

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

Defenders of Freedom and Security

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2016"/>	<input type="text" value="5587.36"/>	<input type="text" value="5587.36"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="6870.88"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="14937.98"/>	<input type="text" value="23600.46"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="21808.86"/>	<input type="text" value="29187.82"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="12533.88"/>	<input type="text" value="19912.84"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="9274.98"/>	<input type="text" value="9274.98"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

Defenders of Freedom and Security

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y
02 / 01 / 2016 To: M M / D D / Y Y Y Y Y Y
02 / 29 / 2016

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	4125.00	5925.00
(ii) Unitemized	10812.98	17675.46
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	14937.98	23600.46
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	14937.98	23600.46
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	14937.98	23600.46
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	14937.98	23600.46

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	9433.88	14792.84
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	9433.88	14792.84
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	100.00	120.00
24. Independent Expenditures (use Schedule E)	3000.00	5000.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	12533.88	19912.84
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	12533.88	19912.84

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	14937.98	23600.46
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	14937.98	23600.46
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	9433.88	14792.84
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	9433.88	14792.84

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 14
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Defenders of Freedom and Security

A. MARILYN AUGUR
 Full Name (Last, First, Middle Initial)
 Mailing Address 3535 GILLESPIE 105
 City DALLAS State TX Zip Code 75219-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFFC
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 18 / 2016
Transaction ID : SA11.245395
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

B. KAREN S BLACK
 Full Name (Last, First, Middle Initial)
 Mailing Address 1250 CELEBRATION AVE
 City CELEBRATION State FL Zip Code 34747-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 RETIRED RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 10 / 2016
Transaction ID : SA11.245286
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. DIANA BRAUN
 Full Name (Last, First, Middle Initial)
 Mailing Address 1541 SANDGATE ROAD
 City MIDLOTHIAN State VA Zip Code 23113-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFFC
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 50.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 12 / 2016
Transaction ID : SA11.245497
 Amount of Each Receipt this Period
 50.00
 Memo Item
 EARMARKED CONTRIBUTION FORWARDED TO CARSON AMERICA, C00573519

SUBTOTAL of Receipts This Page (optional).....▶	800.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 14
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Defenders of Freedom and Security

A. KENNETH DUNIPACE
 Full Name (Last, First, Middle Initial)
 Mailing Address 5462 SPINDLE TREE RD
 5462 SPINDLE TREE RD
 City INDIANAPOLIS State IN Zip Code 46268-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **275.00**

Date of Receipt **02 / 29 / 2016**
Transaction ID : SA11.245482
 Amount of Each Receipt this Period **25.00**
 Memo Item
CONTRIBUTION

B. JULIA GLUCK
 Full Name (Last, First, Middle Initial)
 Mailing Address 906 WAYNEWOOD BLVD.
 City ALEXANDRIA State VA Zip Code 22308-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFF
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **250.00**

Date of Receipt **02 / 16 / 2016**
Transaction ID : SA11.245362
 Amount of Each Receipt this Period **250.00**
 Memo Item
CONTRIBUTION

C. RIDGELY HARRISON
 Full Name (Last, First, Middle Initial)
 Mailing Address 1566 HIGH PEAK LANE
 1566 HIGH PEAK LANE
 City SHIPMAN State VA Zip Code 22971-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer FARMING Occupation SELF
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **300.00**

Date of Receipt **02 / 26 / 2016**
Transaction ID : SA11.245460
 Amount of Each Receipt this Period **250.00**
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... **525.00**
TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 14
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Defenders of Freedom and Security

A. TATNALL HILLMAN
Full Name (Last, First, Middle Initial)
Mailing Address 504 W BLEEKER ST
City ASPEN State CO Zip Code 81611-1228
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 2500.00

Date of Receipt 02 / 15 / 2016
Transaction ID : SA11.245343
Amount of Each Receipt this Period 2500.00
 Memo Item
CONTRIBUTION

B. KEITH MCWHERTER
Full Name (Last, First, Middle Initial)
Mailing Address 437 LA CHANCE COURT
City DELAWARE State OH Zip Code 43015-
FEC ID number of contributing federal political committee. **C**
Name of Employer SMALL BUSINESS OWNER Occupation SELF
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 250.00

Date of Receipt 02 / 15 / 2016
Transaction ID : SA11.245337
Amount of Each Receipt this Period 250.00
 Memo Item
CONTRIBUTION

C. LARRY UMBERGER
Full Name (Last, First, Middle Initial)
Mailing Address 1832 CHANTILLY DR.
City COLUMBIA State SC Zip Code 29210-
FEC ID number of contributing federal political committee. **C**
Name of Employer INFORMATION REQUESTED PER BEST EFF Occupation INFORMATION REQUESTED PER BEST EFF
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 50.00

Date of Receipt 02 / 22 / 2016
Transaction ID : SA11.245498
Amount of Each Receipt this Period 50.00
 Memo Item
EARMARKED CONTRIBUTION FORWARDED TO CARSON AMERICA, C00573519

SUBTOTAL of Receipts This Page (optional).....	2800.00
TOTAL This Period (last page this line number only).....	4125.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Defenders of Freedom and Security

Full Name (Last, First, Middle Initial)

A. AMAGI STRATEGIES

Mailing Address 424 E 10TH ST
APT 3D

City NEW YORK State NY Zip Code 10009-4288

Purpose of Disbursement
COMMUNICATIONS CONSULTING

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 12 / 2016

Transaction ID : SB21B.I81569

Amount of Each Disbursement this Period

2961.94

Memo Item

Full Name (Last, First, Middle Initial)

B. HALT, BUZAS & POWELL, LTD

Mailing Address 1199 N FAIRFAX ST
SUITE 1000

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
ACCOUNTING SERVICES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 16 / 2016

Transaction ID : SB21B.I81572

Amount of Each Disbursement this Period

194.00

Memo Item

Full Name (Last, First, Middle Initial)

C. MOUNDSPRING STRATEGIES

Mailing Address 2423 C ST

City SACRAMENTO State CA Zip Code 95816

Purpose of Disbursement
PAC CONSULTING SERVICES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 23 / 2016

Transaction ID : SB21B.I81573

Amount of Each Disbursement this Period

5860.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

9015.94

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Defenders of Freedom and Security

Full Name (Last, First, Middle Initial)

A. PAYPAL

Mailing Address 2211 N 1ST STREET

City State Zip Code
SAN JOSE CA 95131

Purpose of Disbursement
MERCHANT PROCESSING FEES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
02 / 29 / 2016

Transaction ID : SB21B.I81565

Amount of Each Disbursement this Period

417.94

Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

417.94

9433.88

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Defenders of Freedom and Security

Full Name (Last, First, Middle Initial)

A. CARSON AMERICA INC.

Mailing Address 1800 DIAGONAL ROAD
SUITE 140

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
EARMARKED CONTRIBUTION FORWARDED TO CARSON AMERICA
FROM DIANA BRAIN

Candidate Name
BENJAMIN S CARSON SR MD

Office Sought: House Senate President
Disbursement For: 2016 Primary General
 Other (specify) ▼
State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
02 / 12 / 2016

Transaction ID : SB23.I81574

Amount of Each Disbursement this Period

50.00

Memo Item

Full Name (Last, First, Middle Initial)

B. CARSON AMERICA INC.

Mailing Address 1800 DIAGONAL ROAD
SUITE 140

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
EARMARKED CONTRIBUTION FORWARDED TO CARSON AMERICA
FROM ARRY LIMBERGER

Candidate Name
BENJAMIN S CARSON SR MD

Office Sought: House Senate President
Disbursement For: 2016 Primary General
 Other (specify) ▼
State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
02 / 22 / 2016

Transaction ID : SB23.I81575

Amount of Each Disbursement this Period

50.00

Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General
 Other (specify) ▼
State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

100.00

100.00

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Defenders of Freedom and Security		FEC IDENTIFICATION NUMBER C C00536664
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		MM / DD / YYYY

Full Name of Payee FACEBOOK, INC.		<input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination MM / DD / YYYY 01 / 28 / 2016
Mailing Address 1 HACKER WAY			Amount 250.72
City MENLO PARK	State CA	Zip Code 94025-1452	Transaction ID : SE24.60620
Purpose of Expenditure DIGITAL AD BUY	Category/Type		Date of Disbursement or Obligation MM / DD / YYYY 02 / 01 / 2016
Name of Federal Candidate BENJAMIN S. CARSON SR., M.D.		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: IA
Calendar Year-To-Date Per Election for Office Sought 1500.00			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee FACEBOOK, INC.		<input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination MM / DD / YYYY 01 / 28 / 2016
Mailing Address 1 HACKER WAY			Amount 19.50
City MENLO PARK	State CA	Zip Code 94025-1452	Transaction ID : SE24.78644
Purpose of Expenditure DIGITAL AD BUY	Category/Type		Date of Disbursement or Obligation MM / DD / YYYY 02 / 01 / 2016
Name of Federal Candidate BENJAMIN S. CARSON SR., M.D.		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: IA
Calendar Year-To-Date Per Election for Office Sought 1500.00			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	270.22
(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.

DAN BACKER

Signature _____ [Electronically Filed] Date MM / DD / YYYY **02 / 16 / 2016**

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Defenders of Freedom and Security	FEC IDENTIFICATION NUMBER ▼ C C00536664
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name of Payee Moundspring Strategies <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 01 / 28 / 2016
Mailing Address 2423 C St #11	Amount 1000.00
City State Zip Code Sacramento CA 95816	Transaction ID : SE.12275 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 01 / 22 / 2016
Purpose of Expenditure Video Production	Category/Type
Name of Federal Candidate Benjamin S. Sr. MD Carson	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: _____ State: IA
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____ 1000.00

Full Name of Payee Moundspring Strategies <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 01 / 22 / 2016
Mailing Address 2423 C St #11	Amount 1000.00
City State Zip Code Sacramento CA 95816	Transaction ID : SE.12275_B Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 02 / 16 / 2016
Purpose of Expenditure Video Production	Category/Type
Name of Federal Candidate Benjamin S. Sr. MD Carson	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: _____ State: SC
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____ 1000.00

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	2000.00
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	3000.00

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.

DAN BACKER

Signature _____ [Electronically Filed] Date M M / D D / Y Y Y Y Y Y
02 / 16 / 2016