

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

NAME OF COMMITTEE (In Full) FREEDOMWORKS FOR AMERICA
FEC IDENTIFICATION NUMBER C C00499020
Check if [X] 24-hour report [] 48-hour report [X] New report [] Amends report filed on

Full Name of Payee Dollar Rental
Mailing Address 1 Airport Rd.
City Manchester State NH Zip Code 03103
Purpose of Expenditure IE-Garcia-Travel Category/Type 002
Name of Federal Candidate MARILINDA GARCIA [X] Support [] Oppose
Calendar Year-To-Date Per Election for Office Sought 10616.55

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 288.25
Transaction ID : SE.64293
Date of Disbursement or Obligation 11 / 01 / 2014
Office Sought: [X] House District: 02 [] President [] Senate State: NH
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Holiday Inn-NH
Mailing Address 172 North Main St.
City Concord State NH Zip Code 03301
Purpose of Expenditure IE-Garcia-Travel Category/Type 002
Name of Federal Candidate MARILINDA GARCIA [X] Support [] Oppose
Calendar Year-To-Date Per Election for Office Sought 10862.89

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 246.34
Transaction ID : SE.64294
Date of Disbursement or Obligation 11 / 01 / 2014
Office Sought: [X] House District: 02 [] President [] Senate State: NH
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 534.59
(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.

Matt Kibbe [Electronically Filed] Date 11 / 02 / 2014
Signature

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Full Name of Payee Hooked Seafood Restaurant
Mailing Address 110 Hanover St.
City Manchester State NH Zip Code 03101
Purpose of Expenditure IE-Garcia-Travel Category/Type 002
Name of Federal Candidate MARILINDA GARCIA [X] Support [] Oppose
Calendar Year-To-Date Per Election for Office Sought 10964.64

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 101.75
Transaction ID : SE.64295
Date of Disbursement or Obligation 11 / 01 / 2014
Office Sought: [X] House District: 02 [] President [] Senate State: NH
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee Lowe's-NH
Mailing Address 220 S River Rd.
City Bedford State NH Zip Code 03110
Purpose of Expenditure IE-Garcia-Travel Category/Type 002
Name of Federal Candidate MARILINDA GARCIA [X] Support [] Oppose
Calendar Year-To-Date Per Election for Office Sought 10991.05

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 26.41
Transaction ID : SE.64296
Date of Disbursement or Obligation 11 / 01 / 2014
Office Sought: [X] House District: 02 [] President [] Senate State: NH
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 128.16
(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.
Matt Kibbe [Electronically Filed] Date 11 / 02 / 2014
Signature

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Full Name of Payee US Air
Mailing Address 400 East Sky Harbor Blvd.
City Phoenix State AZ Zip Code 85034
Purpose of Expenditure IE-Garcia-Travel Category/Type 002
Name of Federal Candidate MARILINDA GARCIA [X] Support [] Oppose
Calendar Year-To-Date Per Election for Office Sought 10328.30

Date of Public Distribution/Dissemination 11 / 01 / 2014
Amount 555.30
Transaction ID : SE.64292
Date of Disbursement or Obligation 11 / 01 / 2014
Office Sought: [X] House District: 02 [] President [] Senate State: NH
Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee
Mailing Address
City State Zip Code
Purpose of Expenditure Category/Type
Name of Federal Candidate [] Support [] Oppose
Calendar Year-To-Date Per Election for Office Sought

Date of Public Distribution/Dissemination
Amount
Date of Disbursement or Obligation
Office Sought: [] House District: [] [] President [] Senate State: []
Disbursement For: [] Primary [] General [] Other (specify)

Table with 2 columns: Description and Amount. (a) SUBTOTAL of Itemized Independent Expenditures 555.30, (b) SUBTOTAL of Unitemized Independent Expenditures, (c) TOTAL Independent Expenditures 1218.05

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 Matt Kibbe [Electronically Filed] Date 11 / 02 / 2014