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

Schedule E) PAGE 1 OF 5 FOR SE OF FORM 24/48			
NAME OF COMMITTEE (In Full)			
RESTORE AMERICAN FREEDOM AND LIBERTY			C C00570903
			G coores
Check if X 24-hour report 48-hour report New report Amends report filed on Amends report filed on Amends report			
	Il Name of Payee		Date of Public Distribution/Dissemination
	.magi Strategies иемо ітем] Ultimate payee for list is SCM Enterprise	es, 203 South Union Stre	et 11 02 7 2016
	illing Address 424 E 10th Street		
	3d		Amount
Cit	y State	Zip Code	2000.00
Ne	ew York NY	10009	Transaction ID: WFT20161021112-1 Date of Disbursement or Obligation
	rpose of Expenditure eimbursment for list purchase for email communications	Category/ Type	11 02 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Na	me of Federal Candidate	x Support	Office Sought: House District:
Ja	mes, Lankford, Paul, ,	Oppose	President Senate State: OK
	Calendar Year-To-Date Per Election for Office Sought	2000.00	Disbursement For: Primary General 2016 Other (specify) ▶
Fu	II Name of Payee		Date of Public Distribution/Dissemination
Amagi Strategies			
			11 02 2016
	3d		Amount
Cit		Zip Code	3000.00
N	ew York NY	10009	Transaction ID: WFT2016102117-1
	rpose of Expenditure	Category/	Date of Disbursement or Obligation
R	eimbursement for list purchase for electronic communications	Type	11 02 2016
Na	ame of Federal Candidate	✗ Support	Office Sought: House District:
M	arco, Rubio, , ,	Oppose	President Senate State: FL
	Calendar Year-To-Date		Disbursement For: Primary
	Per Election for Office Sought		2016 Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures			
(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.			
	Alexander, Hornaday, , , [Electron	nically Filed] Date	11 02 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
3	Signature		

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

PAGE OF (Schedule E) FOR SE OF FORM 24/48 NAME OF COMMITTEE (In Full) FEC IDENTIFICATION NUMBER ▼ RESTORE AMERICAN FREEDOM AND LIBERTY C00570903 Check if | X | 24-hour report 48-hour report X New report Amends report filed on Full Name of Payee Date of Public Distribution/Dissemination Amagi Strategies Ultimate payee for list is SCM Enterprises, 203 South Union Street 2016 02 11 Mailing Address 424 E 10th Street Amount 3d Zip Code City State 2000.00 Transaction ID : WFT2016102119-1 NY 10009 New York Date of Disbursement or Obligation Purpose of Expenditure Category/ Reimbursement for list purchase for electronic communications 11 02 2016 Type Name of Federal Candidate 06 X Support Office Sought: **X** House District: James, Jordan, D.,, OH Oppose President Senate State: Disbursement For: Primary **✗** General Calendar Year-To-Date 2000.00 2016 Per Election for Office Sought Other (specify) ▶ Full Name of Payee Date of Public Distribution/Dissemination Amagi Strategies Ultimate payee for list is SCM Enterprises, 203 South Union Street 11 02 2016 Mailing Address 424 E 10th Street Amount 3dCity State Zip Code 2000.00 NY Transaction ID: WFT2016102111-1 New York 20009 Date of Disbursement or Obligation Purpose of Expenditure Category/ Reimbursement for list for electronic Communications 2016 11 02 Type Name of Federal Candidate 04 Support Office Sought: **✗** House District: X Mia, Love, , , UT Oppose President Senate State: Primary **✗** General Calendar Year-To-Date Disbursement For: 2016 2000.00 Per Election for Office Sought Other (specify) (a) SUBTOTAL of Itemized Independent Expenditures..... 0.00 (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. Alexander, Hornaday, , , [Electronically Filed] 02 2016 Date Signature

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

PAGE OF (Schedule E) FOR SE OF FORM 24/48 NAME OF COMMITTEE (In Full) FEC IDENTIFICATION NUMBER ▼ RESTORE AMERICAN FREEDOM AND LIBERTY C00570903 Check if | X | 24-hour report 48-hour report X New report Amends report filed on Full Name of Payee Date of Public Distribution/Dissemination Amagi Strategies Ultimate payee for list is SCM Enterprises, 203 South Union Street 2016 02 11 Mailing Address 424 E 10th Street Amount 3d Zip Code City State 29000.00 Transaction ID : WFT20161021047-1 NY 20009 New York Date of Disbursement or Obligation Purpose of Expenditure Category/ Reimbursment for list purchase for email communications 11 02 2016 Type Name of Federal Candidate Office Sought: X Support House District: Donald, Trump, , , Oppose President Senate State: Disbursement For: Primary **✗** General Calendar Year-To-Date 64000.00 2016 Per Election for Office Sought Other (specify) ▶ Full Name of Payee Date of Public Distribution/Dissemination Amagi Strategies Ultimate payee for list is SCM Enterprises, 203 South Union Street 11 02 2016 Mailing Address 424 E 10th Street Amount 3dCity State Zip Code 2000.00 NY Transaction ID: WFT20161021057-1 New York 10009 Date of Disbursement or Obligation Purpose of Expenditure Category/ Reimbursment for list purchase for electronic communications 2016 11 02 Type Name of Federal Candidate Support Office Sought: House District: X Pat, Toomey, , , PΑ Oppose Senate President State: ✗ General Calendar Year-To-Date Disbursement For: Primary 2016 2000.00 Per Election for Office Sought Other (specify) (a) SUBTOTAL of Itemized Independent Expenditures..... 0.00 (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. Alexander, Hornaday, , , [Electronically Filed] 02 2016 Date Signature

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Signature

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