18 / 2014**

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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

Full Name of Payee <b>Freedomworks, Inc.</b>	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 06 / 13 / 2014
Mailing Address 400 N Capitol St., NW Suite 735	Amount <span style="border: 1px solid black; padding: 2px;">888.88</span> 48.19
City Washington State DC Zip Code 20001	<b>Transaction ID : SE.40954</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 06 / 13 / 2014
Purpose of Expenditure IE-Walsh-Email/Social Media/Printing	Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>
Name of Federal Candidate JOHN E WALSH	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: MT
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">112.02</span>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <b>Freedomworks, Inc.</b>	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 06 / 14 / 2014
Mailing Address 400 N Capitol St., NW Suite 735	Amount <span style="border: 1px solid black; padding: 2px;">809.84</span> 809.84
City Washington State DC Zip Code 20001	<b>Transaction ID : SE.32616</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 06 / 14 / 2014
Purpose of Expenditure IE-McDaniel-Travel	Category/Type <span style="border: 1px solid black; padding: 2px;">002</span>
Name of Federal Candidate CHRISTOPHER BRIAN MCDANIEL	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: MS
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">130043.49</span>	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input checked="" type="checkbox"/> Other (specify) ▶ Runoff

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<span style="border: 1px solid black; padding: 2px;">858.03</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<span style="border: 1px solid black; padding: 2px;"> </span>
(c) <b>TOTAL</b> Independent Expenditures..... ▶	<span style="border: 1px solid black; padding: 2px;"> </span>

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.

*R. Russ Walker* [Electronically Filed] Date M M / D D / Y Y Y Y Y Y  
07 / 18 / 2014

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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

Full Name of Payee <b>Freedomworks, Inc.</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <b>06 / 15 / 2014</b>
Mailing Address 400 N Capitol St., NW Suite 735		Amount <b>886.71</b>
City Washington	State DC	Zip Code 20001
Purpose of Expenditure IE-McDaniel-Travel	Category/Type <b>002</b>	Transaction ID : <b>SE.32626</b> Date of Disbursement or Obligation MM / DD / YYYY <b>06 / 15 / 2014</b>
Name of Federal Candidate CHRISTOPHER BRIAN MCDANIEL	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <u>00</u> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>MS</u>
Calendar Year-To-Date Per Election for Office Sought	<b>130930.20</b>	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input checked="" type="checkbox"/> Other (specify) ▶ <u>Runoff</u>

Full Name of Payee <b>Freedomworks, Inc.</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <b>06 / 16 / 2014</b>
Mailing Address 400 N Capitol St., NW Suite 735		Amount <b>559.23</b>
City Washington	State DC	Zip Code 20001
Purpose of Expenditure IE-McDaniel-Email/Social Media/Printing	Category/Type <b>004</b>	Transaction ID : <b>SE.35348</b> Date of Disbursement or Obligation MM / DD / YYYY <b>06 / 16 / 2014</b>
Name of Federal Candidate CHRISTOPHER BRIAN MCDANIEL	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <u>00</u> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>MS</u>
Calendar Year-To-Date Per Election for Office Sought	<b>144761.43</b>	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input checked="" type="checkbox"/> Other (specify) ▶ <u>Runoff</u>

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....▶	<b>1445.94</b>
(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.

Signature R. Russ Walker [Electronically Filed] Date **07 / 18 / 2014**

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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

Full Name of Payee <b>Freedomworks, Inc.</b>		Date of Public Distribution/Dissemination <input type="text" value="MM"/> / <input type="text" value="DD"/> / <input type="text" value="YYYY"/>
Mailing Address 400 N Capitol St., NW Suite 735		Amount <input type="text" value="53.08"/>
City Washington	State DC	Zip Code 20001
Purpose of Expenditure IE-Shannon-Email/Social Media/Printing		Transaction ID : <b>SE.35542</b>
Category/Type <input type="text" value="004"/>		Date of Disbursement or Obligation <input type="text" value="MM"/> / <input type="text" value="DD"/> / <input type="text" value="YYYY"/>
Name of Federal Candidate T W SHANNON		Office Sought: <input type="checkbox"/> House District: <u>00</u> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>OK</u>
Support <input checked="" type="checkbox"/> Oppose <input type="checkbox"/>		
Calendar Year-To-Date Per Election for Office Sought <input type="text" value="428.24"/>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <b>Freedomworks, Inc.</b>		Date of Public Distribution/Dissemination <input type="text" value="MM"/> / <input type="text" value="DD"/> / <input type="text" value="YYYY"/>
Mailing Address 400 N Capitol St., NW Suite 735		Amount <input type="text" value="19.41"/>
City Washington	State DC	Zip Code 20001
Purpose of Expenditure IE-Begich-Email/Social Media/Printing		Transaction ID : <b>SE.40955</b>
Category/Type <input type="text" value="004"/>		Date of Disbursement or Obligation <input type="text" value="MM"/> / <input type="text" value="DD"/> / <input type="text" value="YYYY"/>
Name of Federal Candidate MARK BEGICH		Office Sought: <input type="checkbox"/> House District: <u>00</u> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>AK</u>
Support <input type="checkbox"/> Oppose <input checked="" type="checkbox"/>		
Calendar Year-To-Date Per Election for Office Sought <input type="text" value="1048.44"/>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....▶	<input type="text" value="72.49"/>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures.....▶	<input type="text"/>
(c) <b>TOTAL</b> Independent Expenditures.....▶	<input type="text"/>

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.

*R. Russ Walker*  
Signature

[Electronically Filed]

Date  /  /

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>FREEDOMWORKS FOR AMERICA</b>	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> C00499020
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="margin-left: 20px;">M M M / D D D / Y Y Y Y Y Y</span>	

Full Name of Payee <b>Freedomworks, Inc.</b>	Date of Public Distribution/Dissemination <span style="margin-left: 20px;">M M M / D D D / Y Y Y Y Y Y</span> <b>06 / 16 / 2014</b>
Mailing Address 400 N Capitol St., NW Suite 735	Amount <span style="margin-left: 20px;">19.41</span>
City Washington State DC Zip Code 20001	<b>Transaction ID : SE.40956</b> Date of Disbursement or Obligation <span style="margin-left: 20px;">M M M / D D D / Y Y Y Y Y Y</span> <b>06 / 16 / 2014</b>
Purpose of Expenditure IE-Pryor-Email/Social Media/Printing	Category/Type <span style="margin-left: 20px;"><b>004</b></span>
Name of Federal Candidate <b>MARK LUNSFORD PRYOR</b>	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: <u>00</u> <input type="checkbox"/> President State: <u>AR</u>
Calendar Year-To-Date Per Election for Office Sought <span style="margin-left: 20px;"><b>147.26</b></span>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <b>Freedomworks, Inc.</b>	Date of Public Distribution/Dissemination <span style="margin-left: 20px;">M M M / D D D / Y Y Y Y Y Y</span> <b>06 / 16 / 2014</b>
Mailing Address 400 N Capitol St., NW Suite 735	Amount <span style="margin-left: 20px;">21.35</span>
City Washington State DC Zip Code 20001	<b>Transaction ID : SE.40957</b> Date of Disbursement or Obligation <span style="margin-left: 20px;">M M M / D D D / Y Y Y Y Y Y</span> <b>06 / 16 / 2014</b>
Purpose of Expenditure IE-Landrieu-Email/Social Media/Printing	Category/Type <span style="margin-left: 20px;"><b>004</b></span>
Name of Federal Candidate <b>MARY L LANDRIEU</b>	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: <u>00</u> <input type="checkbox"/> President State: <u>LA</u>
Calendar Year-To-Date Per Election for Office Sought <span style="margin-left: 20px;"><b>8205.34</b></span>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<span style="margin-left: 20px;"><b>40.76</b></span>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<span style="margin-left: 20px;"></span>
<b>(c) TOTAL</b> Independent Expenditures..... ▶	<span style="margin-left: 20px;"></span>

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.

*R. Russ Walker* [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y  
**07 / 18 / 2014**

Signature





SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
FREEDOMWORKS FOR AMERICA
FEC IDENTIFICATION NUMBER
C C00499020
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee
Freedomworks, Inc.
Mailing Address
400 N Capitol St., NW
Suite 735
City Washington State DC Zip Code 20001
Purpose of Expenditure
IE-Walsh-Email/Social Media/Printing
Category/Type 004

Date of Public Distribution/Dissemination
06 / 16 / 2014
Amount
1.94
Transaction ID : SE.40960
Date of Disbursement or Obligation
06 / 16 / 2014

Name of Federal Candidate
JOHN E WALSH
Support Oppose
Office Sought: House Senate
District: 00 State: MT

Disbursement For: Primary General
2014 Other (specify)

Calendar Year-To-Date
Per Election for Office Sought
113.96
Full Name of Payee
Freedomworks, Inc.
Mailing Address
400 N Capitol St., NW
Suite 735
City Washington State DC Zip Code 20001
Purpose of Expenditure
IE-Shannon-Email/Social Media/Printing
Category/Type 004

Date of Public Distribution/Dissemination
06 / 17 / 2014
Amount
237.47
Transaction ID : SE.35548
Date of Disbursement or Obligation
06 / 17 / 2014

Name of Federal Candidate
T W SHANNON
Support Oppose
Office Sought: House Senate
District: 00 State: OK

Disbursement For: Primary General
2014 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 239.41
(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.

R. Russ Walker

[Electronically Filed]

Date

07 / 18 / 2014

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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 type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		M M M / D D D / Y Y Y Y Y Y	

Full Name of Payee <b>Freedomworks, Inc.</b>		Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y <b>06 / 17 / 2014</b>	
Mailing Address 400 N Capitol St., NW Suite 735		Amount <b>74.71</b>	
City Washington	State DC	Zip Code 20001	Transaction ID : <b>SE.35569</b>
Purpose of Expenditure IE-McDaniel-Travel	Category/Type <b>002</b>	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y <b>06 / 17 / 2014</b>	
Name of Federal Candidate CHRISTOPHER BRIAN MCDANIEL	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate	District: <u>00</u> State: <u>MS</u>
Calendar Year-To-Date Per Election for Office Sought	<b>144836.14</b>	Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▶	Runoff

Full Name of Payee <b>Freedomworks, Inc.</b>		Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y <b>06 / 17 / 2014</b>	
Mailing Address 400 N Capitol St., NW Suite 735		Amount <b>742.68</b>	
City Washington	State DC	Zip Code 20001	Transaction ID : <b>SE.35571</b>
Purpose of Expenditure IE-McDaniel-Email/Social Media/Printing	Category/Type <b>004</b>	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y <b>06 / 17 / 2014</b>	
Name of Federal Candidate CHRISTOPHER BRIAN MCDANIEL	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate	District: <u>00</u> State: <u>MS</u>
Calendar Year-To-Date Per Election for Office Sought	<b>145578.82</b>	Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▶	Runoff

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....▶	<b>817.39</b>
(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.

*R. Russ Walker*

Signature \_\_\_\_\_ Date **07 / 18 / 2014**

[Electronically Filed]

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
FREEDOMWORKS FOR AMERICA
FEC IDENTIFICATION NUMBER
C C00499020
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee
Freedomworks, Inc.
Mailing Address
400 N Capitol St., NW
Suite 735
City
Washington State
DC Zip Code
20001
Purpose of Expenditure
IE-Begich-Email/Social Media/Printing
Category/Type
004
Name of Federal Candidate
MARK BEGICH
Support
Oppose
Calendar Year-To-Date
Per Election for Office Sought
1067.85

Date of Public Distribution/Dissemination
06 / 17 / 2014
Amount
19.41
Transaction ID : SE.40961
Date of Disbursement or Obligation
06 / 17 / 2014
Office Sought:
House District: 00
Senate State: AK
Disbursement For:
Primary General
Other (specify)

Full Name of Payee
Freedomworks, Inc.
Mailing Address
400 N Capitol St., NW
Suite 735
City
Washington State
DC Zip Code
20001
Purpose of Expenditure
IE-Walsh-Email/Social Media/Printing
Category/Type
004
Name of Federal Candidate
JOHN E WALSH
Support
Oppose
Calendar Year-To-Date
Per Election for Office Sought
152.78

Date of Public Distribution/Dissemination
06 / 17 / 2014
Amount
38.82
Transaction ID : SE.40962
Date of Disbursement or Obligation
06 / 17 / 2014
Office Sought:
House District: 00
Senate State: MT
Disbursement For:
Primary General
Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 58.23
(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.

R. Russ Walker
[Electronically Filed]
Date 07 / 18 / 2014
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
FREEDOMWORKS FOR AMERICA
FEC IDENTIFICATION NUMBER
C C00499020
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee: Freedomworks, Inc.
Mailing Address: 400 N Capitol St., NW Suite 735
City: Washington State: DC Zip Code: 20001
Purpose of Expenditure: IE-McDaniel-Travel Category/Type: 002
Name of Federal Candidate: CHRISTOPHER BRIAN MCDANIEL
Office Sought: Senate State: MS
Calendar Year-To-Date Per Election for Office Sought: 148170.58
Disbursement For: Other (specify) Runoff

Full Name of Payee: Freedomworks, Inc.
Mailing Address: 400 N Capitol St., NW Suite 735
City: Washington State: DC Zip Code: 20001
Purpose of Expenditure: IE-McDaniel-Email/Social Media/Printing Category/Type: 004
Name of Federal Candidate: CHRISTOPHER BRIAN MCDANIEL
Office Sought: Senate State: MS
Calendar Year-To-Date Per Election for Office Sought: 148544.57
Disbursement For: Other (specify) Runoff

(a) SUBTOTAL of Itemized Independent Expenditures: 2965.75
(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.
Signature: R. Russ Walker [Electronically Filed] Date: 07 / 18 / 2014

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>FREEDOMWORKS FOR AMERICA</b>	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> C00499020
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="margin-left: 20px;">MM / DD / YYYY</span>	

Full Name of Payee <b>Freedomworks, Inc.</b>	Date of Public Distribution/Dissemination MM / DD / YYYY 06 / 18 / 2014
Mailing Address 400 N Capitol St., NW Suite 735	Amount 5.49
City Washington State DC Zip Code 20001	<b>Transaction ID : SE.40963</b> Date of Disbursement or Obligation MM / DD / YYYY 06 / 18 / 2014
Purpose of Expenditure IE-Pryor-Email/Social Media/Printing	Category/Type 004
Name of Federal Candidate MARK LUNSFORD PRYOR	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President State: AR
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶
	152.75

Full Name of Payee <b>Freedomworks, Inc.</b>	Date of Public Distribution/Dissemination MM / DD / YYYY 06 / 18 / 2014
Mailing Address 400 N Capitol St., NW Suite 735	Amount 5.49
City Washington State DC Zip Code 20001	<b>Transaction ID : SE.40964</b> Date of Disbursement or Obligation MM / DD / YYYY 06 / 18 / 2014
Purpose of Expenditure IE-Landrieu-Email/Social Media/Printing	Category/Type 004
Name of Federal Candidate MARY L LANDRIEU	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President State: LA
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶
	8210.83

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	10.98
(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.

*R. Russ Walker*

Signature \_\_\_\_\_ [Electronically Filed] Date MM / DD / YYYY  
07 / 18 / 2014

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
FREEDOMWORKS FOR AMERICA
FEC IDENTIFICATION NUMBER
C C00499020
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee
Freedomworks, Inc.
Mailing Address
400 N Capitol St., NW
Suite 735
City
Washington State
DC Zip Code
20001
Purpose of Expenditure
IE-Brannon-Email/Social Media/Printing
Category/Type
004
Name of Federal Candidate
GREGORY JOSEPH BRANNON
Support
Office Sought:
Senate State:
NC
Calendar Year-To-Date
Per Election for Office Sought
57.17

Date of Public Distribution/Dissemination
06 / 18 / 2014
Amount
5.49
Transaction ID : SE.40965
Date of Disbursement or Obligation
06 / 18 / 2014
Disbursement For:
Other (specify)
Runoff

Full Name of Payee
Freedomworks, Inc.
Mailing Address
400 N Capitol St., NW
Suite 735
City
Washington State
DC Zip Code
20001
Purpose of Expenditure
IE-McDaniel-Travel
Category/Type
002
Name of Federal Candidate
CHRISTOPHER BRIAN MCDANIEL
Support
Office Sought:
Senate State:
MS
Calendar Year-To-Date
Per Election for Office Sought
149236.06

Date of Public Distribution/Dissemination
06 / 19 / 2014
Amount
691.49
Transaction ID : SE.35584
Date of Disbursement or Obligation
06 / 19 / 2014
Disbursement For:
Other (specify)
Runoff

(a) SUBTOTAL of Itemized Independent Expenditures 696.98
(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.

R. Russ Walker
[Electronically Filed]
Date
07 / 18 / 2014
Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>FREEDOMWORKS FOR AMERICA</b>	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> C00499020
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="margin-left: 20px;">M M M / D D D / Y Y Y Y Y Y</span>	

Full Name of Payee <b>Freedomworks, Inc.</b>	Date of Public Distribution/Dissemination <span style="margin-left: 20px;">M M M / D D D / Y Y Y Y Y Y</span> <b>06 / 19 / 2014</b>
Mailing Address 400 N Capitol St., NW Suite 735	Amount <span style="margin-left: 20px;">275.67</span>
City State Zip Code Washington DC 20001	<b>Transaction ID : SE.35589</b> Date of Disbursement or Obligation <span style="margin-left: 20px;">M M M / D D D / Y Y Y Y Y Y</span> <b>06 / 19 / 2014</b>
Purpose of Expenditure IE-McDaniel-Email/Social Media/Printing	Category/Type <span style="margin-left: 20px;">004</span>
Name of Federal Candidate CHRISTOPHER BRIAN MCDANIEL	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: <u>00</u> State: <u>MS</u>
Calendar Year-To-Date Per Election for Office Sought <span style="margin-left: 20px;">149511.73</span>	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input checked="" type="checkbox"/> Other (specify) ▶ <u>Runoff</u>

Full Name of Payee <b>Freedomworks, Inc.</b>	Date of Public Distribution/Dissemination <span style="margin-left: 20px;">M M M / D D D / Y Y Y Y Y Y</span> <b>06 / 19 / 2014</b>
Mailing Address 400 N Capitol St., NW Suite 735	Amount <span style="margin-left: 20px;">5.49</span>
City State Zip Code Washington DC 20001	<b>Transaction ID : SE.40966</b> Date of Disbursement or Obligation <span style="margin-left: 20px;">M M M / D D D / Y Y Y Y Y Y</span> <b>06 / 19 / 2014</b>
Purpose of Expenditure IE-Pryor-Email/Social Media/Printing	Category/Type <span style="margin-left: 20px;">004</span>
Name of Federal Candidate MARK LUNSFORD PRYOR	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: <u>00</u> State: <u>AR</u>
Calendar Year-To-Date Per Election for Office Sought <span style="margin-left: 20px;">158.24</span>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....▶	<span style="margin-left: 20px;">281.16</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures.....▶	<span style="margin-left: 20px;"></span>
(c) <b>TOTAL</b> Independent Expenditures.....▶	<span style="margin-left: 20px;"></span>

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.

*R. Russ Walker*  
Signature

[Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y  
**07 / 18 / 2014**

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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

Full Name of Payee <b>Freedomworks, Inc.</b>	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 06 / 19 / 2014
Mailing Address 400 N Capitol St., NW Suite 735	Amount <span style="border: 1px solid black; padding: 2px;">5.49</span>
City Washington State DC Zip Code 20001	<b>Transaction ID : SE.40967</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 06 / 19 / 2014
Purpose of Expenditure IE-Landrieu-Email/Social Media/Printing	Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>
Name of Federal Candidate MARY L LANDRIEU	Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: LA
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">8216.32</span>	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <b>Freedomworks, Inc.</b>	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 06 / 19 / 2014
Mailing Address 400 N Capitol St., NW Suite 735	Amount <span style="border: 1px solid black; padding: 2px;">5.49</span>
City Washington State DC Zip Code 20001	<b>Transaction ID : SE.40968</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 06 / 19 / 2014
Purpose of Expenditure IE-Brannon-Email/Social Media/Printing	Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>
Name of Federal Candidate GREGORY JOSEPH BRANNON	Office Sought: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NC
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">62.66</span>	Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▶ Runoff

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<span style="border: 1px solid black; padding: 2px;">10.98</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<span style="border: 1px solid black; padding: 2px;"> </span>
(c) <b>TOTAL</b> Independent Expenditures..... ▶	<span style="border: 1px solid black; padding: 2px;"> </span>

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.

*R. Russ Walker*

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y  
07 / 18 / 2014

Signature



SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
FREEDOMWORKS FOR AMERICA
FEC IDENTIFICATION NUMBER
C C00499020
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee
Freedomworks, Inc.
Mailing Address
400 N Capitol St., NW
Suite 735
City
Washington State
DC Zip Code
20001
Purpose of Expenditure
IE-McDaniel-Travel
Category/Type
002
Name of Federal Candidate
CHRISTOPHER BRIAN MCDANIEL
Support
Office Sought:
Senate State: MS
Calendar Year-To-Date
Per Election for Office Sought
151567.58

Date of Public Distribution/Dissemination
06 / 20 / 2014
Amount
2055.85
Transaction ID : SE.35585
Date of Disbursement or Obligation
06 / 20 / 2014
Disbursement For:
Other (specify) Runoff

Full Name of Payee
Freedomworks, Inc.
Mailing Address
400 N Capitol St., NW
Suite 735
City
Washington State
DC Zip Code
20001
Purpose of Expenditure
IE-McDaniel-Email/Social Media/Printing
Category/Type
004
Name of Federal Candidate
CHRISTOPHER BRIAN MCDANIEL
Support
Office Sought:
Senate State: MS
Calendar Year-To-Date
Per Election for Office Sought
153549.14

Date of Public Distribution/Dissemination
06 / 20 / 2014
Amount
489.61
Transaction ID : SE.35590
Date of Disbursement or Obligation
06 / 20 / 2014
Disbursement For:
Other (specify) Runoff

(a) SUBTOTAL of Itemized Independent Expenditures 2545.46
(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.

R. Russ Walker
[Electronically Filed]
Date 07 / 18 / 2014
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
FREEDOMWORKS FOR AMERICA
FEC IDENTIFICATION NUMBER
C C00499020
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee: Freedomworks, Inc.
Mailing Address: 400 N Capitol St., NW Suite 735
City: Washington State: DC Zip Code: 20001
Purpose of Expenditure: IE-McDaniel-Travel Category/Type: 002
Name of Federal Candidate: CHRISTOPHER BRIAN MCDANIEL
Calendar Year-To-Date Per Election for Office Sought: 155121.79
Date of Public Distribution/Dissemination: 06/21/2014
Amount: 257.27
Transaction ID: SE.35677
Date of Disbursement or Obligation: 06/21/2014
Office Sought: Senate State: MS
Disbursement For: Other (specify) Runoff

Full Name of Payee: Freedomworks, Inc.
Mailing Address: 400 N Capitol St., NW Suite 735
City: Washington State: DC Zip Code: 20001
Purpose of Expenditure: IE-McDaniel-Travel Category/Type: 002
Name of Federal Candidate: CHRISTOPHER BRIAN MCDANIEL
Calendar Year-To-Date Per Election for Office Sought: 161239.60
Date of Public Distribution/Dissemination: 06/22/2014
Amount: 2494.20
Transaction ID: SE.35678
Date of Disbursement or Obligation: 06/22/2014
Office Sought: Senate State: MS
Disbursement For: Other (specify) Runoff

(a) SUBTOTAL of Itemized Independent Expenditures: 2751.47
(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.

R. Russ Walker
[Electronically Filed]
Date: 07/18/2014
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
FREEDOMWORKS FOR AMERICA
FEC IDENTIFICATION NUMBER
C C00499020
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee
Freedomworks, Inc.
Mailing Address
400 N Capitol St., NW
Suite 735
City
Washington State
DC Zip Code
20001
Purpose of Expenditure
IE-McDaniel-Travel
Category/Type
002
Name of Federal Candidate
CHRISTOPHER BRIAN MCDANIEL
Support
Office Sought:
Senate State: MS
Calendar Year-To-Date
Per Election for Office Sought
161877.89

Date of Public Distribution/Dissemination
06 / 23 / 2014
Amount
504.98
Transaction ID : SE.35718
Date of Disbursement or Obligation
06 / 23 / 2014
Disbursement For:
Other (specify)
Runoff

Full Name of Payee
Freedomworks, Inc.
Mailing Address
400 N Capitol St., NW
Suite 735
City
Washington State
DC Zip Code
20001
Purpose of Expenditure
IE-McDaniel-Email/Social Media/Printing
Category/Type
004
Name of Federal Candidate
CHRISTOPHER BRIAN MCDANIEL
Support
Office Sought:
Senate State: MS
Calendar Year-To-Date
Per Election for Office Sought
164402.25

Date of Public Distribution/Dissemination
06 / 23 / 2014
Amount
2294.45
Transaction ID : SE.35728
Date of Disbursement or Obligation
06 / 23 / 2014
Disbursement For:
Other (specify)
Runoff

Table with 2 columns: Description and Amount. (a) SUBTOTAL of Itemized Independent Expenditures 2799.43; (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.

R. Russ Walker
[Electronically Filed]
Date 07 / 18 / 2014
Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>FREEDOMWORKS FOR AMERICA</b>	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> C00499020
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="float:right">M M M / D D D / Y Y Y Y Y Y</span>	

Full Name of Payee <b>Freedomworks, Inc.</b>	Date of Public Distribution/Dissemination <span style="float:right">M M M / D D D / Y Y Y Y Y Y</span> <b>06 / 23 / 2014</b>
Mailing Address 400 N Capitol St., NW Suite 735	Amount <span style="float:right">44.30</span>
City State Zip Code Washington DC 20001	<b>Transaction ID : SE.40969</b> Date of Disbursement or Obligation <span style="float:right">M M M / D D D / Y Y Y Y Y Y</span> <b>06 / 23 / 2014</b>
Purpose of Expenditure IE-Shannon-Email/Social Media/Printing	Category/Type <span style="float:right">004</span>
Name of Federal Candidate T W SHANNON	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: <u>00</u> State: <u>OK</u>
Calendar Year-To-Date Per Election for Office Sought <span style="float:right">40209.69</span>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <b>Freedomworks, Inc.</b>	Date of Public Distribution/Dissemination <span style="float:right">M M M / D D D / Y Y Y Y Y Y</span> <b>06 / 23 / 2014</b>
Mailing Address 400 N Capitol St., NW Suite 735	Amount <span style="float:right">5.49</span>
City State Zip Code Washington DC 20001	<b>Transaction ID : SE.40970</b> Date of Disbursement or Obligation <span style="float:right">M M M / D D D / Y Y Y Y Y Y</span> <b>06 / 23 / 2014</b>
Purpose of Expenditure IE-Bongino-Email/Social Media/Printing	Category/Type <span style="float:right">004</span>
Name of Federal Candidate DANIEL BONGINO	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: <u>06</u> State: <u>MD</u>
Calendar Year-To-Date Per Election for Office Sought <span style="float:right">269.39</span>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....▶	<span style="float:right">49.79</span>
(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.

*R. Russ Walker*

Signature \_\_\_\_\_ [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y  
**07 / 18 / 2014**

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
FREEDOMWORKS FOR AMERICA
FEC IDENTIFICATION NUMBER
C C00499020
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee
Freedomworks, Inc.
Mailing Address
400 N Capitol St., NW
Suite 735
City Washington State DC Zip Code 20001
Purpose of Expenditure
IE-Lamborn-Email/Social Media/Printing
Category/Type 004
Name of Federal Candidate
DOUGLAS L LAMBORN
Support
Office Sought: House District: 05
State: CO
Calendar Year-To-Date
Per Election for Office Sought 19.54

Date of Public Distribution/Dissemination
06 / 23 / 2014
Amount
5.49
Transaction ID : SE.40971
Date of Disbursement or Obligation
06 / 23 / 2014
Disbursement For: Primary
2014

Full Name of Payee
Freedomworks, Inc.
Mailing Address
400 N Capitol St., NW
Suite 735
City Washington State DC Zip Code 20001
Purpose of Expenditure
IE-McDaniel-Travel
Category/Type 002
Name of Federal Candidate
CHRISTOPHER BRIAN MCDANIEL
Support
Office Sought: Senate District: 00
State: MS
Calendar Year-To-Date
Per Election for Office Sought 167416.36

Date of Public Distribution/Dissemination
06 / 24 / 2014
Amount
3014.11
Transaction ID : SE.35750
Date of Disbursement or Obligation
06 / 24 / 2014
Disbursement For: Other (specify) Runoff
2014

(a) SUBTOTAL of Itemized Independent Expenditures 3019.60
(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.

R. Russ Walker
[Electronically Filed]
Date 07 / 18 / 2014
Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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

Full Name of Payee <b>Freedomworks, Inc.</b>	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 06 / 24 / 2014
Mailing Address 400 N Capitol St., NW Suite 735	Amount <span style="border: 1px solid black; padding: 2px;">3771.74</span>
City Washington State DC Zip Code 20001	<b>Transaction ID : SE.35759</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 06 / 24 / 2014
Purpose of Expenditure IE-McDaniel-Email/Social Media/Printing	Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>
Name of Federal Candidate CHRISTOPHER BRIAN MCDANIEL	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President State: MS
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">171313.72</span>	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input checked="" type="checkbox"/> Other (specify) ▶ Runoff

Full Name of Payee <b>Freedomworks, Inc.</b>	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 06 / 24 / 2014
Mailing Address 400 N Capitol St., NW Suite 735	Amount <span style="border: 1px solid black; padding: 2px;">50.21</span>
City Washington State DC Zip Code 20001	<b>Transaction ID : SE.40972</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 06 / 24 / 2014
Purpose of Expenditure IE-Shannon-Email/Social Media/Printing	Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>
Name of Federal Candidate T W SHANNON	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President State: OK
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">40259.90</span>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<span style="border: 1px solid black; padding: 2px;">3821.95</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<span style="border: 1px solid black; padding: 2px;"> </span>
(c) <b>TOTAL</b> Independent Expenditures..... ▶	<span style="border: 1px solid black; padding: 2px;"> </span>

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.

*R. Russ Walker* [Electronically Filed] Date M M / D D / Y Y Y Y Y Y 07 / 18 / 2014

Signature \_\_\_\_\_



SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
FREEDOMWORKS FOR AMERICA
FEC IDENTIFICATION NUMBER
C C00499020
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee: Freedomworks, Inc.
Mailing Address: 400 N Capitol St., NW Suite 735
City: Washington State: DC Zip Code: 20001
Purpose of Expenditure: IE-McDaniel-Travel Category/Type: 002
Name of Federal Candidate: CHRISTOPHER BRIAN MCDANIEL
Office Sought: Senate State: MS
Calendar Year-To-Date Per Election for Office Sought: 174266.92
Disbursement For: Other (specify) Runoff

Full Name of Payee: Google, Inc.
Mailing Address: Department No. 33564 P.O. Box 39000
City: San Francisco State: CA Zip Code: 94139
Purpose of Expenditure: IE-McDaniel-Online Ads Category/Type: 004
Name of Federal Candidate: CHRISTOPHER BRIAN MCDANIEL
Office Sought: Senate State: MS
Calendar Year-To-Date Per Election for Office Sought: 113494.04
Disbursement For: Other (specify) Runoff

(a) SUBTOTAL of Itemized Independent Expenditures: 16235.42
(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.
Signature: R. Russ Walker [Electronically Filed] Date: 07/18/2014



SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
FREEDOMWORKS FOR AMERICA
FEC IDENTIFICATION NUMBER
C C00499020
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee
Google, Inc.
Mailing Address
Department No. 33564
P.O. Box 39000
City
San Francisco State
CA Zip Code
94139
Purpose of Expenditure
IE-Cochran-Online Ads Category/
Type
004

Date of Public Distribution/Dissemination
06 / 14 / 2014
Amount
15739.61
Transaction ID : SE.32615
Date of Disbursement or Obligation
06 / 14 / 2014

Name of Federal Candidate
THAD COCHRAN
Support
Oppose
Office Sought:
House
Senate
District: 00
State: MS

Disbursement For:
Primary
General
Other (specify)
Runoff

Full Name of Payee
Google, Inc.
Mailing Address
Department No. 33564
P.O. Box 39000
City
San Francisco State
CA Zip Code
94139
Purpose of Expenditure
IE-Shannon-Online Ads Category/
Type
004

Date of Public Distribution/Dissemination
06 / 17 / 2014
Amount
14000.00
Transaction ID : SE.35546
Date of Disbursement or Obligation
06 / 17 / 2014

Name of Federal Candidate
T W SHANNON
Support
Oppose
Office Sought:
House
Senate
District: 00
State: OK

Disbursement For:
Primary
General
Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 29739.61
(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.

R. Russ Walker
[Electronically Filed]
Date 07 / 18 / 2014
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
FREEDOMWORKS FOR AMERICA
FEC IDENTIFICATION NUMBER
C C00499020
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee
Google, Inc.
Mailing Address
Department No. 33564
P.O. Box 39000
City
San Francisco
State
CA
Zip Code
94139
Purpose of Expenditure
IE-Lankford-Online Ads
Category/Type
004
Name of Federal Candidate
JAMES PAUL LANKFORD
Support
Oppose
Calendar Year-To-Date
Per Election for Office Sought
28346.92

Date of Public Distribution/Dissemination
06 / 17 / 2014
Amount
7000.00
Transaction ID : SE.35547
Date of Disbursement or Obligation
06 / 17 / 2014
Office Sought:
House
Senate
District: 00
State: OK
Disbursement For:
Primary
General
Other (specify)

Full Name of Payee
Google, Inc.
Mailing Address
Department No. 33564
P.O. Box 39000
City
San Francisco
State
CA
Zip Code
94139
Purpose of Expenditure
IE-Lankford-Online Ads
Category/Type
004
Name of Federal Candidate
JAMES PAUL LANKFORD
Support
Oppose
Calendar Year-To-Date
Per Election for Office Sought
38165.39

Date of Public Distribution/Dissemination
06 / 18 / 2014
Amount
3731.00
Transaction ID : SE.35775
Date of Disbursement or Obligation
06 / 18 / 2014
Office Sought:
House
Senate
District: 00
State: OK
Disbursement For:
Primary
General
Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures..... 10731.00
(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.
R. Russ Walker
[Electronically Filed]
Date 07 / 18 / 2014
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
FREEDOMWORKS FOR AMERICA
FEC IDENTIFICATION NUMBER
C C00499020
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee: George Grover
Mailing Address: 637 25t hSt.
City: Arlington, State: VA, Zip Code: 22202
Purpose of Expenditure: IE-McDaniel-Travel, Category/Type: 002
Date of Public Distribution/Dissemination: 06/02/2014
Amount: 81.68
Transaction ID: SE.32558
Date of Disbursement or Obligation: 06/02/2014
Name of Federal Candidate: CHRISTOPHER BRIAN MCDANIEL, Support
Office Sought: Senate, State: MS
Disbursement For: Primary

Full Name of Payee: Hampton Inn-MS
Mailing Address: 3206 Greymont
City: Jackson, State: MS, Zip Code: 39202
Purpose of Expenditure: IE-McDaniel-Travel, Category/Type: 002
Date of Public Distribution/Dissemination: 06/23/2014
Amount: 4.00
Transaction ID: SE.35724
Date of Disbursement or Obligation: 06/23/2014
Name of Federal Candidate: CHRISTOPHER BRIAN MCDANIEL, Support
Office Sought: Senate, State: MS
Disbursement For: Other (specify) Runoff

(a) SUBTOTAL of Itemized Independent Expenditures: 85.68
(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.

R. Russ Walker
[Electronically Filed]
Date: 07/18/2014
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
FREEDOMWORKS FOR AMERICA
FEC IDENTIFICATION NUMBER
C C00499020
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee: Kathy Hartkopf
Mailing Address: 2405 Uphill Ct.
City: Hillsboro, State: NC, Zip Code: 27278
Purpose of Expenditure: IE-McDaniel-Travel Stipend
Category/Type: 002
Amount: 500.00
Transaction ID: SE.35593
Date of Disbursement or Obligation: 06/20/2014
Name of Federal Candidate: CHRISTOPHER BRIAN MCDANIEL
Support: [X]
Office Sought: Senate, State: MS
Calendar Year-To-Date Per Election for Office Sought: 154549.14
Disbursement For: Other (specify) Runoff

Full Name of Payee: HMS Host
Mailing Address: 6000 N Terminal Pkwy
City: Atlanta, State: GA, Zip Code: 30320
Purpose of Expenditure: IE-Travel-McDaniel
Category/Type: 002
Amount: 2.10
Transaction ID: SE.35669
Date of Disbursement or Obligation: 06/22/2014
Name of Federal Candidate: CHRISTOPHER BRIAN MCDANIEL
Support: [X]
Office Sought: Senate, State: MS
Calendar Year-To-Date Per Election for Office Sought: 158489.29
Disbursement For: Other (specify) Runoff

(a) SUBTOTAL of Itemized Independent Expenditures: 502.10
(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.
Signature: R. Russ Walker
Date: 07/18/2014
[Electronically Filed]



**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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

Full Name of Payee <b>Holiday Inn-MS</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <b>06 / 22 / 2014</b>	
Mailing Address 10 Gateway Dr.		Amount <b>334.63</b>	
City <b>Hattiesburg</b>	State <b>MS</b>	Zip Code <b>39402</b>	<b>Transaction ID : SE.35664</b>
Purpose of Expenditure IE-Travel-McDaniel	Category/Type <b>002</b>	Date of Disbursement or Obligation MM / DD / YYYY <b>06 / 22 / 2014</b>	
Name of Federal Candidate <b>CHRISTOPHER BRIAN MCDANIEL</b>		Office Sought: <input type="checkbox"/> House District: <u>00</u> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>MS</u>	
Calendar Year-To-Date Per Election for Office Sought <b>158462.42</b>		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input checked="" type="checkbox"/> Other (specify) ▶ <u>Runoff</u>	

Full Name of Payee <b>Hudson News</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <b>06 / 20 / 2014</b>	
Mailing Address Reagan National Airport		Amount <b>4.57</b>	
City <b>Arlington</b>	State <b>VA</b>	Zip Code <b>22202</b>	<b>Transaction ID : SE.35610</b>
Purpose of Expenditure IE-McDaniel-Travel	Category/Type <b>002</b>	Date of Disbursement or Obligation MM / DD / YYYY <b>06 / 20 / 2014</b>	
Name of Federal Candidate <b>CHRISTOPHER BRIAN MCDANIEL</b>		Office Sought: <input type="checkbox"/> House District: <u>00</u> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>MS</u>	
Calendar Year-To-Date Per Election for Office Sought <b>154578.71</b>		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input checked="" type="checkbox"/> Other (specify) ▶ <u>Runoff</u>	

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<b>339.20</b>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	
<b>(c) 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.

*R. Russ Walker*

Signature \_\_\_\_\_ [Electronically Filed] Date MM / DD / YYYY **07 / 18 / 2014**

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
FREEDOMWORKS FOR AMERICA
FEC IDENTIFICATION NUMBER
C C00499020
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee
Hudson News
Mailing Address
Reagan National Airport
City
Arlington State
VA Zip Code
22202
Date of Public Distribution/Dissemination
06 / 24 / 2014
Amount
12.82
Transaction ID : SE.40974
Date of Disbursement or Obligation
06 / 24 / 2014
Purpose of Expenditure
IE-McDaniel-Travel Category/Type
002
Name of Federal Candidate
CHRISTOPHER BRIAN MCDANIEL
Support
Office Sought:
Senate State:
MS
Calendar Year-To-Date
Per Election for Office Sought
171386.54
Disbursement For:
Other (specify)
Runoff

Full Name of Payee
Jackson Evers Intl Airport
Mailing Address
100 International Dr.
City
Jackson State
MS Zip Code
39208
Date of Public Distribution/Dissemination
06 / 22 / 2014
Amount
2.50
Transaction ID : SE.35676
Date of Disbursement or Obligation
06 / 22 / 2014
Purpose of Expenditure
IE-Travel-McDaniel Category/Type
002
Name of Federal Candidate
CHRISTOPHER BRIAN MCDANIEL
Support
Office Sought:
Senate State:
MS
Calendar Year-To-Date
Per Election for Office Sought
158745.40
Disbursement For:
Other (specify)
Runoff

(a) SUBTOTAL of Itemized Independent Expenditures 15.32
(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.

R. Russ Walker
[Electronically Filed]
Date 07 / 18 / 2014
Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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 type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		<input style="width: 30px;" type="text" value="MM"/> / <input style="width: 30px;" type="text" value="DD"/> / <input style="width: 60px;" type="text" value="YYYY"/>

Full Name of Payee <b>Jamba Juice</b>		Date of Public Distribution/Dissemination <input style="width: 30px;" type="text" value="MM"/> / <input style="width: 30px;" type="text" value="DD"/> / <input style="width: 60px;" type="text" value="YYYY"/> <b>06 / 24 / 2014</b>	
Mailing Address 6000 North Terminal Pkwy		Amount <input style="width: 100%;" type="text" value="00000000"/> <b>7.02</b>	
City Atlanta	State GA	Zip Code 30320	Transaction ID : <b>SE.40975</b>
Purpose of Expenditure IE-McDaniel-Travel		Category/Type <input style="width: 50px;" type="text" value="002"/>	Date of Disbursement or Obligation <input style="width: 30px;" type="text" value="MM"/> / <input style="width: 30px;" type="text" value="DD"/> / <input style="width: 60px;" type="text" value="YYYY"/> <b>06 / 24 / 2014</b>
Name of Federal Candidate CHRISTOPHER BRIAN MCDANIEL		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <u>00</u> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>MS</u>
Calendar Year-To-Date Per Election for Office Sought		<input style="width: 100%;" type="text" value="00000000"/> <b>171393.56</b>	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input checked="" type="checkbox"/> Other (specify) ▶ <u>Runoff</u>

Full Name of Payee <b>Julep-MS</b>		Date of Public Distribution/Dissemination <input style="width: 30px;" type="text" value="MM"/> / <input style="width: 30px;" type="text" value="DD"/> / <input style="width: 60px;" type="text" value="YYYY"/> <b>06 / 23 / 2014</b>	
Mailing Address 4500 I-55 N.		Amount <input style="width: 100%;" type="text" value="00000000"/> <b>67.72</b>	
City Jackson	State MS	Zip Code 39211	Transaction ID : <b>SE.35722</b>
Purpose of Expenditure IE-McDaniel-Travel		Category/Type <input style="width: 50px;" type="text" value="002"/>	Date of Disbursement or Obligation <input style="width: 30px;" type="text" value="MM"/> / <input style="width: 30px;" type="text" value="DD"/> / <input style="width: 60px;" type="text" value="YYYY"/> <b>06 / 23 / 2014</b>
Name of Federal Candidate CHRISTOPHER BRIAN MCDANIEL		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <u>00</u> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>MS</u>
Calendar Year-To-Date Per Election for Office Sought		<input style="width: 100%;" type="text" value="00000000"/> <b>162044.93</b>	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input checked="" type="checkbox"/> Other (specify) ▶ <u>Runoff</u>

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....▶	<input style="width: 100%;" type="text" value="00000000"/> <b>74.74</b>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures.....▶	<input style="width: 100%;" type="text" value="00000000"/>
(c) <b>TOTAL</b> Independent Expenditures.....▶	<input style="width: 100%;" type="text" value="00000000"/>

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*R. Russ Walker*

Signature \_\_\_\_\_ [Electronically Filed] Date  /  /   
**07 / 18 / 2014**



SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
FREEDOMWORKS FOR AMERICA
FEC IDENTIFICATION NUMBER
C C00499020
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee
Kangaroo Express-MS
Mailing Address
13490 Hwy 49
City
Gulfport State
MS Zip Code
39507
Purpose of Expenditure
IE-McDaniel-Travel Category/
Type 002
Name of Federal Candidate
CHRISTOPHER BRIAN MCDANIEL
Support
Office Sought:
House District: 00
President Senate State: MS
Calendar Year-To-Date
Per Election for Office Sought
161931.45

Date of Public Distribution/Dissemination
06 / 23 / 2014
Amount
47.94
Transaction ID : SE.35720
Date of Disbursement or Obligation
06 / 23 / 2014
Disbursement For:
Primary General
Other (specify) Runoff

Full Name of Payee
Kangaroo Express-MS
Mailing Address
13490 Hwy 49
City
Gulfport State
MS Zip Code
39507
Purpose of Expenditure
IE-McDaniel-Travel Category/
Type 002
Name of Federal Candidate
CHRISTOPHER BRIAN MCDANIEL
Support
Office Sought:
House District: 00
President Senate State: MS
Calendar Year-To-Date
Per Election for Office Sought
167536.60

Date of Public Distribution/Dissemination
06 / 24 / 2014
Amount
50.27
Transaction ID : SE.35757
Date of Disbursement or Obligation
06 / 24 / 2014
Disbursement For:
Primary General
Other (specify) Runoff

(a) SUBTOTAL of Itemized Independent Expenditures 98.21
(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.

R. Russ Walker
[Electronically Filed]
Date 07 / 18 / 2014
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
FREEDOMWORKS FOR AMERICA
FEC IDENTIFICATION NUMBER
C C00499020
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee
Keg & Barrell-MS
Mailing Address
1315 Hardy St.
City
Hattiesburg State
MS Zip Code
39401
Purpose of Expenditure
IE-Travel-McDaniel Category/
Type 002
Name of Federal Candidate
CHRISTOPHER BRIAN MCDANIEL
Calendar Year-To-Date
Per Election for Office Sought
154764.22
Date of Public Distribution/Dissemination
06 / 21 / 2014
Amount
24.00
Transaction ID : SE.35656
Date of Disbursement or Obligation
06 / 21 / 2014
Office Sought: House District: 00
Senate State: MS
Disbursement For: Primary General
Other (specify) Runoff

Full Name of Payee
La Fiesta Brava-MS
Mailing Address
6168 Hwy 49 North
City
Hattiesburg State
MS Zip Code
39404
Purpose of Expenditure
IE-McDaniel-Travel Category/
Type 002
Name of Federal Candidate
CHRISTOPHER BRIAN MCDANIEL
Calendar Year-To-Date
Per Election for Office Sought
161311.42
Date of Public Distribution/Dissemination
06 / 23 / 2014
Amount
56.82
Transaction ID : SE.35715
Date of Disbursement or Obligation
06 / 23 / 2014
Office Sought: House District: 00
Senate State: MS
Disbursement For: Primary General
Other (specify) Runoff

(a) SUBTOTAL of Itemized Independent Expenditures 80.82
(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.
R. Russ Walker
[Electronically Filed]
Date 07 / 18 / 2014
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
FREEDOMWORKS FOR AMERICA
FEC IDENTIFICATION NUMBER
C C00499020
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee: Leatha BBQ-MS
Mailing Address: 6374 US Hwy 98 #D
City: Hattiesburg, State: MS, Zip Code: 39402
Purpose of Expenditure: IE-Travel-McDaniel, Category/Type: 002
Date of Public Distribution/Dissemination: 06/21/2014
Amount: 25.79
Transaction ID: SE.35657
Date of Disbursement or Obligation: 06/21/2014
Name of Federal Candidate: CHRISTOPHER BRIAN MCDANIEL, Support
Office Sought: Senate, State: MS
Calendar Year-To-Date Per Election for Office Sought: 154790.01
Disbursement For: Other (specify) Runoff

Full Name of Payee: Market Street Grill-UT
Mailing Address: SLC Airport
City: Salt Lake City, State: UT, Zip Code: 84122
Purpose of Expenditure: IE-McDaniel-Travel, Category/Type: 002
Date of Public Distribution/Dissemination: 06/20/2014
Amount: 16.76
Transaction ID: SE.35622
Date of Disbursement or Obligation: 06/20/2014
Name of Federal Candidate: CHRISTOPHER BRIAN MCDANIEL, Support
Office Sought: Senate, State: MS
Calendar Year-To-Date Per Election for Office Sought: 154701.55
Disbursement For: Other (specify) Runoff

(a) SUBTOTAL of Itemized Independent Expenditures..... 42.55
(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.
Signature: R. Russ Walker [Electronically Filed] Date: 07/18/2014

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
FREEDOMWORKS FOR AMERICA
FEC IDENTIFICATION NUMBER
C C00499020
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee: Mugshots-MS
Mailing Address: 4245 Lakeland Dr.
City: Flowood, State: MS, Zip Code: 39232
Purpose of Expenditure: IE-McDaniel-Travel, Category/Type: 002
Date of Public Distribution/Dissemination: 06/23/2014
Amount: 45.76
Transaction ID: SE.35721
Date of Disbursement or Obligation: 06/23/2014
Name of Federal Candidate: CHRISTOPHER BRIAN MCDANIEL, Support
Office Sought: Senate, State: MS
Calendar Year-To-Date Per Election for Office Sought: 161977.21
Disbursement For: Other (specify) Runoff

Full Name of Payee: Murphy Express-MS
Mailing Address: 4103 Pemberton Sq. Blvd.
City: Vicksburg, State: MS, Zip Code: 39180
Purpose of Expenditure: IE-Travel-McDaniel, Category/Type: 002
Date of Public Distribution/Dissemination: 06/21/2014
Amount: 5.76
Transaction ID: SE.35659
Date of Disbursement or Obligation: 06/21/2014
Name of Federal Candidate: CHRISTOPHER BRIAN MCDANIEL, Support
Office Sought: Senate, State: MS
Calendar Year-To-Date Per Election for Office Sought: 154843.78
Disbursement For: Other (specify) Runoff

(a) SUBTOTAL of Itemized Independent Expenditures..... 51.52
(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.
Signature: R. Russ Walker [Electronically Filed] Date: 07/18/2014

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
FREEDOMWORKS FOR AMERICA
FEC IDENTIFICATION NUMBER
C C00499020
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee
Odd Lamps, LLC
Mailing Address
12076 92nd Ave N
City
Maple Grove State
MN Zip Code
55369
Date of Public Distribution/Dissemination
06 / 18 / 2014
Amount
2000.00
Transaction ID : SE.35776
Date of Disbursement or Obligation
06 / 18 / 2014
Purpose of Expenditure
IE-Lankford-Online Ads Category/Type
004
Name of Federal Candidate
JAMES PAUL LANKFORD Support Oppose
Office Sought: House Senate State: OK
Calendar Year-To-Date
Per Election for Office Sought
40165.39
Disbursement For: Primary General
2014 Other (specify)

Full Name of Payee
Josh Pearson
Mailing Address
400 N Capitol St., SW
Ste. 765
City
Washington State
DC Zip Code
20001
Date of Public Distribution/Dissemination
06 / 20 / 2014
Amount
25.00
Transaction ID : SE.35596
Date of Disbursement or Obligation
06 / 20 / 2014
Purpose of Expenditure
IE-McDaniel-Travel Category/Type
002
Name of Federal Candidate
CHRISTOPHER BRIAN MCDANIEL Support Oppose
Office Sought: House Senate State: MS
Calendar Year-To-Date
Per Election for Office Sought
154574.14
Disbursement For: Primary General
2014 Other (specify)
Runoff

(a) SUBTOTAL of Itemized Independent Expenditures 2025.00
(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.

R. Russ Walker
[Electronically Filed]
Date 07 / 18 / 2014
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
FREEDOMWORKS FOR AMERICA
FEC IDENTIFICATION NUMBER
C C00499020
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee
Piggly Wiggly-MS
Mailing Address
110 East Academy
City State Zip Code
Canton MS 39046
Purpose of Expenditure
IE-Travel-McDaniel
Category/Type
002
Name of Federal Candidate
CHRISTOPHER BRIAN MCDANIEL
Support
Calendar Year-To-Date
Per Election for Office Sought
154847.92

Date of Public Distribution/Dissemination
06 / 21 / 2014
Amount
2.13
Transaction ID : SE.35661
Date of Disbursement or Obligation
06 / 21 / 2014
Office Sought:
House District: 00
Senate State: MS
Disbursement For:
Primary General
Other (specify) Runoff

Full Name of Payee
Pine Tree-MS
Mailing Address
31235 Liberty St.
City State Zip Code
Canton MS 39046
Purpose of Expenditure
IE-Travel-McDaniel
Category/Type
002
Name of Federal Candidate
CHRISTOPHER BRIAN MCDANIEL
Support
Calendar Year-To-Date
Per Election for Office Sought
154845.79

Date of Public Distribution/Dissemination
06 / 21 / 2014
Amount
2.01
Transaction ID : SE.35660
Date of Disbursement or Obligation
06 / 21 / 2014
Office Sought:
House District: 00
Senate State: MS
Disbursement For:
Primary General
Other (specify) Runoff

(a) SUBTOTAL of Itemized Independent Expenditures..... 4.14
(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.

R. Russ Walker
[Electronically Filed]
Date 07 / 18 / 2014
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
FREEDOMWORKS FOR AMERICA
FEC IDENTIFICATION NUMBER
C C00499020
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee: Raceway Gas
Mailing Address: 460 Airport Rd.
City: Pearl, State: MS, Zip Code: 39201
Purpose of Expenditure: IE-McDaniel-Travel, Category/Type: 002
Date of Public Distribution/Dissemination: 06/24/2014
Amount: 37.31
Transaction ID: SE.40989
Date of Disbursement or Obligation: 06/24/2014
Name of Federal Candidate: CHRISTOPHER BRIAN MCDANIEL, Support
Office Sought: Senate, State: MS
Calendar Year-To-Date Per Election for Office Sought: 171683.53
Disbursement For: Other (specify) Runoff

Full Name of Payee: Raising Cane-MS
Mailing Address: 10420 Hwy 49
City: Gulfport, State: MS, Zip Code: 39503
Purpose of Expenditure: IE-Travel-McDaniel, Category/Type: 002
Date of Public Distribution/Dissemination: 06/22/2014
Amount: 7.47
Transaction ID: SE.35666
Date of Disbursement or Obligation: 06/22/2014
Name of Federal Candidate: CHRISTOPHER BRIAN MCDANIEL, Support
Office Sought: Senate, State: MS
Calendar Year-To-Date Per Election for Office Sought: 158476.75
Disbursement For: Other (specify) Runoff

(a) SUBTOTAL of Itemized Independent Expenditures..... 44.78
(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.
Signature: R. Russ Walker [Electronically Filed] Date: 07/18/2014

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
FREEDOMWORKS FOR AMERICA
FEC IDENTIFICATION NUMBER
C C00499020
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee
Raising Cane-MS
Mailing Address
10420 Hwy 49
City
Gulfport State
MS Zip Code
39503
Purpose of Expenditure
IE-McDaniel-Travel Category/
Type 002
Name of Federal Candidate
CHRISTOPHER BRIAN MCDANIEL
Support
Office Sought:
House District: 00
Senate State: MS
Calendar Year-To-Date
Per Election for Office Sought
167431.58

Date of Public Distribution/Dissemination
06 / 24 / 2014
Amount
15.22
Transaction ID : SE.35751
Date of Disbursement or Obligation
06 / 24 / 2014
Disbursement For:
Primary General
Other (specify) Runoff

Full Name of Payee
Raising Cane-MS
Mailing Address
10420 Hwy 49
City
Gulfport State
MS Zip Code
39503
Purpose of Expenditure
IE-McDaniel-Travel Category/
Type 002
Name of Federal Candidate
CHRISTOPHER BRIAN MCDANIEL
Support
Office Sought:
House District: 00
Senate State: MS
Calendar Year-To-Date
Per Election for Office Sought
167470.29

Date of Public Distribution/Dissemination
06 / 24 / 2014
Amount
15.22
Transaction ID : SE.35755
Date of Disbursement or Obligation
06 / 24 / 2014
Disbursement For:
Primary General
Other (specify) Runoff

(a) SUBTOTAL of Itemized Independent Expenditures 30.44
(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.

R. Russ Walker
[Electronically Filed]
Date 07 / 18 / 2014
Signature



**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>FREEDOMWORKS FOR AMERICA</b>	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> C00499020
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="float:right">M M M / D D D / Y Y Y Y Y Y</span>	

Full Name of Payee <b>Shell-MS</b>	Date of Public Distribution/Dissemination <span style="float:right">M M M / D D D / Y Y Y Y Y Y</span> <b>06 / 21 / 2014</b>
Mailing Address <b>977 Columbia Ave.</b>	Amount <span style="float:right">25.00</span>
City <b>Prentiss</b> State <b>MS</b> Zip Code <b>39174</b>	<b>Transaction ID : SE.35633</b> Date of Disbursement or Obligation <span style="float:right">M M M / D D D / Y Y Y Y Y Y</span> <b>06 / 21 / 2014</b>
Purpose of Expenditure <b>IE-McDaniel-Travel</b> Category/Type <b>002</b>	Name of Federal Candidate <b>CHRISTOPHER BRIAN MCDANIEL</b> <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: <u>00</u> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>MS</u>
Calendar Year-To-Date Per Election for Office Sought <span style="float:right">154726.55</span>	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input checked="" type="checkbox"/> Other (specify) ▶ <u>Runoff</u>

Full Name of Payee <b>Shellis News</b>	Date of Public Distribution/Dissemination <span style="float:right">M M M / D D D / Y Y Y Y Y Y</span> <b>06 / 24 / 2014</b>
Mailing Address <b>7700 Spine Rd.</b>	Amount <span style="float:right">4.38</span>
City <b>Atlanta</b> State <b>GA</b> Zip Code <b>30320</b>	<b>Transaction ID : SE.40977</b> Date of Disbursement or Obligation <span style="float:right">M M M / D D D / Y Y Y Y Y Y</span> <b>06 / 24 / 2014</b>
Purpose of Expenditure <b>IE-McDaniel-Travel</b> Category/Type <b>002</b>	Name of Federal Candidate <b>CHRISTOPHER BRIAN MCDANIEL</b> <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: <u>00</u> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>MS</u>
Calendar Year-To-Date Per Election for Office Sought <span style="float:right">171397.94</span>	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input checked="" type="checkbox"/> Other (specify) ▶ <u>Runoff</u>

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<span style="float:right">29.38</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<span style="float:right"></span>
(c) <b>TOTAL</b> Independent Expenditures..... ▶	<span style="float:right"></span>

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.

*R. Russ Walker* [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y  
**07 / 18 / 2014**

Signature \_\_\_\_\_

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
FREEDOMWORKS FOR AMERICA
FEC IDENTIFICATION NUMBER
C C00499020
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee
SLC Airport
Mailing Address
776 N. Terminal Dr.
City
Salt Lake City State
UT Zip Code
84122
Date of Public Distribution/Dissemination
06 / 24 / 2014
Amount
148.56
Transaction ID : SE.40988
Date of Disbursement or Obligation
06 / 24 / 2014
Purpose of Expenditure
IE-McDaniel-Travel Category/Type
002
Name of Federal Candidate
CHRISTOPHER BRIAN MCDANIEL
Support
Office Sought:
Senate State:
MS
Calendar Year-To-Date
Per Election for Office Sought
171646.22
Disbursement For:
Other (specify)
Runoff

Full Name of Payee
SLC Airport
Mailing Address
776 N. Terminal Dr.
City
Salt Lake City State
UT Zip Code
84122
Date of Public Distribution/Dissemination
06 / 24 / 2014
Amount
14.91
Transaction ID : SE.40991
Date of Disbursement or Obligation
06 / 24 / 2014
Purpose of Expenditure
IE-McDaniel-Travel Category/Type
002
Name of Federal Candidate
CHRISTOPHER BRIAN MCDANIEL
Support
Office Sought:
Senate State:
MS
Calendar Year-To-Date
Per Election for Office Sought
171698.44
Disbursement For:
Other (specify)
Runoff

(a) SUBTOTAL of Itemized Independent Expenditures..... 163.47
(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.

R. Russ Walker
[Electronically Filed]
Date
07 / 18 / 2014
Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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

Full Name of Payee <b>Sonic-MS</b>	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 06 / 24 / 2014
Mailing Address 5324 Old Highway 11	Amount <span style="border: 1px solid black; padding: 2px;">15.87</span>
City State Zip Code Hattiesburg MS 39402	<b>Transaction ID : SE.35753</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 06 / 24 / 2014
Purpose of Expenditure IE-McDaniel-Travel	Category/Type <span style="border: 1px solid black; padding: 2px;">002</span>
Name of Federal Candidate CHRISTOPHER BRIAN MCDANIEL	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: 00 State: MS
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">167455.07</span>	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input checked="" type="checkbox"/> Other (specify) ▶ Runoff

Full Name of Payee <b>Sprint Mart-MS</b>	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 06 / 23 / 2014
Mailing Address 1263 High Street	Amount <span style="border: 1px solid black; padding: 2px;">16.01</span>
City State Zip Code Jackson MS 39202	<b>Transaction ID : SE.35725</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 06 / 23 / 2014
Purpose of Expenditure IE-McDaniel-Travel	Category/Type <span style="border: 1px solid black; padding: 2px;">002</span>
Name of Federal Candidate CHRISTOPHER BRIAN MCDANIEL	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: 00 State: MS
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">162064.94</span>	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input checked="" type="checkbox"/> Other (specify) ▶ Runoff

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<span style="border: 1px solid black; padding: 2px;">31.88</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<span style="border: 1px solid black; padding: 2px;"> </span>
(c) <b>TOTAL</b> Independent Expenditures..... ▶	<span style="border: 1px solid black; padding: 2px;"> </span>

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.

*R. Russ Walker*  
Signature

[Electronically Filed] Date M M / D D / Y Y Y Y Y Y  
07 / 18 / 2014

**SCHEDULE E (FEC Form 3X)  
ITEMIZED INDEPENDENT EXPENDITURES**

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 type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		MM / DD / YYYY

Full Name of Payee <b>Starbucks-MS</b>		Date of Public Distribution/Dissemination MM / DD / YYYY 06 / 21 / 2014
Mailing Address 3708 Hardy St.		Amount 4.80
City Hattiesburg	State MS	Zip Code 39402
Purpose of Expenditure IE-Travel-McDaniel	Category/Type 002	Transaction ID : SE.35655 Date of Disbursement or Obligation MM / DD / YYYY 06 / 21 / 2014
Name of Federal Candidate CHRISTOPHER BRIAN MCDANIEL	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: MS
Calendar Year-To-Date Per Election for Office Sought	154740.22	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input checked="" type="checkbox"/> Other (specify) ▶ Runoff

Full Name of Payee <b>Stucky's Gas-MS</b>		Date of Public Distribution/Dissemination MM / DD / YYYY 06 / 23 / 2014
Mailing Address 6733 Hwy 49		Amount 43.16
City Hattiesburg	State MS	Zip Code 39404
Purpose of Expenditure IE-McDaniel-Travel	Category/Type 002	Transaction ID : SE.35716 Date of Disbursement or Obligation MM / DD / YYYY 06 / 23 / 2014
Name of Federal Candidate CHRISTOPHER BRIAN MCDANIEL	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: MS
Calendar Year-To-Date Per Election for Office Sought	161354.58	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input checked="" type="checkbox"/> Other (specify) ▶ Runoff

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	47.96
(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.

*R. Russ Walker*  
Signature

[Electronically Filed] Date MM / DD / YYYY  
07 / 18 / 2014

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
FREEDOMWORKS FOR AMERICA
FEC IDENTIFICATION NUMBER
C C00499020
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee
Subway-MS
Mailing Address
13490 Hwy 49
City
Gulfport State
MS Zip Code
39507
Purpose of Expenditure
IE-McDaniel-Travel Category/
Type
002
Name of Federal Candidate
CHRISTOPHER BRIAN MCDANIEL
Support
Office Sought:
House District: 00
President Senate State: MS
Calendar Year-To-Date
Per Election for Office Sought
161883.51

Date of Public Distribution/Dissemination
06 / 23 / 2014
Amount
5.62
Transaction ID : SE.35719
Date of Disbursement or Obligation
06 / 23 / 2014
Disbursement For:
Primary General
2014 Other (specify)
Runoff

Full Name of Payee
Sweetwater Grill
Mailing Address
6000 North Terminal Pkwy
City
Atlanta State
GA Zip Code
30320
Purpose of Expenditure
IE-McDaniel-Travel Category/
Type
002
Name of Federal Candidate
CHRISTOPHER BRIAN MCDANIEL
Support
Office Sought:
House District: 00
President Senate State: MS
Calendar Year-To-Date
Per Election for Office Sought
171416.92

Date of Public Distribution/Dissemination
06 / 24 / 2014
Amount
18.98
Transaction ID : SE.40979
Date of Disbursement or Obligation
06 / 24 / 2014
Disbursement For:
Primary General
2014 Other (specify)
Runoff

(a) SUBTOTAL of Itemized Independent Expenditures..... 24.60
(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.

R. Russ Walker
[Electronically Filed]
Date
07 / 18 / 2014
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
FREEDOMWORKS FOR AMERICA
FEC IDENTIFICATION NUMBER
C C00499020
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee
TGI Fridays
Mailing Address
Atlanta Airport
City
Atlanta State
GA Zip Code
30302
Purpose of Expenditure
IE-McDaniel-Travel Category/
Type 002
Name of Federal Candidate
CHRISTOPHER BRIAN MCDANIEL
Support
Office Sought:
House District: 00
Senate State: MS
Calendar Year-To-Date
Per Election for Office Sought
154612.09

Date of Public Distribution/Dissemination
06 / 20 / 2014
Amount
33.38
Transaction ID : SE.35612
Date of Disbursement or Obligation
06 / 20 / 2014
Disbursement For:
Primary General
Other (specify) Runoff

Full Name of Payee
Tidewater Landing
Mailing Address
1 Aviation Circle
City
Arlington State
VA Zip Code
22202
Purpose of Expenditure
IE-McDaniel-Travel Category/
Type 002
Name of Federal Candidate
CHRISTOPHER BRIAN MCDANIEL
Support
Office Sought:
House District: 00
Senate State: MS
Calendar Year-To-Date
Per Election for Office Sought
154632.09

Date of Public Distribution/Dissemination
06 / 20 / 2014
Amount
20.00
Transaction ID : SE.35614
Date of Disbursement or Obligation
06 / 20 / 2014
Disbursement For:
Primary General
Other (specify) Runoff

(a) SUBTOTAL of Itemized Independent Expenditures 53.38
(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.
R. Russ Walker
[Electronically Filed]
Date 07 / 18 / 2014
Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>FREEDOMWORKS FOR AMERICA</b>	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> C00499020
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="margin-left: 20px;">M M M / D D D / Y Y Y Y Y Y</span>	

Full Name of Payee <b>Topple Strategies</b>	Date of Public Distribution/Dissemination <span style="margin-left: 20px;">M M M / D D D / Y Y Y Y Y Y</span> <b>06 / 13 / 2014</b>
Mailing Address 189 N. Hwy 89 Ste. C 130	Amount <span style="margin-left: 20px;">35003.00</span>
City State Zip Code North Salt Lake UT 84054	<b>Transaction ID : SE.32602</b> Date of Disbursement or Obligation <span style="margin-left: 20px;">M M M / D D D / Y Y Y Y Y Y</span> <b>06 / 13 / 2014</b>
Purpose of Expenditure IE-McDaniel-Telemarketing	Category/Type <span style="margin-left: 20px;">004</span>
Name of Federal Candidate CHRISTOPHER BRIAN MCDANIEL	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> General District: <u>00</u> State: <u>MS</u>
Calendar Year-To-Date Per Election for Office Sought <span style="margin-left: 20px;">85362.77</span>	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input checked="" type="checkbox"/> Other (specify) ▶ <u>Runoff</u>

Full Name of Payee <b>Tropical Smoothie Cafe-MS</b>	Date of Public Distribution/Dissemination <span style="margin-left: 20px;">M M M / D D D / Y Y Y Y Y Y</span> <b>06 / 22 / 2014</b>
Mailing Address 6129 Hwy 98	Amount <span style="margin-left: 20px;">6.86</span>
City State Zip Code Hattiesburg MS 39402	<b>Transaction ID : SE.35665</b> Date of Disbursement or Obligation <span style="margin-left: 20px;">M M M / D D D / Y Y Y Y Y Y</span> <b>06 / 22 / 2014</b>
Purpose of Expenditure IE-Travel-McDaniel	Category/Type <span style="margin-left: 20px;">002</span>
Name of Federal Candidate CHRISTOPHER BRIAN MCDANIEL	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> General District: <u>00</u> State: <u>MS</u>
Calendar Year-To-Date Per Election for Office Sought <span style="margin-left: 20px;">158469.28</span>	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input checked="" type="checkbox"/> Other (specify) ▶ <u>Runoff</u>

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<span style="margin-left: 20px;">35009.86</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<span style="margin-left: 20px;"></span>
(c) <b>TOTAL</b> Independent Expenditures..... ▶	<span style="margin-left: 20px;"></span>

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.

*R. Russ Walker*

Signature \_\_\_\_\_ [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y  
**07 / 18 / 2014**

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
FREEDOMWORKS FOR AMERICA
FEC IDENTIFICATION NUMBER
C C00499020
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee: Tropical Smoothie Cafe-MS
Mailing Address: 6129 Hwy 98
City: Hattiesburg, State: MS, Zip Code: 39402
Purpose of Expenditure: IE-McDaniel-Travel, Category/Type: 002
Date of Public Distribution/Dissemination: 06/24/2014
Amount: 7.62
Transaction ID: SE.35752
Date of Disbursement or Obligation: 06/24/2014
Name of Federal Candidate: CHRISTOPHER BRIAN MCDANIEL, Support
Office Sought: Senate, State: MS
Calendar Year-To-Date Per Election for Office Sought: 167439.20
Disbursement For: Other (specify) Runoff

Full Name of Payee: Uber
Mailing Address: 1200 18th St., NW, Ste. 700
City: Washington, State: DC, Zip Code: 20036
Purpose of Expenditure: IE-McDaniel-Travel, Category/Type: 002
Date of Public Distribution/Dissemination: 06/24/2014
Amount: 16.24
Transaction ID: SE.40994
Date of Disbursement or Obligation: 06/24/2014
Name of Federal Candidate: CHRISTOPHER BRIAN MCDANIEL, Support
Office Sought: Senate, State: MS
Calendar Year-To-Date Per Election for Office Sought: 172772.94
Disbursement For: Other (specify) Runoff

(a) SUBTOTAL of Itemized Independent Expenditures: 23.86
(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.
Signature: R. Russ Walker
Date: 07/18/2014



SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
FREEDOMWORKS FOR AMERICA
FEC IDENTIFICATION NUMBER
C C00499020

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee: United Airlines
Mailing Address: 233 S. Wacker Dr.
City: Chicago, State: IL, Zip Code: 60606
Purpose of Expenditure: IE-McDaniel-Travel
Category/Type: 002
Date of Public Distribution/Dissemination: 06/04/2014
Amount: 642.00
Transaction ID: SE.35746
Date of Disbursement or Obligation: 06/04/2014
Name of Federal Candidate: CHRISTOPHER BRIAN MCDANIEL
Support: [X]
Office Sought: Senate
Disbursement For: Other (specify) Runoff

Full Name of Payee: United Airlines
Mailing Address: 233 S. Wacker Dr.
City: Chicago, State: IL, Zip Code: 60606
Purpose of Expenditure: IE-McDaniel-Travel
Category/Type: 002
Date of Public Distribution/Dissemination: 06/13/2014
Amount: 275.99
Transaction ID: SE.32600
Date of Disbursement or Obligation: 06/13/2014
Name of Federal Candidate: CHRISTOPHER BRIAN MCDANIEL
Support: [X]
Office Sought: Senate
Disbursement For: Other (specify) Runoff

(a) SUBTOTAL of Itemized Independent Expenditures: 917.99
(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.

R. Russ Walker
[Electronically Filed]
Date: 07/18/2014
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
FREEDOMWORKS FOR AMERICA
FEC IDENTIFICATION NUMBER
C C00499020
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee
Waffle House-MS
Mailing Address
6737 Hwy 49 N
City
Hattiesburg State
MS Zip Code
39401
Date of Public Distribution/Dissemination
06 / 22 / 2014
Amount
10.44
Transaction ID : SE.35667
Date of Disbursement or Obligation
06 / 22 / 2014
Purpose of Expenditure
IE-Travel-McDaniel Category/Type
002
Name of Federal Candidate
CHRISTOPHER BRIAN MCDANIEL Support
Office Sought: House District: 00
Senate State: MS
Calendar Year-To-Date
Per Election for Office Sought
158487.19
Disbursement For: Primary General
2014 Other (specify)
Runoff

Full Name of Payee
Wards-MS
Mailing Address
101 Thornhill Dr.
City
Hattiesburg State
MS Zip Code
39402
Date of Public Distribution/Dissemination
06 / 21 / 2014
Amount
8.87
Transaction ID : SE.35635
Date of Disbursement or Obligation
06 / 21 / 2014
Purpose of Expenditure
IE-McDaniel-Travel Category/Type
002
Name of Federal Candidate
CHRISTOPHER BRIAN MCDANIEL Support
Office Sought: House District: 00
Senate State: MS
Calendar Year-To-Date
Per Election for Office Sought
154735.42
Disbursement For: Primary General
2014 Other (specify)
Runoff

(a) SUBTOTAL of Itemized Independent Expenditures..... 19.31
(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.
R. Russ Walker
[Electronically Filed]
Date 07 / 18 / 2014
Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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

Full Name of Payee <b>Whataburger-MS</b>	Date of Public Distribution/Dissemination MM / DD / YYYY <b>06 / 22 / 2014</b>
Mailing Address 11464 Highway 49 North	Amount <b>12.74</b>
City Gulfport	State MS
Zip Code 39503	<b>Transaction ID : SE.35672</b>
Purpose of Expenditure IE-Travel-McDaniel	Date of Disbursement or Obligation MM / DD / YYYY <b>06 / 22 / 2014</b>
Category/Type <b>002</b>	Name of Federal Candidate <b>CHRISTOPHER BRIAN MCDANIEL</b>
Name of Federal Candidate <b>CHRISTOPHER BRIAN MCDANIEL</b>	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate	District: <b>00</b> State: <b>MS</b>
Calendar Year-To-Date Per Election for Office Sought <b>158730.30</b>	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▶ <b>Runoff</b>

Full Name of Payee	Date of Public Distribution/Dissemination MM / DD / YYYY
Mailing Address	Amount
City	State
Zip Code	Date of Disbursement or Obligation MM / DD / YYYY
Purpose of Expenditure	Category/Type
Name of Federal Candidate	<input type="checkbox"/> Support <input type="checkbox"/> Oppose
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate	District: _____ State: _____
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<b>12.74</b>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	
<b>(c) TOTAL</b> Independent Expenditures..... ▶	<b>221876.10</b>

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.

*R. Russ Walker*

[Electronically Filed]

Signature \_\_\_\_\_ Date **07 / 18 / 2014**