

REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED

1. (a) Name of Individual, Organization or Corporation Indian Americans For Freedom		
(b) Address (number and street) <input type="checkbox"/> check if different than previously reported 341 St Paul Blvd		
(c) City, State and ZIP Code Carol Stream IL 60188		3. FEC Identification Number <div> <div>C</div> <div>C90014457</div> </div>
2. Occupation and Name of Employer (for Individual Filers Only)		

7. TOTAL INDEPENDENT EXPENDITURES	45850.00
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FEC Schedule 5 (REV. 09/2013)

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURESPAGE 2 OF 3
FOR LINE 7 OF FORM 5

NAME OF FILER (In Full)

Indian Americans For Freedom

Full Name (Last, First, Middle Initial) of Payee

Asia TV USA Ltd

Date of Public Distribution/Dissemination

MM / DD / YYYY
02 / 24 / 2014

Mailing Address 250 W 34th Street

Suite 3501

Amount

10000.00

Transaction ID : F57.4163

Purpose of Expenditure
Television AdCategory/
Type 004Office Sought: ☒ House State: IL
☐ Senate District: 08
☐ PresidentName of Federal Candidate Supported or Opposed by Expenditure:
Mrs. MANJU GOELCheck One: ☒ Support ☐ OpposeCalendar Year-To-Date Per Election
for Office Sought

89850.00

Disbursement For: ☒ Primary ☐ General
2014 ☐ Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee

Mr. Brad Goodman

Date of Public Distribution/Dissemination

MM / DD / YYYY
02 / 22 / 2014

Mailing Address 300 Court of Elm

Amount

11350.00

Transaction ID : F57.4160

Purpose of Expenditure
Yard SignsCategory/
Type 004Office Sought: ☒ House State: IL
☐ Senate District: 08
☐ PresidentName of Federal Candidate Supported or Opposed by Expenditure:
Mrs. MANJU GOELCheck One: ☒ Support ☐ OpposeCalendar Year-To-Date Per Election
for Office Sought

66350.00

Disbursement For: ☒ Primary ☐ General
2014 ☐ Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee

Mr. Brad Goodman

Date of Public Distribution/Dissemination

MM / DD / YYYY
02 / 22 / 2014

Mailing Address 300 Court of Elm

Amount

2500.00

Transaction ID : F57.4161

Purpose of Expenditure
online adCategory/
Type 004Office Sought: ☒ House State: IL
☐ Senate District: 08
☐ PresidentName of Federal Candidate Supported or Opposed by Expenditure:
Mrs. MANJU GOELCheck One: ☒ Support ☐ OpposeCalendar Year-To-Date Per Election
for Office Sought

68850.00

Disbursement For: ☒ Primary ☐ General
2014 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶ 23850.00

(b) SUBTOTAL of Unitemized Independent Expenditures▶

(c) TOTAL Independent Expenditures.....▶
(carry total from last page forward to Line 7)

SCHEDULE 5-E **ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 3 OF 3
FOR LINE 7 OF FORM 5

NAME OF FILER (In Full)

Indian Americans For Freedom

Full Name (Last, First, Middle Initial) of Payee

Mr. Brad Goodman

Date of Public Distribution/Dissemination

MM / DD / YYYY
02 / 23 / 2014

Mailing Address 300 Court of Elm

Amount

City State Zip Code
Vernon Hills IL 60061

Amount
11000.00

Transaction ID : F57.4162

Purpose of Expenditure
flyerCategory/
Type 004

Office Sought: ☒ House State: IL
☐ Senate District: 08
☐ President

Name of Federal Candidate Supported or Opposed by Expenditure:
Mrs. MANJU GOELCheck One: ☒ Support ☐ Oppose

Calendar Year-To-Date Per Election
for Office Sought 79850.00

Disbursement For: ☒ Primary ☐ General
2014 ☐ Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee

Mr. Brad Goodman

Date of Public Distribution/Dissemination

MM / DD / YYYY
02 / 24 / 2014

Mailing Address 300 Court of Elm

Amount

City State Zip Code
Vernon Hills IL 60061

Amount
11000.00

Transaction ID : F57.4164

Purpose of Expenditure
flyerCategory/
Type 004

Office Sought: ☒ House State: IL
☐ Senate District: 08
☐ President

Name of Federal Candidate Supported or Opposed by Expenditure:
Mrs. MANJU GOELCheck One: ☒ Support ☐ Oppose

Calendar Year-To-Date Per Election
for Office Sought 100850.00

Disbursement For: ☒ Primary ☐ General
2014 ☐ Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee

Date of Public Distribution/Dissemination

MM / DD / YYYY
/ /

Mailing Address

Amount

City State Zip Code

Amount

Purpose of Expenditure

Category/
Type

Office Sought: ☐ House State: _____
☐ Senate District: _____
☐ President

Name of Federal Candidate Supported or Opposed by Expenditure:

Check One: ☐ Support ☐ Oppose

Calendar Year-To-Date Per Election
for Office Sought

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures.....▶ 22000.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures▶

(c) **TOTAL** Independent Expenditures.....▶ 45850.00
(carry total from last page forward to Line 7)