

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

 PAGE 1 OF 3
 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) FREEDOM'S DEFENSE FUND			FEC IDENTIFICATION NUMBER ▼ C C00401786		
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input checked="" type="checkbox"/> Amends report filed on <div style="display: flex; justify-content: space-around; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y 01 / 22 / 2016</div> </div>					
Full Name of Payee CONSOLIDATED MAILING SERVICES			Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y 01 / 21 / 2016</div>		
Mailing Address 504 SHAW RD SUITE 206			Amount <div style="border: 1px solid black; padding: 2px;">16641.37</div>		
City State Zip Code STERLING VA 20166		Transaction ID : SE.39590 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y 01 / 21 / 2016</div>			
Purpose of Expenditure VOTER CONTACT MAIL		Category/Type <div style="border: 1px solid black; padding: 2px;">004</div>			
Name of Federal Candidate CLINTON, HILLARY RODHAM, , ,			Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State:		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
<div style="border: 1px solid black; padding: 2px;">47472.57</div>					
Full Name of Payee DIRECT SUPPORT SERVICES INC			Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y 01 / 21 / 2016</div>		
Mailing Address 1155 - 15TH STREET NW SUITE 401			Amount <div style="border: 1px solid black; padding: 2px;">23973.58</div>		
City State Zip Code WASHINGTON DC 20005		Transaction ID : SE.39586 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y 01 / 21 / 2016</div>			
Purpose of Expenditure VOTER CONTACT MAIL		Category/Type <div style="border: 1px solid black; padding: 2px;">004</div>			
Name of Federal Candidate CLINTON, HILLARY RODHAM, , ,			Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State:		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
<div style="border: 1px solid black; padding: 2px;">28461.61</div>					
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			<div style="border: 1px solid black; padding: 2px;">40614.95</div>		
(b) SUBTOTAL of Unitemized Independent Expenditures ▶			<div style="border: 1px solid black; padding: 2px;"></div>		
(c) TOTAL Independent Expenditures..... ▶			<div style="border: 1px solid black; padding: 2px;"></div>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
MACKENZIE, SCOTT B, , , Signature			[Electronically Filed] Date <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y 10 / 18 / 2016</div>		

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Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input type="checkbox"/> New report	<input checked="" type="checkbox"/> Amends report filed on
		M M M / D D D / Y Y Y Y Y Y 01 / 22 / 2016	

Full Name of Payee DONOR BUREAU		Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 01 / 21 / 2016	
Mailing Address 1900 N CULPEPPER ST		Amount 281.38	
City ARLINGTON	State VA	Zip Code 22207	Transaction ID : SE.39589
Purpose of Expenditure VOTER CONTACT MAIL	Category/ Type 004	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 01 / 21 / 2016	
Name of Federal Candidate CLINTON, HILLARY RODHAM, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought 30831.20		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee DSSI		Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 01 / 21 / 2016	
Mailing Address 1155 - 15TH STREET NW SUITE 401		Amount 1481.03	
City WASHINGTON	State DC	Zip Code 20005	Transaction ID : SE.39588
Purpose of Expenditure VOTER CONTACT MAIL	Category/ Type 004	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 01 / 21 / 2016	
Name of Federal Candidate CLINTON, HILLARY RODHAM, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought 30549.82		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	1762.41
(b) SUBTOTAL of Unitemized Independent Expenditures▶	
(c) TOTAL Independent Expenditures.....▶	

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MACKENZIE, SCOTT B, , ,

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y
10 / 18 / 2016

Signature

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Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input type="checkbox"/> New report	<input checked="" type="checkbox"/> Amends report filed on
		M M M / D D D / Y Y Y Y Y Y 01 / 22 / 2016	

Full Name of Payee FORTHRIGHT STRATRGIES INC		Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 01 / 21 / 2016	
Mailing Address 1155 - 15TH STREET NW SUITE 401		Amount 4488.03	
City WASHINGTON	State DC	Zip Code 20005	Transaction ID : SE.39585
Purpose of Expenditure VOTER CONTACT MAIL		Category/ Type 004	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 01 / 21 / 2016
Name of Federal Candidate CLINTON, HILLARY RODHAM, ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
		4488.03	

Full Name of Payee LEGACY LIST MANAGEMENT INC		Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 01 / 21 / 2016	
Mailing Address 1155 - 15TH STREET NW SUITE 401		Amount 607.18	
City WASHINGTON	State DC	Zip Code 20005	Transaction ID : SE.39587
Purpose of Expenditure VOTER CONTACT MAIL		Category/ Type 004	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 01 / 21 / 2016
Name of Federal Candidate CLINTON, HILLARY RODHAM, ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
		29068.79	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	5095.21
(b) SUBTOTAL of Unitemized Independent Expenditures▶	
(c) TOTAL Independent Expenditures.....▶	47472.57

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.

MACKENZIE, SCOTT B, ,

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y
10 / 18 / 2016

Signature