

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)PAGE 1 OF 1
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) FREEDOM FRONTIER ACTION NETWORK		FEC IDENTIFICATION NUMBER ▼ C C00496372
Check if ☐ 24-hour report ☒ 48-hour report ☒ New report ☐ Amends report filed on		MM / DD / YYYY

Full Name of Payee Majority Strategies Inc		Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 18 / 2014
Mailing Address 135 Professional Dr Ste 104		Amount 3642.49
City Ponte Vedra Beach	State FL	Zip Code 32082
Purpose of Expenditure Postage and Shipping	Category/ Type 004	Transaction ID : SE.4253 Date of Disbursement or Obligation MM / DD / YYYY 04 / 08 / 2014
Name of Federal Candidate ALEXANDER XAVIER MOONEY		Office Sought: ☒ House District: 02 ☐ President ☐ Senate State: WV
Calendar Year-To-Date Per Election for Office Sought 15721.33		Disbursement For: ☒ Primary ☐ General 2014 ☐ Other (specify) ▶

Full Name of Payee Majority Strategies Inc		Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 16 / 2014
Mailing Address 135 Professional Dr Ste 104		Amount 6850.94
City Ponte Vedra Beach	State FL	Zip Code 32082
Purpose of Expenditure Printing Postage and Shipping	Category/ Type 004	Transaction ID : SE.4252 Date of Disbursement or Obligation MM / DD / YYYY 04 / 14 / 2014
Name of Federal Candidate ALEXANDER XAVIER MOONEY		Office Sought: ☒ House District: 02 ☐ President ☐ Senate State: WV
Calendar Year-To-Date Per Election for Office Sought 22572.27		Disbursement For: ☒ Primary ☐ General 2014 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	10493.43
(b) SUBTOTAL of Unitemized Independent Expenditures▶	
(c) TOTAL Independent Expenditures.....▶	10493.43

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.

Scott Bensing

Signature

[Electronically Filed]

Date

MM / DD / YYYY
04 / 18 / 2014