

# 24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES (SCHEDULE E)

PAGE 1 OF 2  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>Liberty Action PAC</b>	FEC IDENTIFICATION NUMBER <b>C</b> C00508598
Check If <input checked="" type="checkbox"/> 24-hour report <input 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;"> <span>MM / DD / YYYY 10 / 29 / 2012</span> </div>	

Full Name (Last, First, Middle Initial) of Payee <b>Grassroots Action, Inc</b>		Date MM / DD / YYYY 10 / 28 / 2012
Mailing Address 90 Main Street		Amount <b>3519.58</b>
City Maxwell	State IA	
Purpose of Expenditure e-mail blast	Category/ Type	Transaction ID : <b>SE.4121</b>
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House    State: VA <input type="checkbox"/> Senate    District: <input checked="" type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
3519.58		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee <b>Liberty Counsel</b>		Date MM / DD / YYYY 10 / 28 / 2012
Mailing Address P.O. Box 540774		Amount <b>12672.45</b>
City Orlando	State FL	
Purpose of Expenditure e-mail list rental	Category/ Type	Transaction ID : <b>SE.4122</b>
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House    State: <input type="checkbox"/> Senate    District: <input checked="" type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
15552.45		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	<b>16192.03</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.

*Mr. Deryl Madison Edwards*

[Electronically Filed]

Date MM / DD / YYYY  
10 / 29 / 2012

Signature

# 24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES (SCHEDULE E)

NAME OF COMMITTEE (In Full) <b>Liberty Action PAC</b>	FEC IDENTIFICATION NUMBER <b>C</b> C00508598
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Full Name (Last, First, Middle Initial) of Payee <b>Liberty Counsel Action</b>		Date MM / DD / YYYY 10 / 28 / 2012
Mailing Address P.O. Box 540629		Amount 537.23
City Orlando	State FL	
Purpose of Expenditure list rental	Category/ Type	Transaction ID : <b>SE.4123</b>
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House    State: _____ <input type="checkbox"/> Senate    District: _____ <input checked="" type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 16089.68		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee <b>Liberty Counsel Action</b>		Date MM / DD / YYYY 10 / 28 / 2012
Mailing Address P.O. Box 540629		Amount 537.23
City Orlando	State FL	
Purpose of Expenditure list rental	Category/ Type	Transaction ID : <b>SE.4124</b>
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House    State: _____ <input type="checkbox"/> Senate    District: _____ <input checked="" type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 16089.68		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	1074.46
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> Independent Expenditures.....	17266.49

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*Mr. Deryl Madison Edwards*

Signature \_\_\_\_\_ [Electronically Filed] Date MM / DD / YYYY  
10 / 29 / 2012