

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

 PAGE 1 OF 2
 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Tea Party Patriots Citizens Fund		FEC IDENTIFICATION NUMBER ▼ C C00540898	
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee Active Engagement LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 01 / 2014	
Mailing Address 44084 Riverside Parkway Ste. 350		Amount 250.00	
City Lansdowne	State VA	Zip Code 20176	Transaction ID : SE.397490 Date of Disbursement or Obligation MM / DD / YYYY 11 / 01 / 2014
Purpose of Expenditure Copy Writing		Category/Type 001	
Name of Federal Candidate Joni K Ernst		<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: IA
Calendar Year-To-Date Per Election for Office Sought		31453.84	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee Active Engagement LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 01 / 2014	
Mailing Address 44084 Riverside Parkway Ste. 350		Amount 500.00	
City Lansdowne	State VA	Zip Code 20176	Transaction ID : SE.397492 Date of Disbursement or Obligation MM / DD / YYYY 11 / 01 / 2014
Purpose of Expenditure Copy Writing		Category/Type 001	
Name of Federal Candidate Bruce L. Braley		<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: IA
Calendar Year-To-Date Per Election for Office Sought		31953.84	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	750.00
(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.

Mr. Paul A Kilgore

[Electronically Filed]

Date

MM / DD / YYYY
11 / 02 / 2014

Signature

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FOR SE OF FORM 24/48

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Full Name of Payee Victory Media Group			Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 01 / 2014		
Mailing Address 1701 East Lake Ave. Ste. 335			Amount 7455.24		
City Glenview	State IL	Zip Code 60025	Transaction ID : SE.397499		
Purpose of Expenditure Automated Calls		Category/ Type 001	Date of Disbursement or Obligation MM / DD / YYYY 11 / 01 / 2014		
Name of Federal Candidate Joni K Ernst		<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: IA		
Calendar Year-To-Date Per Election for Office Sought		39409.08	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶		

Full Name of Payee Antietam Communications			Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 01 / 2014		
Mailing Address 710 E Northway Lane			Amount 1000.00		
City Atlanta	State GA	Zip Code 30342	Transaction ID : SE.397500		
Purpose of Expenditure Script Writing		Category/ Type 001	Date of Disbursement or Obligation MM / DD / YYYY 11 / 01 / 2014		
Name of Federal Candidate Joni K Ernst		<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: IA		
Calendar Year-To-Date Per Election for Office Sought		40409.08	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶		

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	8455.24
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	9205.24

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Mr. Paul A Kilgore

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