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

Schedule E)	FOR SE OF FORM 24/48		
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼		
Allen West Guardian Fund	C C00493221		
	<u> </u>		
Check if X 24-hour report 48-hour report X New report X Amends report fill	ed on M / D D / Y Y Y Y		
Full Name of Payee	Date of Public Distribution/Dissemination		
Strategic Partners & Media	10 27 2014		
Mailing Address P.O. Box 480	Amount		
City State Zip Code	5000.00		
Arnold MD 21012-0480	Transaction ID : EE0843FBA157646B282D Date of Disbursement or Obligation		
Purpose of Expenditure Banner ads and landing pages Category/ Type	M M / D D / Y Y Y Y		
Name of Federal Candidate Support Of	fice Sought: X House District: 06		
Dan Bongino Oppose	President Senate State: MD		
Calendar Year-To-Date Per Election for Office Sought Display 5000.00	sbursement For: Primary		
Full Name of Payee	Date of Public Distribution/Dissemination		
Strategic Partners & Media	10 27 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
Mailing Address P.O. Box 480	Amount		
City State Zip Code	5000.00		
Arnold MD 21012-0480	Transaction ID : EF70BE4BB64A34E2DA65 Date of Disbursement or Obligation		
Purpose of Expenditure Banner ads and landing pages Category/ Type	M M / D D / Y Y Y Y		
Name of Federal Candidate Support Of	fice Sought:		
Larry Kaifesh Oppose	President Senate State: IL		
	sbursement For: Primary X General 114 Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures	10000.00		
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not with, or at the request or suggestion of, any candidate or authorized committee or agent of eit party committee) any political party committee or its agent.			
Gregory Wilder [Electronically Filed] Date	10 28 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
Signature			

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	II EXI END	ITOTILO		PAGE 2 OF 3 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
Allen West Guardian Fund				C C00493221
Check if 24-hour report 48-hour report	New rep	ort Amends repo		M
Full Name of Payee			Date	of Public Distribution/Dissemination
Strategic Partners & Media				10 27 / 2014
Mailing Address P.O. Box 480			Amou	int
City	State	Zip Code	[5000.00
Arnold	MD	21012-0480		saction ID: E6D045D44C310435DA68 of Disbursement or Obligation
Purpose of Expenditure Banner ads and landing pages		Category/ Type		/
Name of Federal Candidate		Support	Office Sough	nt: X House District:09
Wendy Rogers		Oppose	Presid	^7
Calendar Year-To-Date Per Election for Office Sought	7	5000.00	Disbursemer 2014	nt For: Primary X General Other (specify) ▶
Full Name of Payee			Date	of Public Distribution/Dissemination
Strategic Partners & Media			[10 D D Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address P.O. Box 480			Amou	unt
City	State	Zip Code		5000.00
Arnold	MD	21012-0480		action ID: E79F082F12E5A4034A60 of Disbursement or Obligation
Purpose of Expenditure Banner ads and landing pages		Category/ Type		M = M / D = D / Y = Y = Y
Name of Federal Candidate		Support	Office Sough	nt: X House District: 26
Carlos Cubelo		Oppose	Presid	ent Senate State: FL
Calendar Year-To-Date Per Election for Office Sought	, ,	5000.00	Disbursemer 2014	nt For:
(a) SUBTOTAL of Itemized Independent Expenditure	es			10000.00
(-,				7 7 7
(b) SUBTOTAL of Unitemized Independent Expendi	tures		•	
(c) TOTAL Independent Expenditures			•	171171171
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.				
Gregory Wilder Signature	[Electron	ically Filed] Date	10	28 2014
Signaturo				

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	FOR SE OF FORM 24/48		
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼		
Allen West Guardian Fund	C C00493221		
	<u> </u>		
Check if X 24-hour report 48-hour report New report Amends report fi	led on		
Full Name of Payee	Date of Public Distribution/Dissemination		
Strategic Partners & Media	10 27 2014		
Mailing Address P.O. Box 480	Amount		
City State Zip Code	5000.00		
Arnold MD 21012-0480	Transaction ID : EAE40DBCC32234DA0BE Date of Disbursement or Obligation		
Purpose of Expenditure Banner ads and landing pages Category/ Type	M = M / D = D / Y = Y = Y		
Name of Federal Candidate Support Of	fice Sought: X House District: 01		
Ryan Zinke Oppose	President Senate State: MT		
Calendar Year-To-Date Per Election for Office Sought Di 20	sbursement For: Primary ⊠ General 14 Other (specify) ▶		
Full Name of Payee	Date of Public Distribution/Dissemination		
Strategic Partners & Media	10 27 2014		
Mailing Address P.O. Box 480	Amount		
City State Zip Code	5000.00		
Arnold MD 21012-0480	Transaction ID : EA3E6DB65BD644E6C829 Date of Disbursement or Obligation		
Purpose of Expenditure Banner ads and landing pages Category/ Type	M = M / D = D / Y = Y = Y		
Name of Federal Candidate Support Or	ffice Sought:		
Steve Russell Oppose	President Senate State: OK		
	sbursement For: Primary X General Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures	10000.00		
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures	30000.00		
Under penalty of perjury I certify that the independent expenditures reported herein were not with, or at the request or suggestion of, any candidate or authorized committee or agent of eignarty committee) any political party committee or its agent.			
Gregory Wilder [Electronically Filed] Date	10 28 2014		
Signature			