

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

 PAGE 1 OF 7
 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) TEA PARTY PATRIOTS CITIZENS FUND		FEC IDENTIFICATION NUMBER ▼ C C00540898	
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee Active Engagement LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 15 / 2014	
Mailing Address 44084 Riverside Parkway Ste. 350		Amount 500.00	
City Lansdowne	State VA	Zip Code 20176	Transaction ID : SE.4264
Purpose of Expenditure Creative Fees	Category/Type	Date of Disbursement or Obligation MM / DD / YYYY 04 / 15 / 2014	
Name of Federal Candidate MATT LYNCH		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 14 State: OH	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee Active Engagement LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 05 / 02 / 2014	
Mailing Address 44084 Riverside Parkway Ste. 350		Amount 500.00	
City Lansdowne	State VA	Zip Code 20176	Transaction ID : SE.4255
Purpose of Expenditure Creative Fees	Category/Type	Date of Disbursement or Obligation MM / DD / YYYY 05 / 02 / 2014	
Name of Federal Candidate MATT LYNCH		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 14 State: OH	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	1000.00
(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.

Paul Kilgore

[Electronically Filed]

Date

 MM / DD / YYYY
05 / 03 / 2014

Signature

Full Name of Payee Antietam Communications		Date of Public Distribution/Dissemination <div> <div>MM / DD / YYYY</div> <div>05 / 02 / 2014</div> </div>	
Mailing Address 710 East Northway Lane		Amount <div> <div>1000.00</div> </div>	
City	State	Zip Code	Transaction ID : SE.4239 Date of Disbursement or Obligation <div> <div>MM / DD / YYYY</div> <div>05 / 02 / 2014</div> </div>
Atlanta	GA	30342	
Purpose of Expenditure Script Writing		Category/ Type	
Name of Federal Candidate DAVID P JOYCE		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <u>14</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>OH</u>
Calendar Year-To-Date Per Election for Office Sought		<div> <div>16426.94</div> </div>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	2000.00
(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.

Date _____

Signature

MM / DD / YYYY

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

 PAGE 3 OF 7
 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) TEA PARTY PATRIOTS CITIZENS FUND	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00540898 </div>
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee Capital Resources Inc.		Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div>MM / DD / YYYY 04 / 21 / 2014</div> </div>	
Mailing Address 700 E. Pleasant St.		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">489.70</div>	
City Brooklyn	State IA	Zip Code 52211	Transaction ID : SE.4276 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div>MM / DD / YYYY 04 / 30 / 2014</div> </div>
Purpose of Expenditure Telemarketing		Category/Type	
Name of Federal Candidate MATT LYNCH		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 14 <input type="checkbox"/> President <input type="checkbox"/> Senate State: OH
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;">989.70</div>	
		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee Capital Resources Inc.		Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div>MM / DD / YYYY 04 / 16 / 2014</div> </div>	
Mailing Address 700 E. Pleasant St.		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">147.74</div>	
City Brooklyn	State IA	Zip Code 52211	Transaction ID : SE.4277 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div>MM / DD / YYYY 04 / 30 / 2014</div> </div>
Purpose of Expenditure Telemarketing		Category/Type	
Name of Federal Candidate MATT LYNCH		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 14 <input type="checkbox"/> President <input type="checkbox"/> Senate State: OH
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;">9498.94</div>	
		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;">637.44</div>
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
(c) TOTAL Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

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.

Paul Kilgore
[Electronically Filed]

Date

MM / DD / YYYY
05 / 03 / 2014

Signature

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

 PAGE 4 OF 7
 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) TEA PARTY PATRIOTS CITIZENS FUND	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00540898 </div>
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee Digital Acumen			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY 05 / 02 / 2014</div> </div>		
Mailing Address PO Box 537			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">5000.00</div>		
City New Hampton	State NH	Zip Code 03256	Transaction ID : SE.4236 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY 05 / 02 / 2014</div> </div>		
Purpose of Expenditure Media Promotion		Category/ Type	Name of Federal Candidate DAVID P JOYCE		
			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		
Calendar Year-To-Date Per Election for Office Sought			Office Sought: <input checked="" type="checkbox"/> House District: 14 <input type="checkbox"/> President <input type="checkbox"/> Senate State: OH		
<div style="border: 1px solid black; padding: 2px; display: inline-block;">21426.94</div>			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶		

Full Name of Payee Integram			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY 04 / 16 / 2014</div> </div>		
Mailing Address 22695 Commerce Center Court			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">7607.33</div>		
City Dulles	State VA	Zip Code 20166	Transaction ID : SE.4274 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY 04 / 30 / 2014</div> </div>		
Purpose of Expenditure Direct Mail Production		Category/ Type	Name of Federal Candidate MATT LYNCH		
			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		
Calendar Year-To-Date Per Election for Office Sought			Office Sought: <input checked="" type="checkbox"/> House District: 14 <input type="checkbox"/> President <input type="checkbox"/> Senate State: OH		
<div style="border: 1px solid black; padding: 2px; display: inline-block;">8638.79</div>			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶		

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;">12607.33</div>
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
(c) TOTAL Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

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.

Paul Kilgore
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Date

MM / DD / YYYY
05 / 03 / 2014

Signature

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

 PAGE 5 OF 7
 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) TEA PARTY PATRIOTS CITIZENS FUND		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00540898 </div>
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		

Full Name of Payee King Group Productions		Date of Public Distribution/Dissemination MM / DD / YYYY 05 / 02 / 2014	
Mailing Address 29 Deerfield Road		Amount 898.00	
City Deerfield	State IL	Zip Code 60015	Transaction ID : SE.4237
Purpose of Expenditure Media Production	Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY 05 / 02 / 2014	
Name of Federal Candidate DAVID P JOYCE		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: 14 <input type="checkbox"/> President <input type="checkbox"/> Senate State: OH	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee Kasey Kirby		Date of Public Distribution/Dissemination MM / DD / YYYY 05 / 02 / 2014	
Mailing Address 1132 6th Street NE Unit 1		Amount 5030.00	
City Washington	State DC	Zip Code 20002	Transaction ID : SE.4238
Purpose of Expenditure Media Production	Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY 05 / 02 / 2014	
Name of Federal Candidate DAVID P JOYCE		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: 14 <input type="checkbox"/> President <input type="checkbox"/> Senate State: OH	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	5928.00
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

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Paul Kilgore

[Electronically Filed]

Date

MM / DD / YYYY
05 / 03 / 2014

Signature

FEC IDENTIFICATION NUMBER ▼

C	C00540898
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04 / 16 / 2014

Amount

41.76

Transaction ID : SE.4273

Date of Disbursement or Obligation

04 / 30 / 2014

Office Sought: ☒ House District: 14
☐ President ☐ Senate State: OH

Age Group	Percentage
18-24	10
25-34	15
35-44	20
45-54	25
55-64	30
65-74	35
75-84	40
85+	1031.46

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

MM / DD / YYYY

Amount

712.41

Transaction ID : SE.4275

Date of Disbursement or Obligation

MM / DD / YYYY

Office Sought: ☒ House District: 14
☐ President ☐ Senate State: OH

9351.20

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

754.17

[illegible]

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05 / 03 / 2014

FEC Schedule E (Form 24/28) Rev. 09/2013

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

 PAGE 7 OF 7
 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) TEA PARTY PATRIOTS CITIZENS FUND	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00540898 </div>
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee TPPCF Staff		Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY 05 / 02 / 2014</div> </div>	
Mailing Address 2295 Towne Lake Pkwy Ste. 116-328		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">500.00</div>	
City Woodstock	State GA	Zip Code 30189	Transaction ID : SE.4252 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY 05 / 02 / 2014</div> </div>
Purpose of Expenditure Script Writing		Category/ Type	
Name of Federal Candidate MATT LYNCH		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <u>14</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>OH</u>
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; text-align: right;">21926.94</div>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee		Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY</div> </div>	
Mailing Address		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"></div>	
City	State	Zip Code	Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY</div> </div>
Purpose of Expenditure		Category/ Type	
Name of Federal Candidate		<input type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; text-align: right;"></div>	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;">500.00</div>
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"></div>
(c) TOTAL Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;">23426.94</div>

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.

Paul Kilgore

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Date

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05 / 03 / 2014

Signature