Image# 14961314019			_		PAGE 1 / 207
FEC FORM 3X	REPORT (AND DISE For Other Than A	URSEME	NTS	Office	Jse Only
1. NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼	Example: over the li	f typing, type nes.	12FE4M5	
ADDRESS (number and stree		REET NW SUITE 765			
Check if different than previously reported. (ACC)	WASHINGTON				<u> </u>
2. FEC IDENTIFICATIO	N NUMBER 🔻	CITY 🔺	S		ZIP CODE
C C00499020		3. IS THIS REPORT	NEW (N) OR	AMENDED (A))
 4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15 Quarterly Rep July 15 Quarterly Rep October 15 Quarterly Rep January 31 Year-End Rep July 31 Mid-Ya Report (Non-e Year Only) (M Termination R (TER) 	ort (Q1) ort (Q2) ort (Q2) ort (Q2) ort (Q3) ort (YE) ear Hection Y) (b) Normal Report (c) 12-Day PRE -Elect Report for (d) 30-Day POST -Ele Report for	Apr 20 (M4) ion the: Conve Election on Genera	al (30G)	Aug 20 (M8) Sep 20 (M9) Oct 20 (M10 General (12G) Special (12S) Runoff (30R)	(Non-Election Year Only) Dec 20 (M12) (Non-Election Year Only)
 Covering Period I certify that I have examin Type or Print Name of Treat 	05 01 ed this Report and to the	2014 thro		3120	014 ete.
Signature of Treasurer	R. Russ Walker	[Electro	nically Filed] Da	ate 06 / 2	0 / Y Y Y Y Y 2014
NOTE: Submission of false,	erroneous, or incomplete info	ormation may subiect th	e person sianina thi	is Report to the penal	ties of 2 U.S.C. &437a.
Office Use Only				FE	C FORM 3X Rev. 12/2004

06/20/2014 17:47

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

FREEDOMWORKS FOR AMERICA

R	eport Covering the Period: From:	5 01 <u>2014</u> To	. 05 / 05 / Y Y Y Y 31 2014
		COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand January 1, 2014		595214.29
	(b) Cash on Hand at Beginning of Reporting Period	528741.14	
	(c) Total Receipts (from Line 19)	369757.37	1735678.47
	 (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) 	898498.51	2330892.76
7.	Total Disbursements (from Line 31)	505991.01	1938385.26
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	392507.50	392507.50
9.	Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10.	Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	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

FEC Form 3	DE T K (Rev. 06/2004)	FAILED SUMMARY PAGE of Receipts	Page 3
Write or Type Comm	· · · ·		
Report Covering the	Period: From: 05	/ D D / Y Y Y Y 01 2014 To:	05 / D D / Y Y Y Y 2014
I. Re	eceipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (othe (a) Individuals/Pe Than Political	rsons Other		
	(use Schedule A)	215352.35	968473.00
(ii) Unitemize (iii) TOTAL (a	d	57704.08	632704.53
	a)(i) and (ii)▶	273056.43	1601177.53
(b) Political Party(c) Other Politica	Committees	0.00	0.00
(d) Total Contribu	cs) itions (add Lines	0.00	0.00
Totals to Line	and (c)) (Carry 33, page 5)	273056.43	1601177.53
12. Transfers From Af Party Committees	filiated/Other	0.00	0.00
13. All Loans Receive	d	0.00	0.00
15. Offsets To Operati	• •	0.00	0.00
(Refunds, Rebates (Carry Totals to Li 16. Refunds of Contril	ne 37, page 5)	96700.94	134500.94
to Federal Candid		0.00	0.00
	ceipts st, etc.) n-Federal and Levin Funds	0.00	0.00
(a) Non-Federal A		0.00	0.00
(b) Levin Funds (f	rom Schedule H5)	0.00	0.00
(c) Total Transfers	(add 18(a) and 18(b))	0.00	0.00
19. Total Receipts (ad 12, 13, 14, 15, 16	d Lines 11(d), 5, 17, and 18(c))▶	369757.37	1735678.47
20. Total Federal Rec (subtract Line 18(eipts c) from Line 19)▶	369757.37	1735678.47

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)	of Disbursements	Page 4
II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
. Operating Expenditures: (a) Allocated Federal/Non-Federal Activity (from Schedule H4)		Calendar fear-to-Date
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share	0.00	0.00
(b) Other Federal Operating Expenditures	133391.73	869584.20
(c) Total Operating Expenditures	133391.73	869584.20
(add 21(a)(i), (a)(ii), and (b))► Transfers to Affiliated/Other Party		
Committees Contributions to	0.00	0.00
Federal Candidates/Committees and Other Political Committees	0.00	0.00
Independent Expenditures (use Schedule E) Coordinated Party Expenditures	372564.28	1065728.80
(2 U.S.C. §441a(d)) (use Schedule F)	0.00	0.00
Loan Repayments Made	0.00	0.00
Loans Made	0.00	0.00
Refunds of Contributions To: (a) Individuals/Persons Other Than Political Committees	35.00	135.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
	7 7 7	
(d) Total Contribution Refunds(add Lines 28(a), (b), and (c))▶	35.00	135.00
Other Disbursements	0.00	2937.26
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(b) Federal Election Activity Paid Entirely	0.00	0.00
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
Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))	505991.01	1938385.26
Total Federal Disbursements		
(subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)►	505991.01	1938385.26

FE6AN026

L

DETAILED SUMMARY PAGE

of Disbursements

III. Net Contributions/Operating Expenditures			
 Total Contributions (other than loans) (from Line 11(d), page 3) 	273056.43	1601177.53	
 Total Contribution Refunds (from Line 28(d)) 	35.00	135.00	
 Net Contributions (other than loans) (subtract Line 34 from Line 33) 	273021.43	1601042.53	
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))►	133391.73	869584.20	
 Offsets to Operating Expenditures (from Line 15, page 3) 	96700.94	134500.94	
8. Net Operating Expenditures (subtract Line 37 from Line 36)	36690.79	735083.26	

FE6AN026

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

(check only one)

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ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and Stateme or for commercial purposes, other than using the name		
NAME OF COMMITTEE (In Full) FREEDOMWORKS FOR AMERICA		
Advanced Cutting Cutter Receipt For: Agg Primary General Other (specify) ▼ Image: Cutter	pation	Date of Receipt
Retired Retir	59254	Date of Receipt
Kw Rea	•	Date of Receipt
SUBTOTAL of Receipts This Page (optional)		150.00

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

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

(check only one)

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	for each category of Detailed Summary P	
		by any person for the purpose of soliciting contributions committee to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) FREEDOMWORKS FOR AMERI	CA	
Info Requested	State Zip Code TN 37352 C Decupation nfo Requested Aggregate Year-to-Date ▼ 50	Date of Receipt Date of Receipt Dote o
Scott Banister	State Zip Code CA 94019 C Dccupation Aggregate Year-to-Date ▼ 950	Date of Receipt Date of Receipt Dote o
Possist For:	State Zip Code TX 77382 C Dccupation Retired Aggregate Year-to-Date ▼ 30	Date of Receipt Date of Receipt 05 06 2014 Transaction ID : SA11AI.32742 Amount of Each Receipt this Period 300.00
SUBTOTAL of Receipts This Page (optional)		1800.00

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

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

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PAGE

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X 11a 11b 12 11c **Detailed Summary Page** 14 13 15 16 17 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) FREEDOMWORKS FOR AMERICA Full Name (Last, First, Middle Initial) Paul Benedict Α. Date of Receipt Mailing Address P.o. Box 1654 Quail Trail 1708 M M / 05 05 2014 City Zip Code State Transaction ID : SA11AI.32792 Forest Lakes ΑZ 85931 Amount of Each Receipt this Period FEC ID number of contributing С 50.00 federal political committee. Name of Employer Occupation Ge Lufkin Optimization Specialist (energy) Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. Ms. Julie Bingham Date of Receipt Mailing Address 38 Tedrick St M M 05 28 2014 City State Zip Code Transaction ID : SA11AI.32834 PA Pittston 18640 Amount of Each Receipt this Period FEC ID number of contributing С 200.00 federal political committee. Name of Employer Occupation Info Requested Info Requested Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) **c.** Mr. Joel Bomgaars Date of Receipt Mailing Address 5624 Brentwood Dr M = M / D 05 21 2014 Zip Code City State Transaction ID : SA11AI.32875 MS Jackson 39211 Amount of Each Receipt this Period FEC ID number of contributing 5000.00 С federal political committee. Name of Employer Occupation Founder & Chairman Bomgaar Corporation Receipt For: Aggregate Year-to-Date ▼ Primary General 5000.00 Other (specify)

SUBTOTAL of Receipts This Page (optional)		7		,	525	50.00)
TOTAL This Period (last page this line number only)							

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

(check only one)

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page		X	11a 13		11b 14	11c	12	1 7	
Any information copied from such Reports and S or for commercial purposes, other than using the					or the		pose o	f soliciting	g contrib		-
NAME OF COMMITTEE (In Full) FREEDOMWORKS FOR AMEI											
Full Name (Last, First, Middle Initial) Kenneth Boothe Mailing Address 1001 East Fm 700 City Big Spring FEC ID number of contributing federal political committee. Name of Employer Info Requested Receipt For: Primary General Other (specify)	State TX C Occupation Info Requeste Aggregate Ye		0			sact	ion ID		nis Perio		
Full Name (Last, First, Middle Initial) Mr. Carl Brady Mailing Address 1320 Rose St. City Centralia FEC ID number of contributing federal political committee. Name of Employer Disabled Receipt For: Primary General Other (specify)	State WA C Occupation Disabled Aggregate Ye	Zip Code 98531 ear-to-Date ▼ 250.0	10			/ sacti	04		nis Perio	d 0.00	
Full Name (Last, First, Middle Initial) C. Michael Brashear Mailing Address 7233 W 15th Ave City Kennewick FEC ID number of contributing federal political committee. Name of Employer Ben Franklin Transit Receipt For: Primary General Other (specify) ▼	State WA C Occupation Coach Operat Aggregate Ye		00			sact	ion ID		nis Perio		_
SUBTOTAL of Receipts This Page (optional)			►	[7		17	5.00	-

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

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

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Any information copied from such Reports and Statements or for commercial purposes, other than using the name and		for each category of the Detailed Summary Page		-		11b	11c	12						
					purpo									
NAME OF COMMITTEE (In Full) FREEDOMWORKS FOR AM														
Full Name (Last, First, Middle Initial) A. Michael Brashear Mailing Address 7233 W 15th Ave				Date o		D		Y Y	Y					
City Kennewick	State WA	Zip Code 99338	05 14 2014 Transaction ID : SA11AI.32913 Amount of Each Receipt this Period											
FEC ID number of contributing federal political committee.	C				,			5	0.00					
Name of Employer Ben Franklin Transit Receipt For: Primary General Other (specify) ▼	Occupation Coach Oper Aggregate	ator Year-to-Date ▼ 400.00]											
B. Mr. Scott Bueling Mailing Address 10604 Deerberry Dr				Date o		eipt	D / Y	Y Y	Y					
City	State	Zip Code	_	05 Trans	actio	18 n ID :	3 : SA11AI.	2014 32972	_					
Land O Lakes FEC ID number of contributing federal political committee.	FL C	34638		Amoun	t of E	ach F	Receipt th		d 5.00					
Name of Employer Scott Bueling	Occupation													
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 225.00]											
Full Name (Last, First, Middle Initial) C. Mr. Scott Bueling				Date o	f Rece	eipt								
Mailing Address 10604 Deerberry Dr				м м 05	1	D 18		y y 2014	Y					
City Land O Lakes	State FL	Zip Code 34638	A				: SA11AI Receipt th		ł					
FEC ID number of contributing federal political committee.	C				. ,		5	2	5.00					
Name of Employer Scott Bueling Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 250.00]											
SUBTOTAL of Receipts This Page (optional))							100	0.00					

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

SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

Use separate schedule(s) for each category of the Detailed Summary Page FOR LINE NUMBER:

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		Detailed Summary Page		≺ 11a 13		11b 14	11c	:	12 16	17	
Any information copied from such Reports and or for commercial purposes, other than using t				for the	purp	ose o	f solicit		ntributi	ions	
NAME OF COMMITTEE (In Full) FREEDOMWORKS FOR AME	ERICA										
Full Name (Last, First, Middle Initial) Mr. Scott Bueling Mailing Address 10604 Deerberry Dr City Land O Lakes FEC ID number of contributing federal political committee. Name of Employer Scott Bueling Receipt For: Primary General Other (specify) ▼	State FL C Occupation Aggregate	Zip Code 34638 Year-to-Date ▼ 275.00		Date of 05 Trans	actic	18 200 ID	3 : SA11/	AI.329		У 00	
Full Name (Last, First, Middle Initial) Mr. Scott Bueling Mailing Address 10604 Deerberry Dr City Land O Lakes FEC ID number of contributing federal political committee. Name of Employer Scott Bueling Receipt For: Primary General Other (specify) ▼	State FL Occupation Aggregate	Zip Code 34638 Year-to-Date ▼ 300.00		Date of 05 Trans Amount	/ actio	18 18 200 ID :	3 : SA11/	AI.329		20	
Full Name (Last, First, Middle Initial) Kim Burnett Mailing Address 731 Kennesaw Due West R City Kennesaw FEC ID number of contributing federal political committee. Name of Employer Info Requested Receipt For: Primary General Other (specify) ▼	State GA C Occupation Info Reque			Date of 05 Trans	/	05 05	5 : SA11/	AI.329		Y 00	
SUBTOTAL of Receipts This Page (optional).			•			,			150.0	00	

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Use separate schedule(s) for each category of the

FOR LINE NUMBER:

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	EIPIS	for each category of the Detailed Summary Page	X 11a 11b 11c 13 14 15	12 16 17
			ny person for the purpose of soliciting nittee to solicit contributions from such	
	ITEE (In Full) ORKS FOR AMERICA			
Full Name (Last, Fill Barbara Camer Mailing Address 42 City Las Vegas FEC ID number of federal political con Name of Employer Receipt For: Primary Other (specify	ron 268 Pacifico Ln Sta NV contributing nmittee. Occu Retire General	2 89135	Date of Receipt	
Full Name (Last, Fi B. Barbara Came Mailing Address 42	ron	Date of Receipt	2014	
City	Sta		Transaction ID : SA11AI.33	
Las Vegas FEC ID number of federal political con	ş	89135	Amount of Each Receipt this	-500.00
Name of Employer	Occu Retire	pation ed		
Receipt For: Primary Other (specify	General	egate Year-to-Date ▼ 3500.00		
Full Name (Last, Fi C. Barbara Cam			Date of Receipt	
Mailing Address 42			05 / D D / Y 05 14	2014
City Las Vegas	Sta NV	•	Transaction ID : SA11AI.3 Amount of Each Receipt this	
FEC ID number of federal political con			7	-500.00
Name of Employer	Occu Retire	pation ed		
Receipt For: Primary Other (specify	General	egate Year-to-Date ▼ 3000.00		
SUBTOTAL of Recei	pts This Page (optional)			-1500.00

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

Use separate schedule(s) for each category of the

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(check only one)

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	EMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
				erson for the purpose of soliciting contributions e to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) FREEDOMWORKS FOR AME	RICA		
A.	Full Name (Last, First, Middle Initial) Barbara Cameron Mailing Address 4268 Pacifico Ln City Las Vegas FEC ID number of contributing federal political committee. Name of Employer Receipt For:	State NV C Occupation Retired	Zip Code 89135	Date of Receipt
	Primary General Other (specify) ▼	Aggregate	2500.00]
В.	Full Name (Last, First, Middle Initial) Barbara Cameron Mailing Address 4268 Pacifico Ln		Date of Receipt	
	City	State	Zip Code	Transaction ID : SA11AI.33014
	Las Vegas FEC ID number of contributing	NV C	89135	Amount of Each Receipt this Period
	federal political committee. Name of Employer	Occupation Retired		_
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2000.00	
с.	Full Name (Last, First, Middle Initial) Barbara Cameron			Date of Receipt
	Mailing Address 4268 Pacifico Ln			05 14 2014
	City Las Vegas	State NV	Zip Code 89135	Transaction ID : SA11AI.33015 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		-500.00
	Name of Employer	Occupation Retired	1	
	Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 1500.00]
s	UBTOTAL of Receipts This Page (optional)			-1500.00

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

Use separate schedule(s) for each category of the

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	EMIZED RECEIPTS		for each category of the Detailed Summary Page	×	11a 13		11b 14	11c	12	17					
	ny information copied from such Reports and S for commercial purposes, other than using the														
	NAME OF COMMITTEE (In Full) FREEDOMWORKS FOR AME	RICA													
Α.	Full Name (Last, First, Middle Initial) Barbara Cameron Mailing Address 4268 Pacifico Ln				Date o	f Red	ceipt	D / Y	2014	Y					
	City Las Vegas	State NV	Zip Code 89135	Transaction ID : SA11AI.33016 Amount of Each Receipt this Period											
	FEC ID number of contributing federal political committee.	С					7		-50	0.00					
	Name of Employer	Occupation Retired													
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00												
в.	Full Name (Last, First, Middle Initial) Barbara Cameron				Date o	f Ree	ceipt								
	Mailing Address 4268 Pacifico Ln			05 14 2014 Transaction ID : SA11AI.33017											
	City	State	Zip Code												
	Las Vegas	s NV 89135						Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С				-50	0.00								
	Name of Employer	Occupation Retired													
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00												
<u>с</u> .	Full Name (Last, First, Middle Initial) Mr. Con Campbell				Date o	f Red	ceipt								
	Mailing Address 502n. Fifth St. PO Box 337	01.14	7: 0-1		м м 05	/	05	5	у у 2014	Y					
	City Ashkum	State IL	Zip Code 60911	A				: SA11AI Receipt th		k					
	FEC ID number of contributing federal political committee.	С					7		100	0.00					
	Name of Employer	Occupation Retired													
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1000.00												
s	UBTOTAL of Receipts This Page (optional)		•••••				7	7	(0.00					

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

SCHEDULE A	(FEC	Form	3X)
ITEMIZED REC	EIPTS	;	

Use separate schedule(s) for each category of the Detailed Sur V Dogo

FOR LINE NUMBER:

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TEMIZED RECEIPTS		for each category of the Detailed Summary Page	X	11a	11	b	11c	;	12		
Any information copied from such Reports an or for commercial purposes, other than using	d Statements ma	ay not be sold or used by any p	erson fo	13 or the	purpos		f soliciti	ing cc	16 Intribut	tions	17
NAME OF COMMITTEE (In Full) FREEDOMWORKS FOR AM									<u></u>		
Full Name (Last, First, Middle Initial) A. Mr. Giuseppe Cecchi Mailing Address 1700 N Moore St	State	Zip Code		м м 05	JL	06	;	2	2014	Y	
City Arlington	VA	2209	A		saction t of Ead						
FEC ID number of contributing federal political committee.	С					l	7		1000	.00	
Name of Employer Info Requested Receipt For:	Occupation Info Reque	sted									
Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00]								
Full Name (Last, First, Middle Initial) B. Ms. Madeline Chao Mailing Address 41 Fawnridge Pl						pt	D /	YYY	(Y	Y	
	41	05	1 1	24		2	014				
City Aliso Viejo	State CA	Zip Code 92656			action t of Ead		-				
FEC ID number of contributing federal political committee.	С		100.0					.00			
Name of Employer	Occupation Retired										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 300.00]								
Full Name (Last, First, Middle Initial) C. Ms. Deborah Christian				Date of	f Receij	pt					
Mailing Address 1790 Sidney Ave 2-106				м м 05	/	16			014	Y	
City Port Orchard	State WA	Zip Code 98366	A		saction t of Ead						
FEC ID number of contributing federal political committee.	S C C C C C C C C C C C C C C C C C C C									.00	
Name of Employer	Occupation										
Lowes Receipt For:		Service Associate	_								
Primary General Other (specify)	Aggregate	Year-to-Date ▼ 225.00]								
SUBTOTAL of Receipts This Page (optional)								1125.	00	٦

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

Use separate schedule(s) for each category of the Detailed Summary Page FOR LINE NUMBER:

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X 11a 11b 12 11c **Detailed Summary Page** 14 13 15 16 17 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) FREEDOMWORKS FOR AMERICA Full Name (Last, First, Middle Initial) Ms. Deborah Christian Α. Date of Receipt Mailing Address 1790 Sidney Ave 2-106 M M / 2014 05 16 City Zip Code State Transaction ID : SA11AI.33095 WA Port Orchard 98366 Amount of Each Receipt this Period FEC ID number of contributing С 25.00 federal political committee. Name of Employer Occupation Customer Service Associate Lowes Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. Ms. Deborah Christian Date of Receipt Mailing Address 1790 Sidney Ave 2-106 M M 05 16 2014 City State Zip Code Transaction ID : SA11AI.33096 Port Orchard WA 98366 Amount of Each Receipt this Period FEC ID number of contributing С 25.00 federal political committee. Name of Employer Occupation Lowes Customer Service Associate Receipt For: Aggregate Year-to-Date ▼ Primarv General 275.00 Other (specify) Full Name (Last, First, Middle Initial) **c.** Richard Crandall Date of Receipt Mailing Address 601 E Hopkins Ave Ste 202 M = M / D 20 05 2014 City Zip Code State Transaction ID : SA11AI.33172 CO Aspen 81611 Amount of Each Receipt this Period FEC ID number of contributing 500.00 С federal political committee. Name of Employer Occupation Info Requested Info Requested Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 550.00

Use separate schedule(s) for each category of the

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ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and State or for commercial purposes, other than using the na		
NAME OF COMMITTEE (In Full) FREEDOMWORKS FOR AMERIC	CA	
Name of Employer C	State Zip Code FL 34104 C Decupation letired Aggregate Year-to-Date ▼ 300.00	Date of Receipt
Name of Employer C	State Zip Code FL 34104 C Decupation etired Aggregate Year-to-Date ▼ 400.00	Date of Receipt
Name of Employer C	State Zip Code MS 39211 C Decupation tetired Aggregate Year-to-Date ▼ 250.00	Date of Receipt
SUBTOTAL of Receipts This Page (optional)	•	450.00

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

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

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X 11a 11b 12 11c **Detailed Summary Page** 14 13 15 16 17 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) FREEDOMWORKS FOR AMERICA Full Name (Last, First, Middle Initial) Mr. James Darr Jr. Α. Date of Receipt Mailing Address 2727 De Anza Rd. Spc. Sd57 M M / 05 08 2014 City State Zip Code Transaction ID : SA11AI.33217 CA San Diego 92109 Amount of Each Receipt this Period FEC ID number of contributing С 300.00 federal political committee. Name of Employer Occupation Info Requested Info Requested Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) Full Name (Last, First, Middle Initial) B. Diversified Resources, Inc. Date of Receipt Mailing Address 29425 Chagrin Blvd Ste 300 M 05 02 2014 City State Zip Code Transaction ID : SA11AI.33293 Beachwood OH 44122 Amount of Each Receipt this Period FEC ID number of contributing С 30000.00 federal political committee. Name of Employer Occupation Info Requested Info Requested Receipt For: Aggregate Year-to-Date ▼ Primarv General 30000.00 Other (specify) Full Name (Last, First, Middle Initial) c. Mr. Ronald Dondanville Date of Receipt Mailing Address 420 Andrew Avenue M = M / D D 05 13 2014 City State Zip Code Transaction ID : SA11AI.33308 CA Encinitas 92024 Amount of Each Receipt this Period FEC ID number of contributing С 250.00 federal political committee. Name of Employer Occupation Service Tech Unemployed Receipt For: Aggregate Year-to-Date ▼ Primary General 400.75 Other (specify) 20550 00

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Use separate schedule(s) for each category of the

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using th			
NAME OF COMMITTEE (In Full) FREEDOMWORKS FOR AME	RICA		
Full Name (Last, First, Middle Initial) Mr. Richard Donnelly Mailing Address 970 Lone Pine Rd City Bloomfield Hills FEC ID number of contributing federal political committee. Name of Employer Oshkosh Corp Receipt For: Primary General Other (specify)	State MI C Occupation Drector Aggregate	Zip Code 48302 1 Year-to-Date ▼ 500.00	Date of Receipt
Full Name (Last, First, Middle Initial) Lori Dunham Mailing Address 13103 Coastal Circle City Palm Beach Gardens FEC ID number of contributing federal political committee. Name of Employer Receipt For: Primary General Other (specify) ▼	State FL C Occupation Retired Aggregate	Zip Code 33410 Year-to-Date ▼ 330.00	Date of Receipt
Full Name (Last, First, Middle Initial) James Eller Mailing Address 3587 Conrad Ave. City San Diego FEC ID number of contributing federal political committee. Name of Employer Retired Receipt For: Primary General Other (specify) ▼	State CA C Occupation Retired Aggregate	Zip Code 92117 Year-to-Date ▼ 1000.00	Date of Receipt
SUBTOTAL of Receipts This Page (optional)			, , , , 880.00

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SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

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

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116	EMIZED RECEIPTS		Detailed Summary Page		< 11a	11b		11c	12		
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	NAME OF COMMITTEE (In Full) FREEDOMWORKS FOR AM										
A .	Full Name (Last, First, Middle Initial) Mr. Martin Ennis Mailing Address 515 Willowhurst Place City Louisville FEC ID number of contributing federal political committee. Name of Employer Retired Receipt For: Primary General Other (specify) ▼	State KY C Occupation Retired Aggregate	Zip Code 40223 Year-to-Date ▼ 250.00		05 Trans		8) : SA	2 11AI.33	Period	y 1 3.00]
В.	Full Name (Last, First, Middle Initial) Charles Eubank Mailing Address 2009 Norwich Cr City Yukon FEC ID number of contributing federal political committee. Name of Employer Rush Receipt For: Primary General Other (specify) ▼	State OK C Occupation Sales Aggregate	Zip Code 73099 Year-to-Date ▼ 350.00		05 Trans	f Receipt)1 : SA	11AI.333]
C .	Full Name (Last, First, Middle Initial) Nora Felton Mailing Address 33079 County 24 Blvd City Cannon Falls FEC ID number of contributing federal political committee. Name of Employer Nora Felton Receipt For: Primary General Other (specify) ▼	State MN C Occupation Farmer Aggregate	Zip Code 55009 Year-to-Date ▼ 600.00		05 Trans			2 11AI.33	Period]
SI	JBTOTAL of Receipts This Page (optional)								700	.00	1

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			for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
				erson for the purpose of soliciting contributions to solicit contributions from such committee.
	ME OF COMMITTEE (In Full) REEDOMWORKS FOR AME	RICA		
A D	II Name (Last, First, Middle Initial) conald Fowler illing Address 3575 Wilder Ridge Rd.	State	Zip Code	Date of Receipt
	arberville	CA	95542	Amount of Each Receipt this Period
	C ID number of contributing leral political committee.	С		350.00
	me of Employer	Occupation Retired		
Re	ceipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 850.00	
B . M	II Name (Last, First, Middle Initial) I r. Channing Frederick iiling Address 2485 Highway 460 E	<u> </u>		Date of Receipt
				05 10 2014
Cit W	y est Liberty	State KY	Zip Code 41472	Transaction ID : SA11AI.33459 Amount of Each Receipt this Period
FE	C ID number of contributing leral political committee.	С		250.00
	me of Employer othills Contracting, Llc	Occupation Business O		_
Re	ceipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 550.00	
	II Name (Last, First, Middle Initial) reedomworks, Inc.			Date of Receipt
Ma	uiling Address 400 N Capitol St., NW Suite 735 y	State	Zip Code	05 30 2014 Transaction ID : SA11AI.35352
W	ashington	DC	20001	Amount of Each Receipt this Period
	C ID number of contributing leral political committee.	С		319.80
Na	me of Employer	Occupation		In-kind - Travel
Re	ceipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 220464.02	
SUB	TOTAL of Receipts This Page (optional)			919.80

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FEC Schedule A (Form 3X) Rev. 02/2003

Use separate schedule(s) for each category of the Detailed Summary Page FOR LINE NUMBER:

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	ny information copied from such Reports and S for commercial purposes, other than using the																
\setminus	NAME OF COMMITTEE (In Full)																
	FREEDOMWORKS FOR AME	RICA															
Α.	Full Name (Last, First, Middle Initial) Freedomworks, Inc.				Date	of F	Rece	eipt									
	Mailing Address 400 N Capitol St., NW				M	М	/	D D	/ Y	Y	Y	Y					
	Suite 735		7. 0. 1	_	05		1	30			014						
	City Washington	State DC	Zip Code 20001	_					SA11AI.								
	· · · · · · · · · · · · · · · · · · ·	DC	20001	Amount of Each Receipt this Period													
	FEC ID number of contributing federal political committee.	С				_	7		- T	13823.55							
	Name of Employer	Occupation	1	In-kind - Travel													
	Receipt For:	Aggregate	Year-to-Date ▼														
	Primary General	riggrogato		11													
	Other (specify)		234287.57	4													
в.	Full Name (Last, First, Middle Initial) Freedomworks, Inc.				Date	of F	Rece	eipt									
	Mailing Address 400 N Capitol St., NW Suite 735				M 05		/	D D 31	/ Y		y 014	Y					
	City	State	Zip Code		Trar	nsac	ction	1 ID : \$	SA11AL3								
	Washington	gton DC 20001								is P	Period						
	FEC ID number of contributing federal political committee.	C				1250.00											
	Name of Employer	Occupation		In-kind - Equipment Usage													
	Receipt For:	Aggregate	Year-to-Date ▼	_													
	Primary General	riggrogato		11													
	Other (specify) v		235537.57	4													
с.	Full Name (Last, First, Middle Initial) Mary Futchik				Date	of F	Rece	eipt									
	Mailing Address 8665 Bay Colony Drive #1703	3			[™] 05		/	D D 16	/ Y		у 014	Y					
	City	State	Zip Code		Tra	nsa	ctior	n ID : :	SA11AI.	334	77						
	Naples	FL	34108	_	Amou	nt c	of Ea	ach Re	eceipt th	is P	'eriod						
	FEC ID number of contributing federal political committee.	С					7			_	250	.00					
	Name of Employer	Occupation Retired	I														
	Receipt For:		Vear to Date 🖛	_													
	Primary General	Aggregate	Year-to-Date ▼														
	Other (specify)		250.00														
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TTEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
			berson for the purpose of soliciting contributions e to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) FREEDOMWORKS FOR A	MERICA		
A. Full Name (Last, First, Middle Initial) Mr. Bruce Garland Mailing Address 932 Sconnelltown Rd City West Chester	State PA	Zip Code 19382	Date of Receipt
FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period
Name of Employer Info Requested Receipt For:	Occupation Info Reque Aggregate		
Other (specify)		2000.00]
Full Name (Last, First, Middle Initial) Mrs. Bonnie Garner Mailing Address 326 West 3rd South			Date of Receipt
City Rexburg	State ID	Zip Code 83440	Transaction ID : SA11AI.33489 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		500.00
Name of Employer Arc Power, Inc	Occupation MacHinest		
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 600.00]
Full Name (Last, First, Middle Initial) C. Connie Garrett			Date of Receipt
Mailing Address 14505 Valley View Drive	State	Zip Code	
Skiatook	OK	74070	Transaction ID : SA11AI.33492 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		15.00
Name of Employer	Occupation	1	_
Wsa Sales Company, Inc.	General Ma	anager	
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 375.00]
SUBTOTAL of Receipts This Page (option	al)		2515.00

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

SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

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

FOR LINE NUMBER:

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ITEMIZED RECEIPTS	Detailed Summary Page	X 11a 11b 11c 12											
Any information copied from such Reports a or for commercial purposes, other than usin	nd Statements may not be sold or used by any g the name and address of any political committ	13 14 15 16 17 person for the purpose of soliciting contributions ee to solicit contributions from such committee.											
NAME OF COMMITTEE (In Full) FREEDOMWORKS FOR AN	/IERICA												
Full Name (Last, First, Middle Initial) A. Daramana Gata Mailing Address 2400 Westridge Dr City Plano FEC ID number of contributing federal political committee. Name of Employer Receipt For:	State Zip Code TX 75075 C Occupation Unemployed Aggregate Year-to-Date ▼	Date of Receipt											
Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial)	350.00]											
B. Carolyn Gerwin Mailing Address 705 S Locust St City	State Zip Code	Date of Receipt											
Pontiac FEC ID number of contributing federal political committee. Name of Employer Carolyn K. Gerwin Attorney at Law Receipt For: Primary General Other (specify)	IL 61764 C Occupation Attorney Aggregate Year-to-Date ▼ 500.00	Amount of Each Receipt this Period											
Full Name (Last, First, Middle Initial) C. Earl Gilmartin Mailing Address 357 W 200 N City Jerome	Full Name (Last, First, Middle Initial) Earl Gilmartin Mailing Address 357 W 200 N City State Zip Code												
FEC ID number of contributing federal political committee. Name of Employer Commercial Creamery Receipt For: Primary General Other (specify) ▼	C Occupation Engineer Aggregate Year-to-Date ▼ 2695.00	Amount of Each Receipt this Period											
SUBTOTAL of Receipts This Page (optional	ן ו)	650.00											

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SCHEDULE A	(FEC	Form	3X)
ITEMIZED REC	EIPTS	;	

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FOR LINE NUMBER:

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TIEMIZED RECEIPTS		Detailed Summary Page	X 11a	11b	11c		12 16	17							
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NAME OF COMMITTEE (In Full) FREEDOMWORKS FOR AM	IERICA														
Full Name (Last, First, Middle Initial) A. Earl Gilmartin Mailing Address 357 W 200 N					29	Y = Y)14	Ŷ							
City Jerome	State ID	Zip Code 83338	Trar	nsaction ID nt of Each	D : SA11A	AI.3352	26								
FEC ID number of contributing federal political committee.	С			3			25.	00							
Name of Employer Commercial Creamery Receipt For: Primary General Other (specify) ▼	Occupation Engineer Aggregate	Year-to-Date ▼ 2720.00]												
B. Full Name (Last, First, Middle Initial) Ms. Lise Goga Mailing Address 95-1089 Paemoku PI	Ms. Lise Goga				Date of Receipt										
City Mililani	State HI	Zip Code 96789		05 12 2014 Transaction ID : SA11AI.33540 Amount of Each Receipt this Period											
FEC ID number of contributing federal political committee.	С		Amou		Receipt		300.0	00							
Name of Employer	Occupation Retired	1													
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00]												
Full Name (Last, First, Middle Initial) C. Mrs. Marilyn Hayden			Date	of Receipt											
Mailing Address 10306 E Calle De Las Bris	Mailing Address 10306 E Calle De Las Brisas					05 05 2014									
City Scottsdale	State AZ	Zip Code 85255	Transaction ID : SA11AI.33659 Amount of Each Receipt this Period												
FEC ID number of contributing federal political committee.	s l							00							
Name of Employer	lame of Employer Occupation Retired														
Receipt For: Primary General Other (specify) ▼	Receipt For: Aggregate Year-to-Date ▼ Primary General														
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SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

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NAME OF COMMITTEE (In Full) FREEDOMWORKS FOR AM	IERICA									
Full Name (Last, First, Middle Initial) A. Mr. Ron Hill				Date of	Receip	ot				
Mailing Address 16520 Ellen Court	State	Zip Code		05 -	L	16	J L	2	014	Y
Hagerstown	IN	47346			action t of Eac					
FEC ID number of contributing federal political committee.	С						7		100.	.00
Name of Employer Retired	Occupation Retired									
Receipt For: Primary General Other (specify) ▼	Aggregate Year	-to-Date ▼ 400.00]							
Full Name (Last, First, Middle Initial) B. Mr. Conway Ivy				Date of	Receip	ot				
Mailing Address PO Box 1408				м м 05	/ D	30	1)14	Y
City		Zip Code		Trans	action I	ID : 3	SA11A			
Beaufort	SC	29901	/	Amount	t of Eac	h R	eceipt	this F	'eriod	
FEC ID number of contributing federal political committee.	С				,		7		1000.	00
Name of Employer Conway Ivy	Occupation									
	Investor									
Primary General Other (specify)										
Full Name (Last, First, Middle Initial) C. Mr. Kenneth Jackson				Date of	Receip	ot				
Mailing Address 2555 Mercedes Dr				м м 05	/ D	23	/)14	Y
City Fort Lauderdale	State FL	Zip Code 33316			action					
FEC ID number of contributing federal political committee.	C						. ,		500.	.00
Name of Employer	Occupation									
Jackson Land Development	Construction									
Receipt For: Primary General Other (specify) ▼	Primary General Aggregate real-to-Date V									

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SCHEDULE A	(FEC	Form	3X)
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Use separate schedule(s) for each category of the Detailed Summary Page

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ITEIMIZED RECEIPTS		for each category of the Detailed Summary Page		11a	11b		11c	12		
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NAME OF COMMITTEE (In Full) FREEDOMWORKS FOR AM	IERICA									
A. Mr. William Jellison Mailing Address 531 Ne 49th St				Date o	f Receipt	D	/ Y	YYY	Y	
City	State	Zip Code		05 Trans	0 saction ID)1) : SA		2014 832		
Oakland Park FEC ID number of contributing federal political committee.	FL	33334		Amoun	t of Each	Rec	eipt this	Period 100.	.00	
Name of Employer	Occupation Retired		_		,		_			
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 300.00]							
B. Mr. Rob Johnson Mailing Address 7936 Tiger Lily Dr			_	Date o	f Receipt	D		YY	V	
City	State	Zip Code		05		2	2	014		
Naples	FL	34113			t of Each					
FEC ID number of contributing federal political committee.	С					_	7	2000.	00	
Name of Employer Rob Johnson	Occupation Finance									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2000.00]							
Full Name (Last, First, Middle Initial) C. Diane Kampe				Date o	f Receipt					
Mailing Address PO Box 3453				м м 05		D 06		2014	Y	
City Half Moon Bay	State CA	Zip Code 94019			saction ID t of Each				_	
FEC ID number of contributing federal political committee.									.00	
Name of Employer	Occupation									
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SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

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				erson for the purpose of soliciting contributions e to solicit contributions from such committee.										
	NAME OF COMMITTEE (In Full) FREEDOMWORKS FOR AM	IERICA												
Α.	Full Name (Last, First, Middle Initial) Mr. Douglas Kasai Mailing Address 2943 Silva Street City	State	Zip Code	Date of Receipt										
	Lakewood	CA	90712	Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.	С		100.00										
	Name of Employer L.a.u.s.d.	Occupation Special Edu	ucation Teacher											
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 235.00]										
В.	Full Name (Last, First, Middle Initial) Cary Katz			Date of Receipt										
	Mailing Address 9021 Grove Crest Ln			05 23 2014										
	City Las Vegas	State NV	Zip Code 89134	Transaction ID : SA11AI.33896 Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.	С		50000.00										
	Name of Employer College Loan Corporation	Occupation Board Mem												
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 100000.00]										
<u>с</u> .	Full Name (Last, First, Middle Initial) Dr. Ray Kirk			Date of Receipt										
	Mailing Address 3756 Westerman St.			M M / D D / Y Y Y Y Y 05 02 2014										
	City Houston	State TX	Zip Code 77005	Transaction ID : SA11AI.33930 Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.	С		500.00										
	Name of Employer	Occupation	1	_										
	Houston Radiology Associates	Staff Radio	logist											
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00]										
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ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
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NAME OF COMMITTEE (In Full) FREEDOMWORKS FOR AMERI	CA	
Possint For:	State Zip Code TN 38571 C Occupation Retired Aggregate Year-to-Date ▼ 350.00	Date of Receipt
Possist For	State Zip Code CA 94541 C Occupation Retired Aggregate Year-to-Date ▼	Date of Receipt
Possist For:	State Zip Code FL 33908 C Occupation Retired Aggregate Year-to-Date ▼ 400.00	Date of Receipt
SUBTOTAL of Receipts This Page (optional)	•	650.00

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FEC Schedule A (Form 3X) Rev. 02/2003

SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

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TTEIMIZED RECEIPTS	Detailed Summary Page	$\begin{array}{ c c c c c c c c } \hline X & 11a & 11b & 11c & 12 \\ \hline 13 & 14 & 15 & 16 & 17 \\ \hline \end{array}$						
Any information copied from such Reports a or for commercial purposes, other than using	nd Statements may not be sold or used by any po g the name and address of any political committee	erson for the purpose of soliciting contributions						
NAME OF COMMITTEE (In Full) FREEDOMWORKS FOR AN	IERICA							
A. Full Name (Last, First, Middle Initial) Mr. David L. Light Mailing Address 301 Mayerling Dr		Date of Receipt						
City Houston	State Zip Code TX 77024	05 02 2014 Transaction ID : SA11AI.34090 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C							
Name of Employer	Occupation Retired							
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00]						
Full Name (Last, First, Middle Initial) B. Fern Love	•	Date of Receipt						
	Mailing Address 793 Fm 2161							
City Panhandle	State Zip Code TX 79068	Transaction ID : SA11AI.34126 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C	100.00						
Name of Employer	Occupation Homemaker							
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00]						
Full Name (Last, First, Middle Initial) C. Fern Love		Date of Receipt						
Mailing Address 793 Fm 2161		M M / D D / Y Y Y Y Y 05 21 2014						
City Panhandle	State Zip Code TX 79068	Transaction ID : SA11AI.34127 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	e e e e e e e e e e e e e e e e e e e							
Name of Employer	Occupation Homemaker							
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 400.00							
SUBTOTAL of Receipts This Page (optiona	I)	1200.00						

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

SCHEDULE A	(FEC	Form	3X)
ITEMIZED REC	EIPTS	;	

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Any information copied from such Reports and Statements r or for commercial purposes, other than using the name and		Detailed Summary Page		11a	11b		11c	12	<u> </u>
		ay not be sold or used by any p ddress of any political committe	person fo	13 or the p cit cont	urpose o tributions	of sol	15 liciting co n such c	16 ontribut ommitte	ions ee.
	-								
Full Name (Last, First, Middle Initial) A. Fern Love Mailing Address 793 Fm 2161 City Panhandle FEC ID number of contributing federal political committee. Name of Employer	State TX C Occupation Homemake			05 Transa	Receipt / 2 action ID of Each	9 : SA	2 11AI.341		
Receipt For: Primary General Other (specify) v	Aggregate	Year-to-Date ▼ 425.00							
Full Name (Last, First, Middle Initial) B. Fern Love Mailing Address 793 Fm 2161 City	ern Love iling Address 793 Fm 2161				Receipt / 2 action ID	9	2	2014 1 28	Y
Panhandle FEC ID number of contributing federal political committee. Name of Employer	TX C Occupation	79068	A	mount	of Each	Rece	eipt this	Period 50.	00
Receipt For: Primary General Other (specify) ▼	Homemake Aggregate	r Year-to-Date ▼ 475.00]						
C. Full Name (Last, First, Middle Initial) Mailing Address 793 Fm 2161			_	ate of	Receipt			2014	Y
City Panhandle	State TX	Zip Code 79068			action ID of Each				_
FEC ID number of contributing federal political committee.	С				- 7		7	25.	.00
Name of Employer Receipt For: Primary General Other (specify)	Occupation Homemake]						
SUBTOTAL of Receipts This Page (option	nal)							100.0	00

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

SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

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

FOR LINE NUMBER:

(check only one)

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	EMIZED RECEIPTS		Detailed Summary Page		X 11a		11b	1	1c	12	_		
Ar	ny information copied from such Reports an	d Statements ma	ay not be sold or used by any p	Derson	13 for the		14 ose o		is citing c	16 ontribu		17	
or	for commercial purposes, other than using	the name and a	ddress of any political committee	e to s	olicit co	ntribu	tions	from	such c	ommit	tee.		
	NAME OF COMMITTEE (In Full) FREEDOMWORKS FOR AM	ERICA											
Α.	Full Name (Last, First, Middle Initial) Mrs. Ann Lucke				Date o	of Rec	eipt						
	Mailing Address 4570 Coz-smith Rd	Otata	Zin Onda		05		08	3		y y 2014	Y		
	City Mason	State OH	Zip Code 45040						11AI.34 ipt this				
	FEC ID number of contributing federal political committee.	С				1 01 2			,).00		
	Name of Employer	Occupation											
	Info Requested	Info Reque	sted										
	Receipt For: Primary General	Aggregate	Year-to-Date ▼										
	Other (specify)		250.00]									
в.	Full Name (Last, First, Middle Initial) Mr. Henry Luebke				Date o	of Rec	eipt						
	Mailing Address 28828 481st Ave						05 27 2014						
	City	State SD	Zip Code	\vdash					1AI.34				
	Canton	30	57013	-	Amoun	nt of E	ach I	Recei	ipt this	Period		_	
	FEC ID number of contributing federal political committee.	C			L				5	250	.00		
	Name of Employer Info Requested	Occupation Info Reques											
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00]									
— c.	Full Name (Last, First, Middle Initial) Mr. Joseph Magoun				Date o	of Rec	eipt						
-	Mailing Address 124 Lake Park Dr				05	1 /	D			y y 2014	Y		
	City Hendersonville	State TN	Zip Code 37075						11AI.34 ipt this				
	FEC ID number of contributing federal political committee.	S (S							3	100	0.00		
	Name of Employer	Occupation	l	\neg									
	Woebegone	Physician											
	Receipt For:	Aggregate	Year-to-Date ▼										
	Primary General Other (specify) ▼		500.00]									
s	UBTOTAL of Receipts This Page (optional)						_	_		400	.00	٦	

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

SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

Use separate schedule(s) for each category of the Detailed Summary Page FOR LINE NUMBER:

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X 11a

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11c

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	ny information copied from such Reports and S for commercial purposes, other than using the												
	NAME OF COMMITTEE (In Full) FREEDOMWORKS FOR AMER	RICA											
Α.	Full Name (Last, First, Middle Initial) Paula Marrie					Date c	of Re	eceipt					
	Mailing Address 4639 Shull Rd					м м 05	1 /	D 16			y y 2014	Y	
	City	State OH	Zip Code 43230						: SA11				
	Gahanna	On	43230		-	Amour	nt of	Each	Receip	t this	Period		
	FEC ID number of contributing federal political committee.	C						,		,	100.	00	
	Name of Employer	Occupation											
	Gahanna Animal Hospital	Veterinarian	ı										
	Receipt For:	Aggregate	Year-to-Date 🔻										
	Primary General Other (specify) ▼		7 7	275.00									
В.	Full Name (Last, First, Middle Initial) Paula Marrie					Date c	of Re	eceipt					
	Mailing Address 4639 Shull Rd					M N 05	/	16			2014	Y	
	City	State	Zip Code				sacti		: SA11				
	Gahanna	OH	43230			Amour	nt of	Each	Receip	t this	Period		
	FEC ID number of contributing federal political committee.	С						7		,	25.	00	
	Name of Employer	Occupation											
	Gahanna Animal Hospital	Veterinarian	I										
	Receipt For:	Aggregate	Year-to-Date 🔻										
	Other (specify) ▼		, , ,	300.00									
<u>с</u> .	Full Name (Last, First, Middle Initial) Mr. Herman McBride					Date c	of Re	eceipt					
	Mailing Address Po Box 491 14600 St. Rt. 65					05	/	02			y y 2014	Y	
	City	State	Zip Code			Tran	sact	ion ID	: SA11	I AI.34	215		
	Jackson Center	OH	45334		_	Amour	nt of	Each	Receip	t this	Period		
	FEC ID number of contributing federal political committee.	С						7		,	200.	00	
	Name of Employer	Occupation											
	Rising Sun Express	Owner											
	Receipt For:	Aggregate	Year-to-Date 🔻										
	Other (specify)		7 7	1450.00									
	UBTOTAL of Receipts This Page (optional)										325.0	00	٦

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

Use separate schedule(s) for each category of the Detailed Summary Page FOR LINE NUMBER:

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X 11a 11b 12 11c **Detailed Summary Page** 14 13 15 16 17 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) FREEDOMWORKS FOR AMERICA Full Name (Last, First, Middle Initial) Mr. Herman McBride Α. Date of Receipt Mailing Address Po Box 491 M M / 14600 St. Rt. 65 2014 05 28 City Zip Code State Transaction ID : SA11AI.34216 OH Jackson Center 45334 Amount of Each Receipt this Period FEC ID number of contributing С 250.00 federal political committee. Name of Employer Occupation **Rising Sun Express** Owner Receipt For: Aggregate Year-to-Date ▼ Primary General 1700.00 Other (specify) Full Name (Last, First, Middle Initial) B. David McCarthy Date of Receipt Mailing Address 9118 Oak Hills Ave. М M 05 15 2014 City State Zip Code Transaction ID : SA11AI.34220 Bakersfield CA 93312 Amount of Each Receipt this Period FEC ID number of contributing С 250.00 federal political committee. Name of Employer Occupation Kern Co. Fire Dept. Firefighter (retired) Receipt For: Aggregate Year-to-Date ▼ Primarv General 250.00 Other (specify) Full Name (Last, First, Middle Initial) c. Lee McDaris Date of Receipt Mailing Address 1108 Appalachee Dr. M = M / D 02 05 2014 Zip Code City State Transaction ID : SA11AI.34231 AL Huntsville 35801 Amount of Each Receipt this Period FEC ID number of contributing С 500.00 federal political committee. Name of Employer Occupation Crown Headache Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 1000.00 SUBTOTAL of Receipts This Page (optional).....

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

SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

Use separate schedule(s) for each category of the Detailed Summary Page FOR LINE NUMBER:

(check only one)

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	Detailed Summa		X 11a 11b 11c 12
Any information copied from such Reports or for commercial purposes, other than usin	I and Statements may not be sold or us ng the name and address of any politic	sed by any pe cal committee	13 14 15 16 17 erson for the purpose of soliciting contributions to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) FREEDOMWORKS FOR A	MERICA		
Full Name (Last, First, Middle Initial) A. Lee McDaris			Date of Receipt
Mailing Address 1108 Appalachee Dr.			05 02 2014
City	State Zip Code		Transaction ID : SA11AI.34232
Huntsville	AL 35801		Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		500.00
Name of Employer	Occupation		_
Crown Headache	Physician		
Receipt For:	Aggregate Year-to-Date ▼		
Primary General		4000.00	
Other (specify)		1000.00	
Full Name (Last, First, Middle Initial) B. Mrs. Marina McGee			Date of Receipt
Mailing Address 4720 E. Melinda Lane			05 05 _2014 _
City	State Zip Code		Transaction ID : SA11AI.34235
Phoenix	AZ 85050		Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		50.00
Name of Employer	Occupation		_
Retired	Retired		
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	250.00	
Full Name (Last, First, Middle Initial) C. Mr. Gregory McNece			Date of Receipt
Mailing Address PO Box 1830			05 16 _2014 _
City	State Zip Code		Transaction ID : SA11AI.34252
Davis	CA 95617		Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer	Occupation		-
Davisville Properties, Inc.	Vp		
Receipt For:	Aggregate Year-to-Date ▼		—
Primary General			
Other (specify)	7 7 7 7	250.00	
SUBTOTAL of Receipts This Page (option	al)		800.00

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

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

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ITEMIZED RECEIPTS	tor each category of the Detailed Summary Page	$\begin{array}{ c c c c c c c c } \hline X & 11a & 11b & 11c & 12 \\ \hline 13 & 14 & 15 & 16 & 17 \\ \hline \end{array}$
		y person for the purpose of soliciting contributions ittee to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) FREEDOMWORKS FOR AME	RICA	
Full Name (Last, First, Middle Initial) Mr. Gregory McNece Mailing Address PO Box 1830 City Davis FEC ID number of contributing federal political committee. Name of Employer Davisville Properties, Inc. Receipt For: Primary General Other (specify)	State Zip Code C 95617 Occupation Vp Aggregate Year-to-Date ▼ 5250.00	Date of Receipt 05 29 2014 Transaction ID : SA11AI.34251 Amount of Each Receipt this Period 5000.00
Full Name (Last, First, Middle Initial) B. Lena Merrell Mailing Address 1451 Windy Ln City Gulf Breeze FEC ID number of contributing federal political committee. Name of Employer Receipt For: Primary General Other (specify)	State Zip Code FL 32563 C Occupation Retired Aggregate Year-to-Date ▼ 800.00	Date of Receipt
Full Name (Last, First, Middle Initial) Mr. Loren J. Miller Mailing Address 1952 Scenic Gulf Dr Unit 205 City Miramar Beach FEC ID number of contributing federal political committee. Name of Employer Receipt For: Primary General Other (specify)	State Zip Code FL 32550 C Occupation Retired Aggregate Year-to-Date ▼ 2750.00	Date of Receipt
SUBTOTAL of Receipts This Page (optional)		► 5950.00

TOTAL This Period (last page this line number only).....
SCHEDULE A	(FEC Form 3X))
ITEMIZED REC	EIPTS	

Use separate schedule(s) for each category of the Detailed Sur V Dogo

FOR LINE NUMBER:

(check only one)

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	Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and S or for commercial purposes, other than using the	Estatements may not be sold or used by any a name and address of any political commit	person for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) FREEDOMWORKS FOR AMEI	RICA	
Full Name (Last, First, Middle Initial) Nancy Miller Mailing Address 132 Hyland Road City Monticello FEC ID number of contributing federal political committee. Name of Employer Receipt For: Primary General Other (specify)	State Zip Code AR 71655 C Occupation Occupation Retired Aggregate Year-to-Date ▼ 250.00	Date of Receipt 05 08 2014 Transaction ID : SA11AI.34304 Amount of Each Receipt this Period 100.00
Full Name (Last, First, Middle Initial) B. Nancy Miller Mailing Address 132 Hyland Road City	State Zip Code	Date of Receipt 05 08 2014 Transaction ID : SA11AI.34305
Monticello FEC ID number of contributing federal political committee.	AR 71655	Amount of Each Receipt this Period
Name of Employer Receipt For: Primary General Other (specify)	Retired Aggregate Year-to-Date ▼ 300.00	
Full Name (Last, First, Middle Initial) C. Nancy Miller		Date of Receipt
Mailing Address 132 Hyland Road City Monticello FEC ID number of contributing	State Zip Code AR 71655	Mmm / D / Y
federal political committee. Name of Employer Receipt For: Primary General Other (specify)	Occupation Retired Aggregate Year-to-Date ▼ 350.00	
SUBTOTAL of Receipts This Page (optional)		200.00

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

SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

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ITEMIZED RECEIPTS		Summary Page	X 11a	11b	11c	12 16	17
Any information copied from such Reports a or for commercial purposes, other than usin	nd Statements may not be so g the name and address of a	old or used by any p ny political committee	erson for the pur	pose of s	soliciting co	ontributi	ons
NAME OF COMMITTEE (In Full) FREEDOMWORKS FOR AN	IERICA						
A. Hull Name (Last, First, Middle Initial) Mailing Address 132 Hyland Road			Date of Re	eceipt		(Y	Y
City Monticello	State Zip Co AR 71655		05 Transact Amount of		SA11AI.343		
FEC ID number of contributing federal political committee.	C			7		50.	00
Name of Employer	Occupation Retired						
Receipt For: Primary General Other (specify)	Aggregate Year-to-Dat	400.00]				
Full Name (Last, First, Middle Initial) B. Martha Montez Mailing Address action Technical Minitial			Date of Re				
Mailing Address 84134 Tera Vista			05	03		014	Y
City Coachella	State Zip Co CA 92236	de	Transacti Amount of		SA11AI.343		
FEC ID number of contributing federal political committee.	C			1	7	40.0	00
Name of Employer Fersinius	Occupation Janitor						
Receipt For: Primary General Other (specify)	Aggregate Year-to-Dat	e ▼ 240.00]				
Full Name (Last, First, Middle Initial) C. Vicki Montgomery			Date of Re	eceipt			
Mailing Address 801 Old River Rd			05	D D 10		014	Y
City Naches	State Zip Co WA 98937		Transact Amount of		SA11AI.343		
FEC ID number of contributing federal political committee.	С			<u>, </u>		25.	00
Name of Employer	Occupation Retired						
Receipt For: Primary General Other (specify)	Aggregate Year-to-Dat	e ▼ 225.00]				
SUBTOTAL of Receipts This Page (optional	l)					115.0	00

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

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

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ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and State or for commercial purposes, other than using the nar		
NAME OF COMMITTEE (In Full) FREEDOMWORKS FOR AMERIC	A	
Naches FEC ID number of contributing federal political committee. Name of Employer Or Respire Form	State Zip Code WA 98937 C C ccupation etired ggregate Year-to-Date ▼ 250.00	Date of Receipt
Naches FEC ID number of contributing federal political committee. Name of Employer Or Respire Enr.	State Zip Code WA 98937 C C ccupation etired ggregate Year-to-Date ▼ 275.00	Date of Receipt 05 / 10 / 2014 Transaction ID : SA11AI.34332 Amount of Each Receipt this Period 25.00
Naches FEC ID number of contributing federal political committee. Name of Employer Or Respire Enr.	State Zip Code WA 98937 C C ccupation etired ggregate Year-to-Date ▼ 300.00	Date of Receipt 05 / 10 / 2014 Transaction ID : SA11AI.34333 Amount of Each Receipt this Period 25.00
SUBTOTAL of Receipts This Page (optional)		75.00

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

Use separate schedule(s) for each category of the

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	for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and Staten or for commercial purposes, other than using the nam		
NAME OF COMMITTEE (In Full) FREEDOMWORKS FOR AMERIC	A	
Naches FEC ID number of contributing federal political committee. Name of Employer Octoor Response Form	State Zip Code WA 98937 C cupation tired gregate Year-to-Date ▼ 325.00	Date of Receipt
Madison Hts FEC ID number of contributing federal political committee. Name of Employer Oc Re	State Zip Code MI 48071 C Incupation tired Igregate Year-to-Date ▼ 250.00	Date of Receipt
Victoria FEC ID number of contributing federal political committee. Name of Employer Info Requested Descript Entrice	State Zip Code TX 77904 C cupation o Requested Igregate Year-to-Date ▼ 400.00	Date of Receipt
SUBTOTAL of Receipts This Page (optional)		475.00

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

SCHEDULE A	(FEC	Form 3X)
ITEMIZED REC	EIPTS	6

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X 11a 11b

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			Detailed Summary Page		X 11a	1	11b		11c	12					
_					13	1	14		15	16		17			
	ny information copied from such Reports an for commercial purposes, other than using														
	NAME OF COMMITTEE (In Full) FREEDOMWORKS FOR AM	ERICA													
Α.	Full Name (Last, First, Middle Initial) Mrs. Elana Muir				Date o	f Rec	eipt								
	Mailing Address 167 French Broad Rd				м м 05	/	05			2014	Y				
	City	State	Zip Code		Trans	sactio	n ID	: SA	11AI.34	370					
	Hertford	NC	27944		Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.	С				,		_	л. Т	300	.00				
	Name of Employer	Occupation	1												
	Info Requested	Info Reque	sted												
	Receipt For:	Aggregate	Year-to-Date ▼												
	Primary General			11.											
	Other (specify)		300.00												
в.	Full Name (Last, First, Middle Initial) Mr. Terence Murphree				Date o	f Rec	eipt								
	Mailing Address 1330 Enclave Pkwy				м м 05	/	02			2014	Y				
	City	State	Zip Code		Trans	actio	n ID :	: SA	11AI.343	380					
	Houston	TX	77077		Amoun	t of E	ach I	Reco	eipt this	Period					
	FEC ID number of contributing federal political committee.	С				,		_	7	25000	.00				
	Name of Employer	Occupation	1												
	United Steel Structures	Constructio	n Exec.												
	Receipt For:	Aggregate	Year-to-Date 🔻												
	Primary General Other (specify) ▼		, 25000.00	1											
<u>с</u> .	Full Name (Last, First, Middle Initial) Mr. John Murray				Date o	f Rec	eipt								
	Mailing Address 3560 Bloomfield Club Dr				0 <u>5</u>	/	02			2014	Y				
	City	State	Zip Code		Trans	sactio	n ID	: SA	A11AI.34	382					
	Bloomfield Hills	MI	48301		Amoun	t of E	ach I	Rece	eipt this	Period					
	FEC ID number of contributing federal political committee.	С				,		_	7	500	.00				
	Name of Employer	Occupation Retired	1												
	Receipt For:		Voar to Dato	-											
	Primary General	Ayyreyate	Year-to-Date ▼												
	Other (specify)		500.00												
5	UBTOTAL of Receipts This Page (optional)							_		25800.	00	٦			

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SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

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		Detailed Summary			11a 13		1b 4	11	lc	12 16	 1	17
Any information copied from such Reports and or for commercial purposes, other than using								f solic	iting co	ntributi	ions	
NAME OF COMMITTEE (In Full) FREEDOMWORKS FOR AMI	ERICA											
Full Name (Last, First, Middle Initial) Dave Napier Mailing Address 1012 W Bella Casa Dr City Pueblo West FEC ID number of contributing federal political committee. Name of Employer Dave Napier Receipt For: Primary General Other (specify) ▼	State CO C Occupation Restaurant Aggregate	Year-to-Date ▼	250.00			action	י 31 ו וD :	: SA1			У 00]
Full Name (Last, First, Middle Initial) Odd Lamps, LLC Mailing Address 12076 92nd Ave N City Maple Grove FEC ID number of contributing federal political committee. Name of Employer Receipt For: Primary General Other (specify)	State MN C Occupation Aggregate	Year-to-Date ▼	750.00		Amount	action t of Ea	09 1 ID : ach F	SA1 Receip	20 1AI.271 Dot this F		У 00]
Full Name (Last, First, Middle Initial) Marlene Olsen Mailing Address 1050 Fleetwood Drive City San Jose FEC ID number of contributing federal political committee. Name of Employer N/A Receipt For: Primary General Other (specify)	State CA C Occupation Disabled Aggregate	Year-to-Date ▼	400.00			actior	16 16 n ID :	: SA1			9 00]
SUBTOTAL of Receipts This Page (optional).				.		. ,			,	1900.0	00]

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SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

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		Detailed Summary Pa		>	< 11a 13		11b 14		1c	12 16		7
Any information copied from such Reports and S or for commercial purposes, other than using the					for the		pose o	f solic	citing co	ontributi	ions	1
NAME OF COMMITTEE (In Full) FREEDOMWORKS FOR AMER	RICA											
Full Name (Last, First, Middle Initial) David Peterick Mailing Address 422 Ne Camelot Dr. City Port St. Lucie FEC ID number of contributing federal political committee. Name of Employer Receipt For: Primary General Other (specify) ▼	State FL Occupation Retired Aggregate	Year-to-Date ▼	0.00		Date or 05 Trans Amoun	acti	01	: SA1	1AI.345		Ч 00]
Full Name (Last, First, Middle Initial) Ms. Joann Peterson Mailing Address PO Box 1392 City East Dennis FEC ID number of contributing federal political committee. Name of Employer Joann Peterson Receipt For: Primary General Other (specify) ▼	State MA C Occupation Homemake Aggregate	r Year-to-Date ▼	D.00		Date or 05 Trans Amoun	/ acti	02 on ID	2 : SA 1	1AI.345		Y 00]
Full Name (Last, First, Middle Initial) Donald Randolph Mailing Address 236 S Santa Cruz Ave. Ste D City Modesto FEC ID number of contributing federal political committee. Name of Employer Donald Randolph Receipt For: Primary General Other (specify)	State CA Ccupation Occupation Owner Aggregate	Year-to-Date ▼	0.00		Date or 05 Trans Amoun	/ sact	ion ID	1 : SA1	1AI.346		У 00]
SUBTOTAL of Receipts This Page (optional)			····· ►				,		,	550.0	00]

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

Use separate schedule(s) for each category of the

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X	-		11b	11c	12	
Any information copied from such Reports and a or for commercial purposes, other than using th									
NAME OF COMMITTEE (In Full) FREEDOMWORKS FOR AME									
Full Name (Last, First, Middle Initial) Dr. Thomas Rathmann Mailing Address 339 E Greens Dr City Baton Rouge FEC ID number of contributing federal political committee. Name of Employer Thomas Rathmann Receipt For: Primary General Other (specify) ▼	State LA C Occupation Chiropracto Aggregate				sacti	13		nis Perioc	_
Full Name (Last, First, Middle Initial) Tom Remmey Mailing Address 970 Cove Point Ln. City Tega Cay FEC ID number of contributing federal political committee. Name of Employer Receipt For: Primary General Other (specify) ▼	State SC C Occupation Retired Aggregate	Zip Code 29708 Year-to-Date ▼ 310.00			sacti	16 on ID :		nis Perioc	2.00
Full Name (Last, First, Middle Initial) Tom Remmey Mailing Address 970 Cove Point Ln. City Tega Cay FEC ID number of contributing federal political committee. Name of Employer Receipt For: Primary General Other (specify) ▼	State SC C Occupation Retired Aggregate	Zip Code 29708 Year-to-Date ▼ 345.00			sact	28 ion ID		nis Perioc	_
SUBTOTAL of Receipts This Page (optional)						, .		235	5.00

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

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

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		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and S or for commercial purposes, other than using the			
NAME OF COMMITTEE (In Full) FREEDOMWORKS FOR AME	RICA		
Full Name (Last, First, Middle Initial) Patricia Rodman Mailing Address 5379 East Lake Road City Conesus FEC ID number of contributing federal political committee. Name of Employer Diocese of Rochester Receipt For: Primary General Other (specify) ▼		Zip Code 14435 Religious Education Year-to-Date ▼ 250.00	Date of Receipt
Full Name (Last, First, Middle Initial) Stephen Ronan Mailing Address 1178 W. Purchase Rd City Southbury FEC ID number of contributing federal political committee. Name of Employer Receipt For: Primary General Other (specify) ▼	State CT C Occupation Retired Aggregate	Zip Code 06488 Year-to-Date ▼ 300.00	Date of Receipt
Full Name (Last, First, Middle Initial) Mr. David Rupp Mailing Address 10193 Sage Creek Dr City Galena FEC ID number of contributing federal political committee. Name of Employer David Rupp Receipt For: Primary General Other (specify)	State OH C Occupation Cpa Aggregate	Zip Code 43021 Year-to-Date ▼ 1500.00	Date of Receipt
SUBTOTAL of Receipts This Page (optional)			1075.00

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ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and S or for commercial purposes, other than using the		
NAME OF COMMITTEE (In Full) FREEDOMWORKS FOR AME	RICA	
Full Name (Last, First, Middle Initial) Mr. John Santner Mailing Address 5399 Playa Vista Dr E307 City Playa Vistaq FEC ID number of contributing federal political committee. Name of Employer Retired Receipt For: Primary General Other (specify)	State Zip Code C 90094 C Occupation Retired Aggregate Year-to-Date ▼ 220.00 220.00	Date of Receipt
Full Name (Last, First, Middle Initial) B. Ms. Lorene Saruwatari Mailing Address 512 Launa Ln City Arroyo Grande FEC ID number of contributing federal political committee. Name of Employer Coastal Phoenix Inc Receipt For: Primary General Other (specify)	State Zip Code C 93420 C Occupation Bookeeper 4000000000000000000000000000000000000	Date of Receipt 05 06 2014 Transaction ID : SA11AI.34772 Amount of Each Receipt this Period 100.00
Full Name (Last, First, Middle Initial) Ms. Lorene Saruwatari Mailing Address 512 Launa Ln City Arroyo Grande FEC ID number of contributing federal political committee. Name of Employer Coastal Phoenix Inc Receipt For: Primary General Other (specify)	State Zip Code C 93420 C Occupation Bookeeper Aggregate Year-to-Date ▼ 9400.00 9400.00	Date of Receipt 05 06 2014 Transaction ID : SA11AI.34773 Amount of Each Receipt this Period 100.00
SUBTOTAL of Receipts This Page (optional)		225.00

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

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

(check only one)

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ITEMIZED RECEIPTS	for each category of the Detailed Summary Pag	
		any person for the purpose of soliciting contributions nmittee to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) FREEDOMWORKS FOR AME		
Full Name (Last, First, Middle Initial) Ms. Lorene Saruwatari Mailing Address 512 Launa Ln City Arroyo Grande FEC ID number of contributing federal political committee. Name of Employer Coastal Phoenix Inc Receipt For: Primary General Other (specify) ▼	State Zip Code CA 93420 C Occupation Bookeeper Aggregate Year-to-Date ▼ 9600.0	Date of Receipt
Full Name (Last, First, Middle Initial) Ms. Lorene Saruwatari Mailing Address 512 Launa Ln City Arroyo Grande FEC ID number of contributing federal political committee. Name of Employer Coastal Phoenix Inc Receipt For: Primary General Other (specify) ▼	State Zip Code C 93420 C Occupation Bookeeper Aggregate Year-to-Date ▼	Date of Receipt Date of Receipt Control of
Full Name (Last, First, Middle Initial) Ms. Lorene Saruwatari Mailing Address 512 Launa Ln City Arroyo Grande FEC ID number of contributing federal political committee. Name of Employer Coastal Phoenix Inc Receipt For: Primary General Other (specify) ▼	State CA Zip Code 93420 C Occupation Bookeeper Aggregate Year-to-Date ▼ 10220.	Date of Receipt 05 06 2014 Transaction ID : SA11AI.34776 Amount of Each Receipt this Period 120.00 00
SUBTOTAL of Receipts This Page (optional)		820.00

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

SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a	11b 11c	12	<u> </u>
Any information copied from such Reports ar or for commercial purposes, other than using						
NAME OF COMMITTEE (In Full) FREEDOMWORKS FOR AN						
Full Name (Last, First, Middle Initial) A. Steven Schumacher Mailing Address 522 County Road 600n City	State	Zip Code	Date of Re	ion ID : SA11AI	2014 .34817	Ŷ
Neoga FEC ID number of contributing federal political committee.	C	62447	Amount of	Each Receipt th		.00
Name of Employer Effingham Taxi Receipt For: Primary General Other (specify) v	Occupation Business Ov Aggregate	vner Year-to-Date ▼ 250.00	1			
Full Name (Last, First, Middle Initial) B. Robert Serritella Mailing Address 5 Campden Lane			Date of Re	D D / Y 19	2014	Ŷ
City Commack FEC ID number of contributing federal political committee.	State NY	Zip Code 11725		on ID : SA11AI. Each Receipt tl		.00
Name of Employer Info Requested Receipt For:	Occupation Info Request		_			
Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 225.00	1			
C. Full Name (Last, First, Middle Initial) Ms. Katherine Siller Mailing Address 3010 River Forest Dr			Date of Re	D D / Y		Y
City Richmond	State TX	Zip Code 77406		02 ion ID : SA11AI Each Receipt tl		
FEC ID number of contributing federal political committee.	С			5 5	200	.00
Name of Employer	Occupation Homemaker		_			
Receipt For: Primary General Other (specify)	Aggregate `	Year-to-Date ▼ 300.00	1			
SUBTOTAL of Receipts This Page (optional	l)				325.	00

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TOTAL This Period (last page this line number only)			7				

SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

Use separate schedule(s) for each category of the Detailed Summary Page FOR LINE NUMBER:

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		Detailed Summary Page	$\begin{array}{ c c c c c c c c } \hline X & 11a & 11b & 11c & 12 \\ \hline 13 & 14 & 15 & 16 \\ \hline \end{array}$					1	7		
Any information copied from such Reports and s or for commercial purposes, other than using th				for the		pose o	f soliciting		ntribut	tions	<u>,</u>
NAME OF COMMITTEE (In Full) FREEDOMWORKS FOR AME	RICA										
Full Name (Last, First, Middle Initial) Frank Slavik Mailing Address 6232 Durban Dr City Galloway FEC ID number of contributing federal political committee. Name of Employer Frank Slavik Receipt For: Primary General Other (specify)	State OH C Occupation Restaurant Aggregate				/ acti	04		20 .348	Period	.00]
Full Name (Last, First, Middle Initial) Frank Slavik Mailing Address 6232 Durban Dr City	State	Zip Code		Date of	1	16)14	Ŷ	
Galloway FEC ID number of contributing federal political committee. Name of Employer Frank Slavik Receipt For: Primary General Other (specify) ▼	OH C Occupation Restaurante	43119]				Receipt th			00]
Full Name (Last, First, Middle Initial) Mrs. Margaret K. Smith Mailing Address 9732 Lindsey Blake Ln City Great Falls FEC ID number of contributing federal political committee. Name of Employer Receipt For: Primary General Other (specify)	State VA C Occupation Retired Aggregate	Zip Code 22066 Year-to-Date ▼ 350.00]		/ sact	ion ID		20 . 348		ОО]
SUBTOTAL of Receipts This Page (optional)	· · · · · · · · · · · · · · · · · · ·		▶			7			200.	00]

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

Use separate schedule(s) for each category of the

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207

ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	×	-		1b	11c	12		
Any information copied from such Reports and S					purpo				
or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) FREEDOMWORKS FOR AMER		ddress of any political committee			ntribut	lions	from suc		.1ee.
Full Name (Last, First, Middle Initial) Mrs. Wendy Snell Mailing Address 2 Thornblade Court City Durham FEC ID number of contributing federal political committee. Name of Employer Retired Receipt For: Primary General Other (specify)	State NC C Occupation Retired Aggregate	Zip Code 27712 Year-to-Date ▼ 1500.00			/ sactio	07	SA11AI	nis Period	d 0.00
Full Name (Last, First, Middle Initial) Karen Stokes Mailing Address 117 Osteen Hill Rd City Pelzer FEC ID number of contributing federal political committee. Name of Employer Karen Stokes Receipt For: Primary General Other (specify) ▼	State SC C Occupation Realtor Aggregate	Zip Code 29669 Year-to-Date ▼ 235.00			action	30 n ID :	SA11AI.	nis Perioo	y d 0.00
Full Name (Last, First, Middle Initial) Ms. Patty Stover Mailing Address 159 Denny Way Apt 509 City Seattle FEC ID number of contributing federal political committee. Name of Employer Gladys Rubinstein Receipt For: Primary General Other (specify) ▼	State WA C Occupation Bookeeper Aggregate	Zip Code 98109 Year-to-Date ▼ 209.00			/ sactio	05 05	SA11AI	nis Perioo	_
SUBTOTAL of Receipts This Page (optional)								1209	9.00

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

SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

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

FOR LINE NUMBER:

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TIEWIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a	11b	11c	12	17
Any information copied from such Reports a or for commercial purposes, other than using	nd Statements may g the name and ac	y not be sold or used by any p ldress of any political committee	erson for the	purpose (of soliciting	contribut	tions
NAME OF COMMITTEE (In Full) FREEDOMWORKS FOR AN	IERICA						
A. Full Name (Last, First, Middle Initial) Mr. Frederick Strehler Mailing Address PO Box 658			M = 1	of Receipt		Y Y	Y
City Naalehu	State HI	Zip Code 96772		saction ID	9 : SA11AI.3 Receipt thi		
FEC ID number of contributing federal political committee.	С				7	250	.00
Name of Employer Info Requested Receipt For: Primary General Other (specify)	Occupation Info Request Aggregate	ted ⁄ear-to-Date ▼ 250.00]				
B. Full Name (Last, First, Middle Initial) Mailing Address 2700 Shady Hill Ct			Date o	of Receipt	D / Y	YY	Y
City	State	Zip Code	05 	1 saction ID	6 :SA11AI.3	2014 4 992	
Grapevine FEC ID number of contributing federal political committee.	С	76051	Amour	nt of Each	Receipt thi	s Period 500.	.00
Name of Employer Southwest Airlines	Occupation Pilot						
Receipt For: Primary General Other (specify) ▼	Aggregate	/ear-to-Date ▼ 1000.00]				
Full Name (Last, First, Middle Initial) C. Lynne Swaine			Date of	of Receipt			
Mailing Address 10475 Manitou Beach Dr	Ne		05		D / Y 95	y y 2014	Y
City Bainbridge Island	State WA	Zip Code 98110			: SA11AI.3 Receipt thi		
FEC ID number of contributing federal political committee.	С					75	.00
Name of Employer	Occupation Retired						
Receipt For: Primary General Other (specify) ▼	Aggregate	/ear-to-Date ▼ 275.00]				
SUBTOTAL of Receipts This Page (optiona	l)					825.	00

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

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

(check only one)

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ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a 11b 11c 12
		13 14 15 16 17 ny person for the purpose of soliciting contributions nittee to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) FREEDOMWORKS FOR AMER		
Full Name (Last, First, Middle Initial) Ms. Irene Talley Mailing Address 11357 Rick Circle City South Jordan FEC ID number of contributing federal political committee. Name of Employer Receipt For: Primary General Other (specify) ▼	State Zip Code UT 84095 C Occupation Retired Aggregate Year-to-Date ▼ 300.00	Date of Receipt 05 01 2014 Transaction ID : SA11AI.35024 Amount of Each Receipt this Period 300.00
Full Name (Last, First, Middle Initial) Sean Thomas Mailing Address 101 Whitney Ct City Aledo FEC ID number of contributing federal political committee. Name of Employer Oilfield Surplus Receipt For: Primary General Other (specify) ▼	State Zip Code TX 76008 C Occupation Owner Aggregate Year-to-Date ▼ 300.00	Date of Receipt
Full Name (Last, First, Middle Initial) Sean Thomas Mailing Address 101 Whitney Ct City Aledo FEC ID number of contributing federal political committee. Name of Employer Oilfield Surplus Receipt For: Primary General Other (specify) ▼	State Zip Code TX 76008 C Occupation Owner Aggregate Year-to-Date ▼ 400.00	Date of Receipt 05 16 2014 Transaction ID : SA11AI.35056 Amount of Each Receipt this Period 100.00
SUBTOTAL of Receipts This Page (optional)		500.00

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

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

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PAGE 53 OF

TEMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and S or for commercial purposes, other than using the		y person for the purpose of soliciting contributions ittee to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) FREEDOMWORKS FOR AME	RICA	
Full Name (Last, First, Middle Initial) Ralph Tucker Mailing Address 2539 Seven Pines Road City Greenville FEC ID number of contributing federal political committee. Name of Employer Ralph Tucker Receipt For: Primary General Other (specify) ▼	State Zip Code NC 27834 C Occupation Farmer Aggregate Year-to-Date ▼ Aggregate Year-to-Date ▼ 250.00	Date of Receipt
Full Name (Last, First, Middle Initial) Mr. John Vaughn Mailing Address 170 Silver Fox City Marshall FEC ID number of contributing federal political committee. Name of Employer Info Requested Receipt For: Primary General Other (specify) ▼	State Zip Code TX 75670 C Occupation Info Requested Aggregate Year-to-Date ▼	Date of Receipt
Full Name (Last, First, Middle Initial) Patricia Verderese Mailing Address 14 Westchester Drive City Auburn FEC ID number of contributing federal political committee. Name of Employer Receipt For: Primary General Other (specify) ▼	State Zip Code MA 01501 C Occupation Retired Aggregate Year-to-Date ▼	Date of Receipt
SUBTOTAL of Receipts This Page (optional)		

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

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207

ITEMIZED RECEIPTS	for each categ Detailed Sum		X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and S or for commercial purposes, other than using the			
NAME OF COMMITTEE (In Full) FREEDOMWORKS FOR AME	RICA		
Full Name (Last, First, Middle Initial) Patricia Verderese Mailing Address 14 Westchester Drive City Auburn FEC ID number of contributing federal political committee. Name of Employer Receipt For: Primary General Other (specify) ▼	State MA Zip Code 01501 C Occupation Occupation Aggregate Aggregate Year-to-Date ▼	500.00	Date of Receipt
Full Name (Last, First, Middle Initial) Mrs. Linda Verhey Mailing Address 4170 N Marine Dr City Chicago FEC ID number of contributing federal political committee. Name of Employer Info Requested Receipt For: Primary General Other (specify) ▼	State Zip Code IL 60613 C Occupation Info Requested Aggregate Year-to-Date ▼	210.00	Date of Receipt
Full Name (Last, First, Middle Initial) Theresa Vinas Mailing Address 50 Harbour Drive South City Ocean Ridge FEC ID number of contributing federal political committee. Name of Employer Receipt For: Primary General Other (specify) ▼	State Zip Code FL 33435 C Occupation Rn Aggregate Year-to-Date ▼	250.00	Date of Receipt
SUBTOTAL of Receipts This Page (optional)			335.00

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

SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

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TIEMIZED RECEIPTS		each category of the tailed Summary Page	X 1	1a 3	11b	11c	12	17
Any information copied from such Reports an or for commercial purposes, other than using		erson for	the p	urpose c	of soliciting	g contribu	itions	
NAME OF COMMITTEE (In Full) FREEDOMWORKS FOR AM	ERICA							
Full Name (Last, First, Middle Initial) A. Mr. Larry Walsh Mailing Address 2321 Saint Anthonys PI City Sioux City FEC ID number of contributing federal political committee. Name of Employer	IA 5	ip Code 51108		05 ansa			nis Period	
Info Requested Receipt For: Primary General Other (specify)	Aggregate Year-1	to-Date ▼ 300.00]					
Full Name (Last, First, Middle Initial) B. Mr. Ed Whitesides Mailing Address 7719 Barkers Bend Drive City	State Z	ip Code	M	05	Receipt		2014 25234	Y
Murrayville FEC ID number of contributing federal political committee. Name of Employer Receipt For:		30564				Receipt th	nis Period	0.00
Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial)		250.00]					
C. Mr. Scott Wilcox Mailing Address 3618 Rampart St City Bakersfield FEC ID number of contributing federal political committee. Name of Employer Heather Wilcox Receipt For: Primary General Other (specify) ▼			T	05 ransa			nis Period	
SUBTOTAL of Receipts This Page (optional)							500	.00

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

SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

Use separate schedule(s) for each category of the Detailed Summary Page FOR LINE NUMBER:

(check only one)

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	Detailed Summary Page	\sim $
Any information copied from such Reports an or for commercial purposes, other than using	d Statements may not be sold or used by a the name and address of any political com	13 14 15 16 17 any person for the purpose of soliciting contributions imittee to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) FREEDOMWORKS FOR AM	IERICA	
Full Name (Last, First, Middle Initial) Mr. Scott Wilcox Mailing Address 3618 Rampart St City Bakersfield FEC ID number of contributing federal political committee. Name of Employer Heather Wilcox Receipt For: Primary General Other (specify) ▼	State Zip Code C 93306 C Occupation Personal Caregiver Aggregate Year-to-Date ▼ 350.0	Date of Receipt
Full Name (Last, First, Middle Initial) B. Ms. Joan Winchell Mailing Address 8978 Spanish Ridge Avenu	ue Suite 10 State Zip Code	Date of Receipt
Las Vegas FEC ID number of contributing federal political committee. Name of Employer	NV 89148	Amount of Each Receipt this Period
Receipt For: Primary General Other (specify) ▼	Retired Aggregate Year-to-Date ▼ 5000.00	0
C. Full Name (Last, First, Middle Initial) Mr. Earle Wymer Mailing Address 3531 Hanover Ave	State Zip Code	Date of Receipt
Richmond FEC ID number of contributing federal political committee.	VA 23221	Transaction ID : SA11AI.35306 Amount of Each Receipt this Period 300.00
Name of Employer Receipt For: Primary General Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 900.0	

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

SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

FOR LINE NUMBER:

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TEMIZED RECEIPTS	Detailed Sur		X 1	1a 3	11b 14	11c		12 16	1	7
Any information copied from such Reports an or for commercial purposes, other than using	d Statements may not be sold of the name and address of any p	or used by any p political committee	erson for e to solici	the p	urpose c ributions	of soliciti from su	ng con Jch con	tribution nmitte	ons e.	
NAME OF COMMITTEE (In Full) FREEDOMWORKS FOR AM	IERICA									
Full Name (Last, First, Middle Initial) Laura Zulueta Mailing Address 2008 Greyhawk Place City Apex FEC ID number of contributing federal political committee. Name of Employer Receipt For: Primary General Other (specify) ▼	State NC Zip Code 27539 C Occupation Homemaker Aggregate Year-to-Date ▼	600.00		05 ansa	Receipt / 17 ction ID of Each	7 : SA114	20 AI.3533	5	00]
Full Name (Last, First, Middle Initial) Aniling Address City FEC ID number of contributing federal political committee.	State Zip Code		M	M	Receipt	D / Receipt	this Pe	əriod	Ý	
Name of Employer Receipt For: Primary General Other (specify) ▼	Occupation Aggregate Year-to-Date ▼									
Full Name (Last, First, Middle Initial) Mailing Address			_	e of I	Receipt	D /	Y Y	Y	Ŷ	
City FEC ID number of contributing federal political committee. Name of Employer Receipt For: Primary General Other (specify) ▼	State Zip Code C Occupation Aggregate Year-to-Date		Am	ount d	of Each	Receipt	this Pe	₽riod]
SUBTOTAL of Receipts This Page (optiona)							250.0	0	1

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

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SCHEDULE A	(FEC	Form	3X)
ITEMIZED REC	EIPTS	;	

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

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ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	11a 11b 11c 12 13 14 X 15 16 17
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	A	
Washington FEC ID number of contributing federal political committee. Name of Employer	State Zip Code DC 20001 C C C C C C C C C C C C C C C C C C C	Date of Receipt 05 01 2014 Transaction ID : SA15.35580 Amount of Each Receipt this Period 96700.94 Refund-Overpayment of Fundraising Costs April 2014
Full Name (Last, First, Middle Initial) Mailing Address City	State Zip Code	Date of Receipt
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period
Receipt For: A Primary General Other (specify) ▼	ggregate Year-to-Date ▼	
Full Name (Last, First, Middle Initial) C. Mailing Address		Date of Receipt
City	State Zip Code	Amount of Each Receipt this Period
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Other (specify) ▼ SUBTOTAL of Receipts This Page (optional)		96700.94

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

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S	CHEDULE B (FEC Form 3X)			F	OR	LINE I	NUM	BER	:			PA	GE	59 (DF 207		
IT	EMIZED DISBURSEMENTS		Use separate schedule(s) for each category of the		hecl	k only	one)						_				
			Summary Page			21b 27		22 28a		23 28b		24 28c	-	25 29	26 30b		
	ny information copied from such Reports and St for commercial purposes, other than using the					persc	n for	the		pose		soliciting		ontribu	tions		
\setminus	NAME OF COMMITTEE (In Full)																
$ \rangle$	FREEDOMWORKS FOR AMER	RICA															
<u>ب</u>	Full Name (Last, First, Middle Initial)																
Α.	Acxiom									sburse		_					
	Mailing Address 4057 Collections Center Dr.						05 30 2014										
	City Chicago	Zip Code 60693				Transaction ID : SB21B.35356											
	Purpose of Disbursement	IL	00093	_	-												
	PAC List Rental			C	003		An	nour	nt of	Each	Di	sburser	nent	t this	Period		
				Cate T	egor ype	ry/				7		- 7		7696	6.47		
	Office Sought: House Disbu	rsement For: Primary Other (spe	General cify) ▼														
	State: District:																
в.	Full Name (Last, First, Middle Initial)									sburse							
Mailing Address 4057 Collections Center Dr.							05 30 2014										
	City Chicago	State IL	Zip Code 60693				Transaction ID : SB21B.35359										
	Purpose of Disbursement PAC List Rental				003		Δn	nour	nt of	Fach	i	churcor	noni	t this	Period		
	Candidate Name			Cate		ry/	Amount of Each Disbursement this Period 2605.29										
	Office Sought: House Disbu	sbursement For: Primary General Other (specify) ▼															
_	State: District:																
C.	Full Name (Last, First, Middle Initial)								_	sburse							
	Mailing Address 4057 Collections Center Dr.						N	05		D	30	/ Y		014	Y		
	City Chicago	State IL	Zip Code 60693				٦	ran	sact	tion ID	D : \$	SB21B.	353	61			
	Purpose of Disbursement PAC List Rental			0	003		•			F I.	D .	- 1			Devie		
	Candidate Name			Cate	-	ry/	Amount of Each Disbursement this Period 13529.09										
	Senate President	rsement For: Primary Other (spe	General ccify) ▼							7							
	State: District:						_	_	_	_	_		_				
⊢	UBTOTAL of Disbursements This Page (option	·								,				23830	.85		
ľΤ	OTAL This Period (last page this line number of	only)								7							

	CHEDULE B (FEC Form 3X)	Use separate schedule(s)					:			PA	GE	60	OF 207
IT	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(c		k only 21b 27	one) 22 28a		23 28b		24 28c		25 29	26 30b
	y information copied from such Reports and State for commercial purposes, other than using the nar												
	NAME OF COMMITTEE (In Full) FREEDOMWORKS FOR AMERIC	A											
Α.	Full Name (Last, First, Middle Initial) American Express-Merchant					Date o	f Di	sburse			(Y	Ý	Y
	Mailing Address PO Box 360001					05			31			014	
	City Ft. Lauderdale Purpose of Disbursement	State Zip Code FL 33336				Trans	sact	ion ID)::	SB21B.	353	63	
	Merchant Fees		0	01		Amoun	t of	Each	Di	isburse	men	t this	Period
	Candidate Name		Cate T	egoi ype	ry/			7				4	0.64
	Office Sought: House Disburse Senate President	ment For: Primary General Other (specify) ▼											
	State: District:												
B.	Full Name (Last, First, Middle Initial) Anybill					Date o	_	sburse				Y	V
	Mailing Address 1801 Pennsylvania Ave Suite 700					05			31			014	
	City Washington	State Zip Code DC 20006				Trans	sact	tion ID	D:	SB21B	.353	65	
	Purpose of Disbursement Accounting Services		C	001		Amoun	t of	Each	Di	isburse	men	t this	Period
	Candidate Name		Cate T	egoi ype				,		. ,		32	3.00
	Office Sought: House Disburse Senate President	ment For: Primary General Other (specify) ▼											
_	State: District:												
C.	Full Name (Last, First, Middle Initial)					Date o	f Di	sburse				Y	Y
	Mailing Address 8005 Tysons Corner Center Ste. 3L					05			16	Ĺ		014	
	City McLean Purpose of Disbursement	State Zip Code VA 22102				Trans	sact	ion ID):	SB21B	.353	67	
	Cell Phone Candidate Name		Cate	01 egoi ype	ry/	Amoun	t of	Each	Di	isburse	men		Period 2.00
	Office Sought: House Disburse Senate President State: District:	ment For: Primary General Other (specify) ▼		y PG				7					
	UBTOTAL of Disbursements This Page (optional).											47	5.64
⊢	OTAL This Period (last page this line number only						Ì	7			Ì		

	CHEDULE B (FEC Form 3X)		voto ochodula(-)									PAG	ìΕ	61 (DF 2	:07
IT	EMIZED DISBURSEMENTS	for each	arate schedule(s) category of the	(c		k only 21b	one	e) 22		23		24		25		26
			Summary Page		<u> </u>	210	$\left - \right $	22 28a	-	23 28b		24 28c	-	25 29		26 30b
	y information copied from such Reports and Stater for commercial purposes, other than using the nar															
\setminus	NAME OF COMMITTEE (In Full)															
	FREEDOMWORKS FOR AMERIC	A														
Α.	Full Name (Last, First, Middle Initial) Color Craft						D	Date of	f Di	sburse	emer	nt				
	Mailing Address 22645 Sally Ride Drive						I	м м 05	/	D 0	9	/ Y)14	Y	
	City Sterling	State VA	Zip Code 20164					Trans	act	ion ID	: SE	B21B.3	537	71		
	Purpose of Disbursement PAC Direct Mail Fundraising		20104	C)03		А	mount	t of	Each	Dist	bursem	ient	this	Perioo	d
	Candidate Name			Cate	egoi ype	ry/	ſ						-	18897		٦
	Office Sought: House Disburser Senate President	ment For: Primary Other (spec	General		<u>, , , , , , , , , , , , , , , , , , , </u>											
	State: District:		•													
B.	Full Name (Last, First, Middle Initial) Direct Mail Marketing Group						_	Date of	f Di							
	Mailing Address 22780 Indian Creek Dr., Ste. 100							05	1	2	23	/ Y)14	Y	
	City Dulles	State VA	Zip Code 20166					Trans	act	ion ID) : SI	B21B.3	8537	73		
	Purpose of Disbursement Printing/Postage			(003		A	mount	t of	Each	Dist	bursem	ent	this	Period	ł
	Candidate Name			Cate	egoi ype	ry/				,		7		216	2.37	
	Senate President	ment For: Primary Other (spec	General cify) ▼													
	State: District:															
C.	Full Name (Last, First, Middle Initial) Direct Mail Processors, Inc.							Date of	f Di	sburse			V	Y	V	
	Mailing Address 1150 Conrad Ct.						l	05	ĺ		6	7)14	Ť	
	Hagerstown	State MD	Zip Code 21740					Trans	act	ion ID) : SI	B21B.3	537	75		
	Purpose of Disbursement Caging				001										_	
	Candidate Name			Cate	-	ry/	A	mount	t of	Each	Dist	bursem	ient		Period 5.11	1
	Senate President	ment For: Primary Other (spec	General cify) ▼							,						
_	State: District:															
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	CHEDULE B (FEC Form 3X)	Use sena	arate schedule(s)				NUMBE	R:			PA	GE	62	OF 207
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	ny information copied from such Reports and State for commercial purposes, other than using the nar													
	NAME OF COMMITTEE (In Full) FREEDOMWORKS FOR AMERIC	A												
Α.	Full Name (Last, First, Middle Initial) Embassy Partnership						Date	-)isbur	ser		()	Y	Y
	Mailing Address 4010 Dupont Circle Ste. 700						0	5		23			014	
	City Louisville Purpose of Disbursement	State KY	Zip Code 40207				Tra	nsac	tion	D	: SB21B	.353	77	
	Rent			C	01		Amo	unt o	of Eac	h I	Disburse	men	t this	Period
	Candidate Name			Cate T	egoi ype	ry/			7				202	5.00
	Office Sought: House Disburse Senate President Image: Senate	ment For: Primary Other (spec	General cify) ▼											
_	State: District: Full Name (Last, First, Middle Initial)													
В.	Fedex-Shipping						Date)isbur	ser			Y	Y
	Mailing Address 13155 Noel Rd.							5		27			014	
	Dallas	State TX	Zip Code 75240				Tra	insac	ction	ID	: SB21B	.353	79	
	Purpose of Disbursement Shipping			C	001		Amo	unt o	of Eac	h I	Disburse	men	t this	Period
	Candidate Name			Cate T	egoi ype				,				13	3.40
	Office Sought: House Disburse Senate President State: District:	ment For: Primary Other (spec	General cify) ▼											
<u>с</u> .	Full Name (Last, First, Middle Initial) Foley & Lardner LLP						Date	of D	Disbur	sei		<i>,</i>	Ý	×.
	Mailing Address 888 16th St., NW #700						0	5		16			014	
	City Washington Purpose of Disbursement	State DC	Zip Code 20006				Tra	insac	tion	ID	: SB21B	.353	81	
	Candidate Name			Cate	01 egoi ype	ry/	Amo	unt o	of Eac	h I	Disburse	men	t this 1376	_
	Office Sought: House Disburse Senate President State: District:	ment For: Primary Other (spec	General cify) ▼		,				5					
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	ny information copied from such Reports and Stat for commercial purposes, other than using the n											
	NAME OF COMMITTEE (In Full) FREEDOMWORKS FOR AMERI	CA										
Α.	Full Name (Last, First, Middle Initial) Freedomworks, Inc.						Date of	f Dis	burse		Y Y	Y
	Mailing Address 400 N Capitol St., NW Suite 735						05		30		2014	_
	City Washington	State DC	Zip Code 20001				Trans	actio	on ID	: SB21B.	35355	
	Purpose of Disbursement In-kind - Travel Candidate Name						Amoun	t of I	Each	Disburser	nent this	Period
		ement For:		Cate T	egor ype	ry/	L		,		31	9.80
	Senate President	Primary Other (spe	General cify) ▼									
<u> </u>	State: District: Full Name (Last, First, Middle Initial) Freedomworks, Inc.						Date of	f Dis	burse	ment		
	Mailing Address 400 N Capitol St., NW Suite 735						M M 05	/	3		2014	Y
	City Washington	State DC	Zip Code 20001				Trans	acti	on ID	: SB21B.	35518	
	Purpose of Disbursement In-kind - Travel						Amoun	t of I	Each	Disburser	nent this	Period
	Candidate Name			Cate T	egor ype	ry/			,	,	1382	3.55
	Office Sought: House Disburs Senate President State: District:	ement For: Primary Other (spe	General cify) ▼									
с.	Full Name (Last, First, Middle Initial) Freedomworks, Inc.						Date of	f Dis				
	Mailing Address 400 N Capitol St., NW Suite 735						м м 05	/	30		2014	Y
	City Washington Purpose of Disbursement	State DC	Zip Code 20001				Trans	acti	on ID	: SB21B.	35519	
	Adust for In Kinds for IE's Candidate Name			Cate	egor ype		Amoun	t of I	Each	Disburser	nent this -1382	
	Office Sought: House Disburs Senate President State: District:	ement For: Primary Other (spe	General cify) ▼		100				,			· · · ·
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	y information copied from such Reports and Sta for commercial purposes, other than using the												
	NAME OF COMMITTEE (In Full) FREEDOMWORKS FOR AMER	ICA											
Α.	Full Name (Last, First, Middle Initial) Freedomworks, Inc.					Date	_	isburse			Y	Y	Y
	Mailing Address 400 N Capitol St., NW Suite 735					05		3	31		20	014	
	City Washington Purpose of Disbursement	StateZip CodeDC20001				Trai	nsac	tion ID) : Se	821B.:	3535	54	
	In-kind - Equipment Usage					Amou	nt o	f Each	Disb	oursen	nent	this	Period
	Candidate Name	_	Cate	egoi ype				7		7		1250	0.00
	Senate President	sement For: Primary General Other (specify) ▼											
	State: District:												
В.	Full Name (Last, First, Middle Initial) Freedomworks, Inc.					Date		isburs			V	Y	Y
	Mailing Address 400 N Capitol St., NW Suite 735					05			31	7		014	
	City Washington	StateZip CodeDC20001				Tra	nsac	tion IC	D : SE	321B.	3538	85	
	Purpose of Disbursement Email/Social Media/Printing		C	001		Amou	nt o	f Each	Disb	oursen	nent	this	Period
	Candidate Name		Cate T	egoi ype				7		7		1919	9.57
	Senate President	sement For: Primary General Other (specify) ▼											
	State: District: Full Name (Last, First, Middle Initial)												
C.	Freedomworks, Inc.					Date		isburs			Y	Y	Y
	Mailing Address 400 N Capitol St., NW Suite 735					05			31			014	
	City Washington Purpose of Disbursement	StateZip CodeDC20001				Trai	nsac	tion IE) : Se	321B.	3538	87	
	Email/Social Media/Printing Candidate Name		Cate)01 egoi ype		Amou	nt o	f Each	Disb	oursen	nent	this 7958	Period 3.46
	Office Sought: House Disbu Senate President State: District:	sement For: Primary General Other (specify) ▼		ype			_	7					
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SC	HEDULE B (FEC Form 3X)					UMBER:	:		PA	GE 65	OF 207
ITE	MIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	(cl	X^2	only o 21b 27	one) 22 28a		23 28b	24 28c	25 29	26 30b
or f	information copied from such Reports and State or commercial purposes, other than using the nar										
	JAME OF COMMITTEE (In Full) FREEDOMWORKS FOR AMERIC	A									
	Full Name (Last, First, Middle Initial) FTI Consulting Technology LLC					Date of	f Dis	burse		YYY	Y
_	Aailing Address 909 Commerce Road					05		02	2	2014	
ŀ	Annapolis	State Zip Code MD 21401				Trans	actio	on ID	: SB21B.	35383	
	Purpose of Disbursement Data Storage Candidate Name		0	01		Amoun	t of I	Each	Disburse	ment this	Period
				egory. /pe	/			,	7	21′	15.00
(Dffice Sought: House Disburse Senate President	ment For: Primary General Other (specify) ▼									
F	State: District: Full Name (Last, First, Middle Initial) Global Pay					Date of	f Dis	hurse	ment		
_	Jailing Address 10 Glenlake Pkwy, NE				_	05	/	3	D / Y	2014	Y
	Dity Atlanta	State Zip Code GA 30328				Trans	sacti	on ID	: SB21B	.35389	
F	Purpose of Disbursement Merchant Fees		0	01	1	Amoun	t of I	Each	Disburse	ment this	Period
7	Candidate Name			egory. /pe	/			,		18	80.37
	Senate President	ment For: Primary General Other (specify) v									
	State: District: Full Name (Last, First, Middle Initial)										
C.	Global Pay					Date of	f Dis	burse		Y Y	Y
_	Aailing Address 10 Glenlake Pkwy, NE					05		3	1	2014	
A	City Atlanta Purpose of Disbursement	State Zip Code GA 30328				Trans	acti	on ID	: SB21B	.35391	
	Candidate Name		Cate	01 egory/ /pe	1	Amoun	t of I	Each	Disburse	ment this	Period 6.01
	Office Sought: House Disburse Senate President State: District:	ment For: Primary General Other (specify) ▼		/pe				5			
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		Detailed Summary Page			27	22 28a		23 28b	╞	280	-	29	\mid	20 30b
	y information copied from such Reports and State for commercial purposes, other than using the nar													
	NAME OF COMMITTEE (In Full)													
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۸	Full Name (Last, First, Middle Initial)					Date	of Di	isburse	om	ont				
~ .	Global Pay					M					Y Y	Y	Y	
	Mailing Address 10 Glenlake Pkwy, NE					05			31			014		
	City Atlanta	State Zip Code GA 30328				Tran	sact	tion ID	D:	SB21E	8.353	93		
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	Merchant Fees		C	01		Amou	nt of	Each	ı Di	isburse	emen	t this	Perio	d
	Candidate Name		Cate T	egoi ype				7		,		213	3.25	
	Office Sought: House Disburse Senate President	ment For: Primary General Other (specify) ▼												
	State: District:													
_	Full Name (Last, First, Middle Initial)													
в.	JW, LLC							isburse						
	Mailing Address 771 Corporate Drive Suite 300					05			23	/		014	Y	
	City	State Zip Code				Trar	sac	tion IF	יר	SB21E	3.353	95		
	Lexington Purpose of Disbursement	KY 40503												
	Rent		(001		Amou	nt of	Each	ı Di	isburse	emen	t this	Perio	d
	Candidate Name		Cate	egoi ype	ry/			7		. ,		184	3.88	
		ment For:												
	Senate President	Primary General Other (specify) ▼												
	State: District:													
	Full Name (Last, First, Middle Initial)													
C.	Linemark					Date	of D	isburse	em	ent				
	Mailing Address 501 Prince Georges Blvd					05	И /	D	09	/		014	Y	
	City	State Zip Code				Trom		tian IF	.	0040		07		
	Upper Marlboro	MD 20774				Tran	sac		J : .	SB21E	5.353	91		
	Purpose of Disbursement PAC Direct Mail Fundraising			003		٨٠	at af	Fach		isburse		t thia	Daria	d
	Candidate Name		Cat			Amou		Each		ISDUISE	emen	3370		a
	Office Sought: House Disburse	ment For:						7	-	- 7				
	Senate	Primary General												
	State: District:	Other (specify)												
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	y information copied from such Reports and States for commercial purposes, other than using the nar														
	NAME OF COMMITTEE (In Full) FREEDOMWORKS FOR AMERIC	A													
Α.	Full Name (Last, First, Middle Initial) Linemark						C	Date of	f Di						
	Mailing Address 501 Prince Georges Blvd							05	/	D 1	6	/		014	Y
	Upper Marlboro	State MD	Zip Code 20774					Trans	acti	ion ID):	SB21E	8.353	99	
	Purpose of Disbursement Printing			0	01		A	moun	t of	Each	D	isburse	emen	t this	Period
	Candidate Name			Cate Ty	egor ype	ry/		_		7				14	6.54
	Office Sought: House Disburse Senate President District:	ment For: Primary Other (spe	General cify) ▼												
В.	Full Name (Last, First, Middle Initial) O'Connor Consulting Services Mailing Address 4770 Howard Place							Date of M M 05	f Dis	D		1		2014	Y
	City Chesapeake Beach	State MD	Zip Code 20732					Trans	sact	ion ID):	SB21E	3.354	01	
	Purpose of Disbursement Accounting Services Candidate Name				01		A	moun	t of	Each	D	isburse	emen	t this	Period
				Cate Ty	egor /pe	ry/				,				709	5.00
	Office Sought: House Disburser Senate President District:	ment For: Primary Other (spec	General cify) ▼												
с.	Full Name (Last, First, Middle Initial)						C	Date of	f Di			_			
	Mailing Address 4770 Howard Place							05	/	2	23	/		014	Υ
	City Chesapeake Beach Purpose of Disbursement	State MD	Zip Code 20732					Trans	sact	ion ID):	SB21E	8.354	03	
	Accounting Services Candidate Name			Cate	01 egor ype	ry/	А	moun	t of	Each	D	oisburse	emen		Period 8.75
	Office Sought: House Disburser Senate President District:	ment For: Primary Other (spe	General cify) ▼		ypc					7		7			
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		for each category of th Detailed Summary Pag	ne		21b 27	22 28a		23 28b	24 28c	25 29	26 30b
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	MMITTEE (In Full) MWORKS FOR AM	IERICA									
Full Name (Las A. Odd Lamp	st, First, Middle Initial) DS, LLC					Date o	f Disb	urse	ment		
Mailing Addres	s 12076 92nd Ave N					05	/	0		2014	Y
City Maple Grove		State Zip Code MN 55369				Trans	actio	n ID	: SB21B	.27198	
	e Ads-IE-Dinsdale					Amoun	t of E	ach	Disburse	ment this	s Period
Candidate Nan			C	atego Type	ry/		,		7	17	50.00
Office Sought:	Senate President	Disbursement For: Primary Genera Other (specify)	al								
_	District: st, First, Middle Initial)					Date o	f Diab		mont		
B. Odd Lam	PS, LLC s 12076 92nd Ave N					05		D		2014	Y
City Marila Crows		State Zip Code MN 55369				Trans	sactio	n ID	: SB21B	.27199	
Maple Grove Purpose of Dis To adjust for i	sbursement n kind for IE-Dinsdale					Amoun	t of E	ach	Disburse	ment this	s Period
Candidate Nan	ne		C	ategoi Type	ry/		. ,		. ,	-17	50.00
Office Sought: State:	House [Senate President District:	Disbursement For: Primary Genera Other (specify)	al								
	st, First, Middle Initial)					Date o	f Disb				
Mailing Addres	s 2550 M Street NW					м м 05	/	D 0		2014	Y
City Washington		StateZip CodeDC20037				Trans	sactio	n ID	: SB21B	.35405	
Legal Fees			c	001 ategor Type	ry/	Amoun	t of E	ach	Disburse	ment this	e Period 21.25
Office Sought: State:	Senate President	Disbursement For: Primary Genera Other (specify)	al	- 7 - 7							<u> </u>
Washington Purpose of Dis Legal Fees Candidate Nan Office Sought: State: SUBTOTAL of D	ne House I Senate President District: District: District (o	DC 20037	al	atego Type						ment this	

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		for each category of the Detailed Summary Page			21b 27	22 28a		23 28b		24 28c	25 29	26 30b
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\backslash	NAME OF COMMITTEE (In Full)											
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•	Full Name (Last, First, Middle Initial)					Data	-4 D					
А.	Patton Boggs, LLP							sburse				
	Mailing Address 2550 M Street NW					м 05		2	23		2014	Y
	City	State Zip Code				-					407	
	Washington	DC 20037				Irar	Isaci		: 58	21B.35	407	
	Purpose of Disbursement Legal Fees			001	11	A.m.o	nt of	Tach	Diah		nt thia	Deried
	Candidate Name					Amou	nt oi	Each	Disbi	irseme	ni unis	Period
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	Office Sought: House Disburser Senate President	nent For: Primary General Other (specify) ▼										
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	Full Name (Last, First, Middle Initial)											
В.	Paypal					Date		sburse			Y Y	Y
	Mailing Address 2211 N. First St.					05			31	L.	2014	_
	City San Jose	State Zip Code CA 95131				Trar	isaci	tion ID) : SB	21B.35	411	
	Purpose of Disbursement Online Processing			001		Amou	nt of	Each	Disbu	ırseme	nt this	Period
	Candidate Name			egor ype	ry/			,		,	383	94.19
	Office Sought: House Disburser Senate President District:	nent For: Primary General Other (specify) ▼										
_	Full Name (Last, First, Middle Initial)											
C.	Precision Lists							sburse				
	Mailing Address 901 N. Monroe St., #1309					^M 05		2	3		2014	Y
	City S Arlington	State Zip Code VA 22201				Trar	isaci	tion ID) : SB	21B.35	409	
	Purpose of Disbursement PAC List Rental											
	Candidate Name		Cat	003 egor ype	ry/	Amou	nt of	Each	Disbu	urseme		Period 6.20
	Office Sought: House Disburser Senate President	nent For: Primary General Other (specify) ▼		<u> </u>			_			.,		
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or	for commercial purposes, other than using the na	me and address of any politica	al con	nmit	tee to	SOI	cit co	ntrit	outions	s fro	om suc	h co	mmitt	ee.	
$ \rangle$	NAME OF COMMITTEE (In Full) FREEDOMWORKS FOR AMERIC	:A													
Δ.	Full Name (Last, First, Middle Initial) Rogers & Company					D	ate o	f Di	sburse	eme	ent				
						_	M M		D			Y	Y	Y	
	Mailing Address						05		0)5		20	014	_	
	City	State Zip Code					Trans	sact	ion ID) : S	B21B.	3541	3		
	Purpose of Disbursement Accounting Services		0	01		А	moun	it of	Each	Dis	sburser	nent	this I	Perio	bd
	Candidate Name		Cate		ry/	1			-				4063	3.00	٦
	Office Sought: House Disburse	ment For:	L.	ype				-	7	-	7				
	Senate President	Primary General Other (specify) ▼													
	State: District:	Other (specify)													
	Full Name (Last, First, Middle Initial)														
Β.	Rogers & Company					_			sburse		ent				
	Mailing Address						05	/	2	21	/ Y) 014	Y	
	City	State Zip Code					Tran	sact	ion ID) : S	B21B.	3541	16		
	Purpose of Disbursement Accounting Services		C	001		A	moun	it of	Each	Dis	sburser	nent	this I	Perio	bd
	Candidate Name		Cate T	egoi ype	ry/	[7		,		2341	1.67	
		ment For:													
	Senate President	Primary General Other (specify)													
	State: District:	Caller (opcolly)													
_	Full Name (Last, First, Middle Initial)							(D)							
υ.	Time Warner Cable							_	sburse			V	Y	V	
	Mailing Address 13820 Sunrise Valley Dr.						05	ĺ)9)14		
	City	State Zip Code					Trans	sact	ion ID) : S	B21B.	3541	18		
	Herndon Purpose of Disbursement Utilities	VA 20171	_	_											
	Candidate Name		Cate	01 egoi ype	ry/	A	moun	it of	Each	Dis	sburser	nent	-	Peric 9.90	bd
		ment For:		-					7		1				
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т	OTAL This Period (last page this line number only)							,						

	CHEDULE B (FEC Form 3X)	Use separate schedule(s)					:			PAG	θE	71	OF 207
IT	EMIZED DISBURSEMENTS	for each category of the	(c		k only 21b	one)		23		24		25	26
		Detailed Summary Page			27	28a	\vdash	23 28b	$\left \right $	24 28c	-	29	30b
	ny information copied from such Reports and Stater for commercial purposes, other than using the nar												
\setminus	NAME OF COMMITTEE (In Full)												
	FREEDOMWORKS FOR AMERIC	A											
Α.	Full Name (Last, First, Middle Initial) Time Warner Cable					Date o	f Di	sburse	emen	t			
	Mailing Address 13820 Sunrise Valley Dr.					м м 05	1	3	0	/ Y) 14	Y
	City	State Zip Code				Trong		ion ID		010 2	DEAT	20	
	Herndon	VA 20171				TTalls	au		. 30	210.3	JJ42	20	
	Purpose of Disbursement Utilities		0	01		Amoun	t of	Each	Disb	ursen	nent	this	Period
	Candidate Name		Cate Ty	egoi ype				,		,		23	9.90
	Office Sought: House Disburser Senate President	nent For: Primary General Other (specify) ▼											
	State: District:												
в.	Full Name (Last, First, Middle Initial)					Date o	f Di	sburse	emen	t			
	Mailing Address					M M	/	D	D	/ Y	Y	Y	Y
	City	State Zip Code											
	Purpose of Disbursement		_			Amoun	t of	Fach	Dish	ursem	nent	this	Period
	Candidate Name	I	Cate Tv	egoi ype				Euon	2100				
	Office Sought: House Disburser Senate President	nent For: Primary General Other (specify) v						-					
	State: District:												
C.	Full Name (Last, First, Middle Initial)					Date o	f Di	sburse	emen	t			
	Mailing Address					M M	/	D	D	/ Y	Y	Y	Y
	City	State Zip Code											
	Purpose of Disbursement		-			•		F h	Dist			46.5	Devie
	Candidate Name		Cate Ty	egoi ype	ry/	Amoun		Each	Disp	ursen	ient	unis	Period
	Office Sought: House Disburser Senate President District:	nent For: Primary General Other (specify) ▼						,					
	Biotrot.					_	_	_		_	_	_	
⊢	CUBTOTAL of Disbursements This Page (optional).					Ļ	-	7		7	1	239 33341	9.90
ΙT	OTAL This Period (last page this line number only))				1		7		- 7			

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

ITEMIZ	ZED INDEPENDENT EXPENI	DITURES				PAGE 72 OF 207 FOR LINE 24 OF FORM 3X
NAME	OF COMMITTEE (In Full)				FFC I	DENTIFICATION NUMBER ▼
FRE	EDOMWORKS FOR AM	ERICA				C00499020
					С	00499020
Check if 24-hour report 48-hour report New report Amends report filed on 48-hour report 14-hour report						
	Name of Payee			Da	ate of Publ	ic Distribution/Dissemination
	Eleven-NC				05	/ D D / Y Y Y Y 04 2014
Mai	iling Address 600 Glenwood Ave			Ar	nount	
City	/	State	Zip Code			6.42
Ral	eigh	NC	27603			D : SE.27062 oursement or Obligation
	pose of Expenditure Brannon-Travel		Category/ Type 002		^M 05	/ D D / Y Y Y Y 04 / 2014
Nar	me of Federal Candidate		Support	Office So	ught:	House District: 00
GR	EGORY JOSEPH BRANNON		Oppose	Pre	esident	Senate State: <u>NC</u>
	Calendar Year-To-Date Per Election for Office Sought		142957.00	Disburser 2014	7	✓ Primary General pecify) ►
	Name of Payee			Da	ate of Publ	lic Distribution/Dissemination
7	-Eleven-NC				05 ^M	/ D D / Y Y Y Y 05 2014
Ма	iling Address 600 Glenwood Ave				00	2014
				A	mount	
Cit	у	State	Zip Code			32.18
	aleigh	NC	27603			D: SE.27081 pursement or Obligation
	rpose of Expenditure Brannon-Travel		Category/ Type 002		05	/ D D / Y Y Y Y 05 2014
Na	me of Federal Candidate		Support	Office So	ought:	House District: 00
GF	REGORY JOSEPH BRANNON		Oppose	Pre	esident	Senate State: <u>NC</u>
	Calendar Year-To-Date Per Election for Office Sought		146031.67	Disburse 2014	ment For:	Primary General
┍┷┻			1 1 20 1		Other (s	specify) ►
(a) SUBTOTAL of Itemized Independent Expenditures						
(a) SUBTOTAL of Itemized Independent Expenditures						
(b) SUBTOTAL of Unitemized Independent Expenditures						
(c) ⁻	TOTAL Independent Expenditures			··· •		A A A A A A A A A A A A A A A A A A A
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.						
	R. Russ Walker	[Elastra	nically Filed]	M	/ 0.0	
s	lignature		Date	e 06	20	2014
1						
ITEMIZED INDEPENDENT EXPENDITURES	PAGE 73 OF 207 FOR LINE 24 OF FORM 3X					
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NAME OF COMMITTEE (In Full) FREEDOMWORKS FOR AMERICA	FEC IDENTIFICATION NUMBER ▼					
	C C00499020					
Check if 24-hour report 48-hour report New report Amends report filed	on / / / Y = Y = Y					
Full Name of Payee	Date of Public Distribution/Dissemination					
Alamo	05 06 2014					
Mailing Address 1008 Rental Car Dr.	Amount					
City State Zip Code	308.29					
Raleigh Durham NC 27623	Transaction ID : SE.35440 Date of Disbursement or Obligation					
Purpose of Expenditure IE-Brannon-Travel Category/ Type 002	05 / 06 / 2014					
Name of Federal Candidate X Support Office	Sought: House District: 00					
	President X Senate State: NC					
Calendar Year-To-Date Disbur Per Election for Office Sought 148755.27 2014	rsement For: X Primary General					
	Other (specify)					
Full Name of Payee AOL Advertising LLC	Date of Public Distribution/Dissemination					
Mailing Address	05 05 2014					
770 Broadway-6th Floor	Amount					
City State Zip Code	9750.00					
New York NY 10003	Transaction ID : SE.27054 Date of Disbursement or Obligation					
Purpose of Expenditure Category/ IE-Sasse-Online Ads 004	05 / 05 / Y Y Y Y 05 / 2014					
Name of Federal Candidate X Support Office	Sought: House District: 00					
BENJAMIN E SASSE Oppose	President X Senate State: <u>NE</u>					
Calendar Year-To-DateDisbutPer Election for Office Sought60406.86	rsement For: X Primary General					
	Other (specify)					
(a) SUBTOTAL of Itemized Independent Expenditures	10058.29					
(b) SUBTOTAL of Unitemized Independent Expenditures						
(c) TOTAL Independent Expenditures						
Under penalty of perjury I certify that the independent expenditures reported herein were not may with, or at the request or suggestion of, any candidate or authorized committee or agent of either, party committee) any political party committee or its agent.						
R. Russ Walker [Electronically Filed]	M / D D / Y Y Y Y					
Signature Date						

ITEMIZED INDEP	ENDENT EXPEND	ITURES				PAGE 74	OF 207 24 OF FORM 3X
NAME OF COMMITT	EE (In Full)				FEC II	-	ON NUMBER V
FREEDOMWO	ORKS FOR AME	ERICA				C00499020	
						00499020	
Check if 24-hour	r report 48-hour	report New rep	ort Amends repo	ort filed o	on		Y Y Y Y
Full Name of Pay					Date of Publi	c Distribution	/Dissemination
AOL Advertis					^M 05	/ D D / 08	2014 Y
Mailing Address	770 Broadway-6th Floo	r			Amount		
City		State	Zip Code				7500.00
New York		NY	10003		Transaction ID		Obligation
Purpose of Exper IE-McDaniel-Onli			Category/ Type 004		05	/ 08 /	2014 Y
Name of Federal	Candidate		Support	Office	Sought:	House	District: 00
CHRISTOPHER	BRIAN MCDANIEL		Oppose		President	X Senate	State: MS
Calendar Yea	ar-To-Date for Office Sought		207369.46	Disbur 2014	sement For:	Primary	General
				<u> </u>	Other (sp	pecify) ►	
Full Name of Pay AOL Advert					Date of Publi	ic Distribution	/Dissemination
Mailing Address					05	08	2014
	770 Broadway-6th Floo	r			Amount		
City		State	Zip Code		· · · · ·		7500.00
New York		NY	10003	r	Fransaction II Date of Disb		
Purpose of Expe IE-Cochran-Onlin			Category/ Type 004		05	/ 08 /	2014
Name of Federal	Candidate						District: 00
THAD COCHRAI			Support		Sought:	House	District: 00 State: MS
Calendar Ye	ar-To-Date				rsement For:	Primary	
	for Office Sought		214869.46	2014	Other (s	<u> </u>	
(a) SUBTOTAL of	Itemized Independent	Expenditures		🕨			15000.00
(b) SUBTOTAL of	Unitemized Independe	nt Expenditures		••• ►			
(c) TOTAL Indepe	ndent Expenditures						
						7	
with, or at the requ		independent expenditures any candidate or authorized ittee or its agent.					
R. Ru	ss Walker			M	M / D D	/ Y Y	YY
Signature		[Electron	<i>ically Filed]</i> Date	e 06	20	201	4
e.g. lataro							

ITEMIZED INDEPENDENT EXPENDITU	RES			PAGE 75 OF 207 FOR LINE 24 OF FORM 3X
	~ ^		1	FEC IDENTIFICATION NUMBER V
FREEDOMWORKS FOR AMERIC	JA			С С00499020
Check if 24-hour report 48-hour report	t 🗌 New rep	ort Amends repo		M / D D / Y Y Y Y Y
Full Name of Payee AOL Advertising LLC			М	f Public Distribution/Dissemination
Mailing Address 770 Broadway-6th Floor			Amoun	
City	State	Zip Code		1625.00
New York	NY	10003		tion ID : SE.35529 f Disbursement or Obligation
Purpose of Expenditure IE-McDaniel-Onlne Ads		Category/ Type 004	М	D5 / D D / Y Y Y Y 29 / 2014
Name of Federal Candidate		Support	Office Sought:	: House District: 00
CHRISTOPHER BRIAN MCDANIEL		Oppose	Presider	nt 🗙 Senate State: <u>MS</u>
Calendar Year-To-Date Per Election for Office Sought		313811.21	Disbursement 2014 Ott	For: X Primary General
Full Name of Payee			Date o	f Public Distribution/Dissemination
AOL Advertising LLC				05 29 2014
Mailing Address 770 Broadway-6th Floor			Amoun	it
City	State	Zip Code		1625.00
New York	NY	10003		tion ID : SE.35530 f Disbursement or Obligation
Purpose of Expenditure IE-Cochran-Online Ads		Category/ Type 004	M	05 / 29 / Y Y Y Y Y 2014
Name of Federal Candidate		Support	Office Sought	: House District: 00
THAD COCHRAN		X Oppose	Preside	nt 🗙 Senate State: <u>MS</u>
Calendar Year-To-Date Per Election for Office Sought		315436.21	Disbursement 2014 Ot	For:
(a) SUBTOTAL of Itemized Independent Exper	nditures		• •	3250.00
(b) SUBTOTAL of Unitemized Independent Ex	penditures		•	
(c) TOTAL Independent Expenditures			•	· · · · · · · · · · ·
Under penalty of perjury I certify that the inde with, or at the request or suggestion of, any ca party committee) any political party committee	andidate or authorized			
R. Russ Walker	[Electron	ically Filed] Date	M M /	20 / Y Y Y Y Y Y
Signature				لينبا لي

116	MIZED INDEPENDENT EXPENDITORES			GE 76 OF 207 DR LINE 24 OF FORM 3X
	ME OF COMMITTEE (In Full)		FEC IDEN	TIFICATION NUMBER V
F	REEDOMWORKS FOR AMERICA		C coo	0499020
Ch	eck if 24-hour report 48-hour report New	report Amends repo		
	Full Name of Payee		Date of Public D	istribution/Dissemination
	Arrowhead Graphics, Inc.		05 /	01 / Y Y Y Y 01 2014
	Mailing Address 508 Houston St		Amount	
	City State	Zip Code	_	2311.85
	Greensboro NC	27401	Transaction ID : S	SE.26911 ment or Obligation
	Purpose of Expenditure IE-Brannon-Yard signs	Category/ Type 004		01 / Y Y Y Y 01 / 2014
	Name of Federal Candidate	Support	Office Sought:	House District: 00
	GREGORY JOSEPH BRANNON	Oppose		Senate State: NC
	Calendar Year-To-Date		Disbursement For:	Primary General
	Per Election for Office Sought	134494.23	2014 Other (speci	fy) ▶
	Full Name of Payee Arrowhead Graphics, Inc.		Date of Public D	istribution/Dissemination
	-		05	01 / Y Y Y Y 01 2014
	Mailing Address 508 Houston St		Amount	
	City State	Zip Code		262.49
	Greensboro NC	27401	Transaction ID : S	SE.26912
	Purpose of Expenditure	Category/	Date of Disburse	ement or Obligation
	IE-Brannon-Stickers	Type 004	05	01 2014
	Name of Federal Candidate	Support	Office Sought:	House District: 00
	GREGORY JOSEPH BRANNON	Oppose	President X	Senate State: <u>NC</u>
	Calendar Year-To-Date Per Election for Office Sought	134756.72	Disbursement For:	Primary General
		g	Other (speci	fy) ▶
	(a) SUBTOTAL of Itemized Independent Expenditures			2574.34
	(a) SUBTOTAL OF REFINZED INdependent Experiatores			2374.34
	(b) SUBTOTAL of Unitemized Independent Expenditures		• •	
	(c) TOTAL Independent Expenditures		•	
	Under penalty of perjury I certify that the independent expenditu with, or at the request or suggestion of, any candidate or authori party committee) any political party committee or its agent.			
	R. Russ Walker [Elect.	tronically Filed]	06 / 20 /	2014
	Signature			

ITEMIZED INDEPENDENT EXPENDIT	URES				PAGE 77 OF 207 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC I	DENTIFICATION NUMBER V
FREEDOMWORKS FOR AMER	RICA			С	C00499020
					000499020
Check if24-hour report48-hour rep	port New re	eport Amends repo		M = M	/ D = D / Y = Y = Y = Y
Full Name of Payee			Date	of Publ	ic Distribution/Dissemination
Arrowhead Graphics, Inc.				^M 05	/ D D / Y Y Y Y 01 2014
Mailing Address 508 Houston St			Amo	unt	
City	State	Zip Code			1040.01
Greensboro	NC	27401			D : SE.27038 bursement or Obligation
Purpose of Expenditure IE-McDaniel-Signage		Category/ Type 004		^M 05	/ D D / Y Y Y Y 01 / 2014
Name of Federal Candidate		Support	Office Soug	ht:	House District: 00
CHRISTOPHER BRIAN MCDANIEL		Oppose	Presi	. r	Senate State: MS
Calendar Year-To-Date Per Election for Office Sought		156669.27	Disburseme 2014		Primary General General
Full Name of Payee					lic Distribution/Dissemination
Arrowhead Graphics, Inc.				M M	
Mailing Address 508 Houston St				05	02 2014
			Amo	ount	
City	State	Zip Code			1223.68
Greensboro	NC	27401			D: SE.27037 bursement or Obligation
Purpose of Expenditure		Category/		M M	/ D D / Y Y Y
IE-McDaniel-Yard Signs/Stickers		Type 004		05	02 2014
Name of Federal Candidate		X Support	Office Sou	ght:	House District: 00
CHRISTOPHER BRIAN MCDANIEL		Oppose	Presi	dent	Senate State: <u>MS</u>
Calendar Year-To-Date Per Election for Office Sought		157999.21	Disburseme 2014		Primary General
				Other (s	specify) ►
					0000.00
(a) SUBTOTAL of Itemized Independent Ex	penaltures		·· • L.	-7	2263.69
(b) SUBTOTAL of Unitemized Independent	Expenditures				
				-7	
(c) TOTAL Independent Expenditures			·· •		
Under penalty of perjury I certify that the in with, or at the request or suggestion of, any party committee) any political party committed	candidate or authorize				
R. Russ Walker			M	D D	
Signature	[Electro	onically Filed] Date	9 06	20	2014
Signature					

ITEMIZED INDEPENDENT EXPENDITURES		PAGE 78 OF 207 FOR LINE 24 OF FORM 3X
		FEC IDENTIFICATION NUMBER ▼
FREEDOMWORKS FOR AMERICA		С С00499020
Check if24-hour report48-hour reportNew report	Amends report filed on	
Full Name of Payee Arrowhead Graphics, Inc.	Date	of Public Distribution/Dissemination
	['	05 20 2014
Mailing Address 508 Houston St	Amou	ınt
City State Zip C	ode	3892.93
Greensboro NC 2740		action ID : SE.32518 of Disbursement or Obligation
Purpose of Expenditure IE-McDaniel-Door Hangers	gory/ Type 004	05 / D D / Y Y Y Y 2014
Name of Federal Candidate	X Support Office Sough	nt: House District: 00
CHRISTOPHER BRIAN MCDANIEL	Oppose Presid	ent X Senate State: MS
Calendar Year-To-Date Per Election for Office Sought	D05.87 Disbursemen 2014	nt For: X Primary General
Full Name of Payee		of Public Distribution/Dissemination
Arrowhead Graphics, Inc.		M = M / D = D / Y = Y = Y
Mailing Address 508 Houston St	Amou	05 20 2014 unt
City State Zip C	ode	3292.14
Greensboro NC 2740	1 Transa	action ID : SE.35471 of Disbursement or Obligation
Purpose of Expenditure IE-Graham-Yard Signs	gory/ Type 001	05 / 20 / Y Y Y Y 2014
Name of Federal Candidate	Support Office Sough	ht: X House District: 00
LINDSEY OLIN GRAHAM	Oppose Presid	lent Senate State: <u>SC</u>
Calendar Year-To-Date Per Election for Office Sought	292.14 Disbursemen 2014	nt For:
(a) SUBTOTAL of Itemized Independent Expenditures	••••••••••••••••••••••••••••••••••••••	7185.07
(b) SUBTOTAL of Unitemized Independent Expenditures	••••••••••••••••••••••••••••••••••••••	
(c) TOTAL Independent Expenditures	►	· · · · · · · · · ·
Under penalty of perjury I certify that the independent expenditures report with, or at the request or suggestion of, any candidate or authorized comm party committee) any political party committee or its agent.		
R. Russ Walker [Electronically F	iled] Date 06	20 / Y = Y = Y = Y 20 2014
Signature	Date 06	

IIE	MIZED INDEPENDENT EXPENDITURES					PAGE 79 FOR LINE 2	OF 207 24 OF FORM 3X
NAN	IE OF COMMITTEE (In Full)				FEC II		ON NUMBER ▼
FF	REEDOMWORKS FOR AMERICA					C00499020	
					C	00499020	
Che	ck if 24-hour report 48-hour report	New repo	rt 🗌 Amends re	eport filed	on		Y Y Y Y
Т	Full Name of Payee				Date of Publi	c Distribution/	Dissemination
	Billy Bob's Silver Diner				^M 05	/ D D / 04	2014 Y
	Mailing Address 1650 Hanes Mall Blvd.				Amount		
ŀ	City State	;	Zip Code		· · · · ·		75.42
	Winston-Salem NC		27103		Transaction ID Date of Disbu	D:SE.27068 ursement or C	Obligation
	Purpose of Expenditure IE-Brannon-Travel		Category/ Type 00)2	05	04	y y y y y 2014
	Name of Federal Candidate		X Support	Office	e Sought:	House	District: 00
	GREGORY JOSEPH BRANNON		Oppose		President	X Senate	State: NC
	Calendar Year-To-Date Per Election for Office Sought	7	143202.22	Disbu 2014	ursement For:	Primary ►	General
Г	Full Name of Payee				Date of Publi	ic Distribution/	Dissemination
	Bright Roll				05	/ D D / 01	2014
	Mailing Address 343 Sansome St.						2011
	Ste. 600				Amount		
ŀ	City State		Zip Code				6500.00
	San Francisco CA		94104		Transaction II Date of Disb	D:SE.26923 ursement or C	Obligation
	Purpose of Expenditure IE-Sasse-Online Ads		Category/ Type 00)4	05	/ 01 /	2014
	Name of Federal Candidate		X Support	Office	e Sought:	House	District: 00
	BENJAMIN E SASSE		Oppose		President	X Senate	State: <u>NE</u>
	Calendar Year-To-Date Per Election for Office Sought		20909.06	Disbu 2014		X Primary	General
┍┷┶		7			Other (sp	pecify) 🕨	
(4	a) SUBTOTAL of Itemized Independent Expenditures			🕨			6575.42
(b) SUBTOTAL of Uniternized Independent Expenditures			►			
6	c) TOTAL Independent Expenditures				· · · · ·		
Ì	, , , ,						
w	Inder penalty of perjury I certify that the independent expe rith, or at the request or suggestion of, any candidate or au arty committee) any political party committee or its agent.						
	R. Russ Walker	Flootnon	cally Filed]	M	M / D D		Y = Y
	Signature		Da	ate 0	6 20	201	4

116	MIZED INDEPENDENT EXPENDITOR	ES				FOR LINE	OF 207 24 OF FORM 3X
	ME OF COMMITTEE (In Full)				FEC	IDENTIFICATI	ON NUMBER V
F	REEDOMWORKS FOR AMERIC	A			С	C00499020	
Ch	eck if 24-hour report 48-hour report	New rep	ort Amends repo	ort filed on	M		Y Y Y Y Y
	Full Name of Payee			D	ate of Pub	lic Distribution	/Dissemination
	Bright Roll				05	/ D D / 01 /	2014
	Mailing Address 343 Sansome St.			A	mount		
	Ste. 600			r			
	City	State CA	Zip Code 94104	T	nontion	D : SE.35566	-814.01
	San Francisco	CA	94104			D: SE.35566 oursement or	Obligation
	Purpose of Expenditure IE-Sasse-Online ads credit		Category/ Type 004		^M 05 ^M	/ 01 /	2014 ^Y
	Name of Federal Candidate		Support	Office Se	ought:	House	District: 00
	BENJAMIN E SASSE		Oppose	Pr	esident	X Senate	State: NE
	Calendar Year-To-Date		20150.00		ment For:	X Primar	y General
	Per Election for Office Sought		20156.02	2014	Other (s	specify) 🕨	
	Full Name of Payee			C	ate of Pub	lic Distributior	n/Dissemination
	Bright Roll				^M 05	/ D D / 05	2014
	Mailing Address 343 Sansome St.			Δ	mount		
	Ste. 600						
	City	State CA	Zip Code	Tr	neaction	ID : SE.35465	256.05
	San Francisco	CA	94104			bursement or	Obligation
	Purpose of Expenditure IE-Joyce-Online Ads		Category/ Type 004		05	/ 05 /	2014 Y
	Name of Federal Candidate		Support	Office S	ought:	X House	District: 14
	DAVID P JOYCE		X Oppose	Pr	esident	Senate	State: OH
	Calendar Year-To-Date Per Election for Office Sought		78890.55	Disburse 2014	ement For:	X Primar	y General
⊢					Other (s	specify) 🕨	
	(a) SUBTOTAL of Itemized Independent Expendent	litures					-557.96
	(b) SUBTOTAL of Unitemized Independent Expe	enditures		• •			
	(c) TOTAL Independent Expenditures						
					7	-7	
,	Under penalty of perjury I certify that the indepoint with, or at the request or suggestion of, any car party committee) any political party committee of	didate or authorized	•				
	R. Russ Walker	[Electron	ically Filed] Date	- 06	/ 20	20 ⁻	ү ү 14
	Signature						

ITEMIZED INDEPENDENT EXPENDITURES	PAGE 81 OF 207 FOR LINE 24 OF FORM 3X
	FEC IDENTIFICATION NUMBER V
FREEDOMWORKS FOR AMERICA	C C00499020
Check if 24-hour report 48-hour report New report Amends report file	d on
Full Name of Payee	Date of Public Distribution/Dissemination
Bright Roll	05 15 2014
Mailing Address 343 Sansome St.	
Ste. 600	Amount
City State Zip Code	512.12
San Francisco CA 94104	Transaction ID : SE.35466 Date of Disbursement or Obligation
Purpose of Expenditure IE-Lynch-online adsCategory/ 1004	05 / 05 / 2014
Name of Federal Candidate Support Office	e Sought: X House District: <u>14</u>
MATT LYNCH Oppose	President Senate State: OH
	ursement For: X Primary General
Per Election for Office Sought	Other (specify) ►
Full Name of Payee Bright Roll	Date of Public Distribution/Dissemination
	05 05 / Y Y Y Y 05 05 2015
Mailing Address 343 Sansome St.	Amount
Ste. 600	
City State Zip Code	487.78
San Francisco CA 94104	Transaction ID : SE.35470 Date of Disbursement or Obligation
Purpose of Expenditure IE-Brannon-Online Ads Category/ Type 004	05 / 05 / 2014
Name of Federal Candidate X Support Office	ce Sought: House District: 00
GREGORY JOSEPH BRANNON Oppose	President X Senate State: <u>NC</u>
140775.00 201	pursement For: X Primary General
Per Election for Office Sought	Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	999.90
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not m with, or at the request or suggestion of, any candidate or authorized committee or agent of either party committee) any political party committee or its agent.	
R. Russ Walker [Electronically Filed]	06 20 / Y = Y = Y = Y
Signature	

116	MIZED INDEPENDENT EXPENDITORES		PAGE 82 OF 207 FOR LINE 24 OF FORM 3X
NA	ME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER
F	REEDOMWORKS FOR AMERICA		
			C C00499020
Ch	eck if24-hour report48-hour report New rep	oort Amends repo	rt filed on
	Full Name of Payee		Date of Public Distribution/Dissemination
	Bright Roll		05 08 2014
	Mailing Address 343 Sansome St.		Amount
	Ste. 600		
	City State	Zip Code	5000.00
	San Francisco CA	94104	Transaction ID : SE.27138 Date of Disbursement or Obligation
	Purpose of Expenditure IE-McDaniel-Online Ads	Category/ Type 004	05 / D D / Y Y Y Y 08 / 2014
	Name of Federal Candidate	Support	Office Sought: House District: 00
	CHRISTOPHER BRIAN MCDANIEL	Oppose	President State: MS
	Calendar Year-To-Date	224869.26	Disbursement For: X Primary General
	Per Election for Office Sought	224003.20	Other (specify)
	Full Name of Payee		Date of Public Distribution/Dissemination
	Bright Roll		05 08 2014
	Mailing Address 343 Sansome St.		
	Ste. 600		Amount
	City State	Zip Code	5000.00
	San Francisco CA	94104	Transaction ID : SE.27139 Date of Disbursement or Obligation
	Purpose of Expenditure IE-Cochran-Online Ads	Category/ Type 004	05 / ^D 08 / ^Y 2014
	Name of Federal Candidate	Support	Office Sought: House District: 00
	THAD COCHRAN	X Oppose	President X Senate State: MS
	Calendar Year-To-Date Per Election for Office Sought	229869.26	Disbursement For: X Primary General
┛			Other (specify) ►
	(a) SUBTOTAL of Itemized Independent Expenditures		10000.00
	(b) SUBTOTAL of Unitemized Independent Expenditures		•
	(c) TOTAL Independent Expenditures		
,	Under penalty of perjury I certify that the independent expenditures with, or at the request or suggestion of, any candidate or authorized party committee) any political party committee or its agent.		
	R. Russ Walker [Electron	ically Filed] Date	06 / Y Y Y Y Y 06 20 2014
	Signature		

FEMIZED INDEPENDENT EXPENDITU	JRES				PAGE 83 OF 207 FOR LINE 24 OF FORM 3X
	C.A.			FEC II	DENTIFICATION NUMBER V
FREEDOMWORKS FOR AMERI	CA			С	C00499020
Check if 24-hour report 48-hour repo	rt 🗌 New rep	ort Amends repo		M	/ D = D / Y = Y = Y = Y
Full Name of Payee Bright Roll			Date	of Publi 05	Distribution/Dissemination
Mailing Address 343 Sansome St.			L	05	10 2014
Ste. 600			Amou	nt	
City	State	Zip Code			1500.00
San Francisco	CA	94104			D : SE.27201 ursement or Obligation
Purpose of Expenditure IE-Dinsdale-Online Ads		Category/ Type 004		05	/ D D / Y Y Y Y 10 / 2014
Name of Federal Candidate		Support	Office Sough	it:	House District: 00
SID DINSDALE		X Oppose	Preside		Senate State: NE
Calendar Year-To-Date Per Election for Office Sought		69492.90	Disbursemen 2014		✓ Primary General pecify) ►
Full Name of Payee Bright Roll					ic Distribution/Dissemination
Mailing Address				05	/ D D / Y Y Y Y 12 / 2014
343 Sansome St.			Amou	int	
Ste. 600 City	State	Zip Code			281.78
San Francisco	CA	94104			D : SE.35458 ursement or Obligation
Purpose of Expenditure IE-Dinsdale-Online Ads		Category/ Type 004		05	/ D D / Y Y Y Y 12 / 2014
Name of Federal Candidate		Support	Office Sough	nt:	House District: 00
SID DINSDALE		X Oppose	Presid	L	Senate State: NE
Calendar Year-To-Date Per Election for Office Sought		74507.59	Disbursemer 2014		Primary General
(a) SUBTOTAL of Itemized Independent Expe	enditures		•	-7-	1781.78
(b) SUBTOTAL of Uniternized Independent E	xpenditures		•	7	
(c) TOTAL Independent Expenditures			•		· · · · · · · ·
Under penalty of perjury I certify that the inde with, or at the request or suggestion of, any of party committee) any political party committee	candidate or authorized				
R. Russ Walker	[Flectron	ically Filed]		20	/ 2014
Signature	[Lucion	Date	9 06	20	2014

ITEMIZED INDEPENDENT EXPENDITURI	-5				PAGE 84 OF 207 FOR LINE 24 OF FORM
NAME OF COMMITTEE (In Full)				FEC I	DENTIFICATION NUMBER
FREEDOMWORKS FOR AMERICA	Ą			С	C00499020
Check if 24-hour report 48-hour report	New re	port Amends repo		M M	
Full Name of Payee			Date	of Publ	ic Distribution/Dissemination
Bright Roll				^M 05	/ D D / Y Y Y 16 2014
Mailing Address 343 Sansome St.			Amo	unt	
Ste. 600				unt	
City	State	Zip Code		,	4000.00
San Francisco	CA	94104			D: SE.27241 pursement or Obligation
Purpose of Expenditure IE-Mathis-Online Ads		Category/ Type 004		^M 05	/ D D / Y Y Y 16 / 2014
Name of Federal Candidate		Support	Office Soug	ht:	X House District: 06
CHAD DR MATHIS		Oppose	Presi		Senate State: AL
Calendar Year-To-Date			Disburseme	nt For:	X Primary Gener
Per Election for Office Sought		6022.13	2014	Other (s	pecify) ►
Full Name of Payee			Date	of Publ	lic Distribution/Dissemination
Bright Roll				^M 05	/ D D / Y Y Y 29 2014
Mailing Address 343 Sansome St.			Amo	unt	
Ste. 600			And	uni	
City	State	Zip Code			2500.00
San Francisco	CA	94104			D: SE.35525 pursement or Obligation
Purpose of Expenditure IE-McDaniel-Online Ads		Category/ 004		^M 05	/ D D / Y Y Y 29 2014
		Туре		00	2014
Name of Federal Candidate		Support	Office Soug	pht:	House District: 00
CHRISTOPHER BRIAN MCDANIEL		Oppose	Presi	dent	X Senate State: MS
Calendar Year-To-Date		296835.21	Disburseme 2014	ent For:	Primary Gene
Per Election for Office Sought	· · · · · · · · · · · · · · · · · · ·	200000.21		Other (s	specify) ►
(a) SUBTOTAL of Itemized Independent Expendi	tures		• •	-7	6500.00
(b) SUBTOTAL of Unitemized Independent Expe	adituras				
(b) SOBTOTAL OF OFfice Independent Experi			· • L.	-7	
(c) TOTAL Independent Expenditures					
				-7	
Under penalty of perjury I certify that the indepe with, or at the request or suggestion of, any can party committee) any political party committee or	lidate or authorize				
R. Russ Walker					
	[Electro	nically Filed]	e 06	20	2014
Signature					

ITEMIZED INDEPENDENT EXPENDITURES					PAGE 85 OF 207 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC. II	DENTIFICATION NUMBER V
FREEDOMWORKS FOR AMERICA					
				C	C00499020
Check if 24-hour report 48-hour report	New rep	ort Amends rep	ort filed o	on	
Full Name of Payee				Date of Publi	c Distribution/Dissemination
Bright Roll				05	/ D_D_/ Y_Y_Y_Y 29 2014
Mailing Address 343 Sansome St.				Amount	
Ste. 600					
City	State	Zip Code		,	2500.00
San Francisco	CA	94104		Transaction IE Date of Disbu	D: SE.35526 ursement or Obligation
Purpose of Expenditure IE-Cochran-Online Ads		Category/ Type 004		05	/ D D / Y Y Y Y 29 2014
Name of Federal Candidate		Support	Office	Sought:	House District: 00
THAD COCHRAN		X Oppose		President	Senate State: <u>MS</u>
Calendar Year-To-Date Per Election for Office Sought		299335.21	Disbur 2014	sement For:	Primary General
	,,			Other (sp	
Full Name of Payee Bright Roll				M M	C Distribution/Dissemination
Mailing Address 343 Sansome St.				05	31 2014
Ste. 600				Amount	
City	State	Zip Code			2500.00
San Francisco	CA	94104		Transaction II Date of Disb	D : SE.32537 ursement or Obligation
Purpose of Expenditure IE-McDaniel-Online Ads		Category/ Type 004		05	/ D D / Y Y Y Y 31 / 2014
Name of Federal Candidate		Support	Office	Sought:	House District: 00
CHRISTOPHER BRIAN MCDANIEL		Oppose		President	Senate State: MS
Calendar Year-To-Date Per Election for Office Sought		320578.28	Disbur 2014	rsement For:	Primary General
	11			Other (sp	
(a) SUBTOTAL of Itemized Independent Expenditure	S		🕨		5000.00
				-7-	
(b) SUBTOTAL of Unitemized Independent Expendit	ures		▶		
(c) TOTAL Independent Expenditures			… ▶		
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	te or authorized				
R. Russ Walker	[1 7]4-	ically Filed!	M	M / D D	/ Y Y Y Y
Signature	[Electron	<i>ically Filed]</i> Date	e 06	20	2014
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ITEMIZED INDEPENDENT EXPENDI	IURES				FOR LINE	OF 207 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC II	 DENTIFICATI	ON NUMBER 🔻
FREEDOMWORKS FOR AME	RICA			С	C00499020	
Check if 24-hour report 48-hour re	port New re	eport Amends repo		/ M /		Y Y Y Y Y
Full Name of Payee Bright Roll			Date	of Publi	c Distribution	/Dissemination
			N	05	/ D D / 31	2014 Y
Mailing Address 343 Sansome St.			Amou	Int		
Ste. 600	_					
City	State	Zip Code		7		2500.00
San Francisco	CA	94104			D: SE.32538 ursement or (Obligation
Purpose of Expenditure IE-Cochran-Online Ads		Category/ Type 004	N	05	/ D D / 31	^Y 2014
Name of Federal Candidate		Support	Office Sough	ıt:	House	District: 00
THAD COCHRAN		X Oppose	Preside		X Senate	State: MS
Calendar Year-To-Date			Disbursemer	it For:	X Primary	/ General
Per Election for Office Sought		323078.28	2014 🗌 C	ther (sp	pecify) ►	
Full Name of Payee			Date	of Publi	ic Distributior	n/Dissemination
Buffalo Wild Wings			7	05	/ D D / 05 /	2014 Y
Mailing Address 400 E. Martin Luther King]		Amou	Int		
City	State	Zip Code	Transa		D : SE.27086	34.43
Charlotte	NC	28214			ursement or	
Purpose of Expenditure IE-Brannon-Travel		Category/ Type 002		05	/ 05 /	y y y y 2014
Name of Federal Candidate		Support	Office Sough	nt:	House	District: 00
GREGORY JOSEPH BRANNON		Oppose	Presid	ent	X Senate	State: NC
Calendar Year-To-Date			Disbursemer	nt For:	X Primar	y General
Per Election for Office Sought	,	146120.34	2014)ther (sp	pecify) 🕨	
			_			
(a) SUBTOTAL of Itemized Independent Ex	kpenditures		• •	-7-	-7-	2534.43
	Europe et eliterre e		_			
(b) SUBTOTAL of Unitemized Independent	Experialities		•• • • • • • • • • • • • • • • • • • •	7		
(c) TOTAL Independent Expenditures						
				-7-	-7-	
Under penalty of perjury I certify that the i with, or at the request or suggestion of, an party committee) any political party committ	y candidate or authoriz					
R. Russ Walker			M M /	DD	/ Y Y	Y Y
Signature	[Electro	Date []	9 06	20	20	14
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IIEW	IZED INDEPENDENT EXPENDI	IURES				PAGE 87	OF 207 24 OF FORM 3X
	E OF COMMITTEE (In Full)				FEC I		ON NUMBER 🔻
FR	EEDOMWORKS FOR AME	RICA			С	C00499020	
Chec	k if 24-hour report 48-hour re	eport New rep	port Amends repo		M	/ D D /	Y Y Y Y Y
	ull Name of Payee Casa Mexico			Date	of Publ	lic Distribution	/Dissemination
					^M 05	/ D D / 10	2014 Y
N	lailing Address 10332 W. Fairview Ave.			Amo	unt		
C	ity	State	Zip Code				203.73
В	oise	ID	83704			D:SE.27211	
	urpose of Expenditure E-Smith-Food/Beverage		Category/ Type 002		05 ^M		2014
N	ame of Federal Candidate		Support	Office Soug	ht:	X House	District: 02
E	BRYAN SMITH		Oppose	Presid	r	Senate	State: ID
	Calendar Year-To-Date		31368.18	Disburseme	nt For:	X Primary	/ General
L	Per Election for Office Sought		51500.10		Other (s	specify) 🕨	
	ull Name of Payee Chick Fil A-NC			Date			n/Dissemination
					05	/ 03 /	2014
Ň	1ailing Address 7910 Rea Rd.			Amo	unt		
	Dity	State	Zip Code				21.92
	Charlotte	NC	82877			ID : SE.26992 oursement or	
	Purpose of Expenditure		Category/		M – M	/ D D /	
	E-Brannon-Food/Beverage		Type 002		05	03	2014
	lame of Federal Candidate		X Support	Office Soug	ght:	House	District: 00
	GREGORY JOSEPH BRANNON		Oppose	Presi	dent	X Senate	State: NC
	Calendar Year-To-Date Per Election for Office Sought		142564.61	Disburseme 2014		X Primar	y General
┍┷┶	· · ·				Other (s	specify) ►	
(a)	SUBTOTAL of Itemized Independent E	xpenditures					225.65
()					-7	-7-	
(b)	SUBTOTAL of Uniternized Independent	Expenditures		• •			
(c)	TOTAL Independent Expenditures			••	-7		
	der penalty of perjury I certify that the h, or at the request or suggestion of, ar						
	rty committee) any political party commit					, stang entity	a pontiour
	R. Russ Walker			M M /	DE		Y Y
	Signature	[Electron	<i>uically Filed]</i> Date	9 06	20	207	14
I	-						

ITEMIZED INDEPENDENT EXPENDITURES		PAGE 88 OF 207 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)	FEC	CIDENTIFICATION NUMBER ▼
FREEDOMWORKS FOR AMERICA	С	C00499020
Check if 24-hour report 48-hour report New report	Amends report filed on	
Full Name of Payee Chick Fil A-NC	Date of Pu	ublic Distribution/Dissemination
	05	/ D D / Y Y Y Y 06 2014
Mailing Address 7910 Rea Rd.	Amount	
City State Zip Co	ode	13.95
Charlotte NC 82877		ID: SE.35430 sbursement or Obligation
	gory/ Type 002 05	<u> </u>
Name of Federal Candidate	Support Office Sought:	House District: 00
GREGORY JOSEPH BRANNON	Oppose President	Senate State: <u>NC</u>
Calendar Year-To-Date	Disbursement For 2014	r: X Primary General
Per Election for Office Sought		(specify) ►
Full Name of Payee Comfort Suites-Biltmore		ublic Distribution/Dissemination
	05	/ D D / Y Y Y Y 02 / 2014
Mailing Address 890 Brevard Rd.	Amount	
City State Zip Co	ode	532.76
Asheville ND 2880	-	n ID : SE.26958 isbursement or Obligation
Purpose of Expenditure IE-Brannon-Travel		-
Name of Federal Candidate	Support Office Sought:	House District: 00
GREGORY JOSEPH BRANNON	Oppose President	Senate State: NC
Calendar Year-To-Date Per Election for Office Sought	474.98 Disbursement Fo	r:
		(Specify) •
(a) SUBTOTAL of Itemized Independent Expenditures	······ •	546.71
(b) SUBTOTAL of Unitemized Independent Expenditures	····· •	
(c) TOTAL Independent Expenditures		
Under penalty of perjury I certify that the independent expenditures reporte with, or at the request or suggestion of, any candidate or authorized comm party committee) any political party committee or its agent.		
R. Russ Walker	M M / D	
[Electronically F	iled] Date 06 2	

ITEMIZED INDEPENDENT EXPEND	IIURES				PAGE 89 FOR LINE 24 (OF 207 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC II		NUMBER V
FREEDOMWORKS FOR AME	ERICA			С	C00499020	
Check if 24-hour report 48-hour	report New 1	report Amends repo		/ M /	/ D D / Y	Y Y Y Y
Full Name of Payee Courtyard Marriott-NC			Date	M N	c Distribution/Dis	Y Y Y
Mailing Address 1600 Westbrook Plaza	Dr.		Amou	05 Int	04	2014
City	State	Zip Code				151.09
Winston-Salam	NC	27103			D: SE.27073 ursement or Obli	nation
Purpose of Expenditure IE-Brannon-Travel		Category/ Type 002		05		2014
Name of Federal Candidate		Support	Office Sough	nt:	House Dis	strict: 00
GREGORY JOSEPH BRANNON		Oppose	Presid	ent	X Senate S	State: NC
Calendar Year-To-Date Per Election for Office Sought		143422.05	Disbursemer 2014		Primary pecify) ►	General
Full Name of Payee Courtyard Marriott-NC				of Publi	ic Distribution/Dis	ssemination 2014
Mailing Address 1600 Westbrook Plaza	Dr.		Amou	-		
City	State	Zip Code	— E.			151.09
Winston-Salam	NC	27103			D : SE.27078 ursement or Obli	igation
Purpose of Expenditure IE-Brannon-Travel		Category/ Type 002		05 ^M	/ D D / 1	2014
Name of Federal Candidate		X Support	Office Soug	nt:	House Dis	strict: 00
GREGORY JOSEPH BRANNON		Oppose	Presid	lent	X Senate S	State: NC
Calendar Year-To-Date Per Election for Office Sought		144389.93	Disbursemen 2014		X Primary pecify) ►	General
(a) SUBTOTAL of Itemized Independent	Expenditures					302.18
(b) SUBTOTAL of Unitemized Independent	nt Expenditures		• •	-7-		
(c) TOTAL Independent Expenditures			•• •			-
Under penalty of perjury I certify that the with, or at the request or suggestion of, a party committee) any political party comm	ny candidate or authoriz					
R. Russ Walker	[Electi	ronically Filed] Date	- 06 /	^D 20	/ Y Y Y 2014	T Y
Signature						

		RES				FOR LINE 2	OF 207 24 OF FORM 3X
NAME OF COMMITTEE (In F	,				FEC I		ON NUMBER 🔻
FREEDOMWORKS	FOR AMERIC	A			С	C00499020	
Check if 24-hour report	48-hour report	New re	eport Amends repo	ort filed on	M = M	/ D D /	Y Y Y Y Y
Full Name of Payee Joel Davis				Date	e of Publ	ic Distribution	Dissemination
					05	01	2014 Y
Mailing Address 200 S. 2	2nd Ave.			Amo	ount		
City		State	Zip Code				4000.00
Paden City		WV	26159			D:SE.26899 ursement or (Obligation
Purpose of Expenditure IE-Bevin-Strategic Consu	lting		Category/ Type 001		05 ^M		2014
Name of Federal Candida	ate		Support	Office Sou	aht:	House	District: 00
MATTHEW GRISWOLD E	BEVIN		Oppose		- L	X Senate	State: KY
Calendar Year-To-Da			274544.78	Disburseme 2014	ent For:	X Primary	General
Per Election for Offic	ce Sought		274344.76		Other (s	pecify) 🕨	
Full Name of Payee Dean & Deluca				Date			/Dissemination
					05	/ D D /	2014
Mailing Address 7804 E.	Rea Rd.			Am	ount		
City		State	Zip Code				8.12
Charlotte		NC	82877			D : SE.26988	
Purpose of Expenditure			Category/			oursement or (
IE-Brannon-Food/Bevera	ge		Type 002		05	03	2014
Name of Federal Candida	ate		X Support	Office Sou	ght:	House	District: 00
GREGORY JOSEPH BR	ANNON		Oppose	Pres	ident	X Senate	State: NC
Calendar Year-To-Da Per Election for Offic			142502.43	Disbursem 2014		X Primary	General
					Other (s	pecify) 🕨	
(a) SUBTOTAL of Itemize	d Independent Exper	ditures					4008.12
	a independent Expen			·· • L	-7-		4000.12
(b) SUBTOTAL of Unitemi	zed Independent Exp	enditures		• •			
(c) TOTAL Independent E	xpenditures			•••	-7		
Under penalty of perjury I with, or at the request or s party committee) any politi	suggestion of, any ca	ndidate or authorize					
R. Russ Walker		Flort	onically Filed]	M	/		Y Y
Signature			Date	e 06	20	201	4

ITEMIZED INDEPENDENT EXPENDITURES		PAGE 91 OF 207 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
FREEDOMWORKS FOR AMERICA		C C00499020
Check if 24-hour report 48-hour report New rep	ort Amends repor	t filed on
Full Name of Payee Delta Airlines		Date of Public Distribution/Dissemination
		05 / D D / Y Y Y Y 05 / 02 / 2014
Mailing Address PO Box 20706		Amount
City State	Zip Code	1041.00
Atlanta GA	30320	Transaction ID : SE.26957 Date of Disbursement or Obligation
Purpose of Expenditure IE-Brannon-Travel	Category/ Type 002	
Name of Federal Candidate	X Support	Office Sought: House District: 00
GREGORY JOSEPH BRANNON	Oppose	President X Senate State: NC
Calendar Year-To-Date	136942.22	Disbursement For: X Primary General
Per Election for Office Sought	130942.22	Other (specify)
Full Name of Payee Delta Airlines		Date of Public Distribution/Dissemination
		05 05 2015
Mailing Address PO Box 20706		Amount
City State	Zip Code	171.00
Atlanta GA	30320	Transaction ID : SE.27059
Purpose of Expenditure	Category/	Date of Disbursement or Obligation
IE-Brannon-Travel	Type 002	05 05 2014
Name of Federal Candidate	X Support	Office Sought: House District: 00
GREGORY JOSEPH BRANNON	Oppose	President X Senate State: NC
Calendar Year-To-Date	143755.02	Disbursement For: X Primary General
Per Election for Office Sought		Other (specify) ►
(a) SUBTOTAL of Itamized Independent Expenditures		1210.00
(a) SUBTOTAL of Itemized Independent Expenditures		▶ 1212.00
(b) SUBTOTAL of Uniternized Independent Expenditures		•
(c) TOTAL Independent Expenditures		
Under penalty of perjury I certify that the independent expenditures with, or at the request or suggestion of, any candidate or authorized party committee) any political party committee or its agent.		
R. Russ Walker		M = M / D = D / Y = Y = Y = Y
Signature	<i>hically Filed]</i> Date	06 20 2014
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SCHEDULE E (FEC Form 3X)

ITE	EMIZED INDEPENDENT EXPEND	ÍTURES			PAGE 92 OF 207 FOR LINE 24 OF FORM 3X
	ME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
F	REEDOMWORKS FOR AME	RICA			C C00499020
Ch	eck if24-hour report48-hour re	eport New rep	ort Amends repo		
	Full Name of Payee			Date (of Public Distribution/Dissemination
	Ensho Sushi				05 / 04 / 2014
	Mailing Address 201 E. Trade St., Ste. A			Amou	int
	City	State	Zip Code		78.20
	Charlotte	NC	28202		action ID : SE.27066 of Disbursement or Obligation
	Purpose of Expenditure IE-Brannon-Travel		Category/ Type 002	M	05 / 04 / Y Y Y Y 2014
	Name of Federal Candidate		X Support	Office Sough	nt: House District: 00
	GREGORY JOSEPH BRANNON		Oppose	Preside	
	Calendar Year-To-Date Per Election for Office Sought		143126.80	Disbursemen 2014	nt For: X Primary General Other (specify) ►
	Full Name of Payee			Date	of Public Distribution/Dissemination
	Enterprise			N	05 / D D / Y Y Y Y 02 / 2014
	Mailing Address 4202 Air Ram Rd.			Amou	unt
	City	State	Zip Code		948.58
	Charlotte	ND	28214		action ID : SE.26979 of Disbursement or Obligation
	Purpose of Expenditure IE-Brannon-Travel		Category/ Type 002		05 / D D / Y Y Y Y 2014
	Name of Federal Candidate		X Support	Office Sough	ht: House District: 00
	GREGORY JOSEPH BRANNON		Oppose	Preside	
	Calendar Year-To-Date Per Election for Office Sought		142040.53	Disbursemen 2014	nt For: X Primary General Other (specify)
	(a) SUBTOTAL of Itemized Independent E	xpenditures			1026.78
	(b) SUBTOTAL of Unitemized Independen	t Expenditures		-	
	(c) TOTAL Independent Expenditures			·· •	
	Under penalty of perjury I certify that the with, or at the request or suggestion of, ar party committee) any political party commi	ny candidate or authorized			
	R. Russ Walker	[Electron	ically Filed] Date	D 06	20 / Y Y Y Y 20 2014
	Signature				

ITEMIZED INDEPENDENT EXPENDITURES	PAGE 93 OF 207 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER V
FREEDOMWORKS FOR AMERICA	C C00499020
Check if 24-hour report 48-hour report New report Amends report filed on	
Full Name of Payee Date Enterprise Date	e of Public Distribution/Dissemination
	05 / D / Y Y Y Y 02 2014
Mailing Address 4202 Air Ram Rd. Amo	punt
City State Zip Code	-134.57
	action ID : SE.35435 e of Disbursement or Obligation
Purpose of Expenditure Category/ IE-Brannon-Travel Credit 002	05 / D D D / Y Y Y Y 05 / 02 / 2014
Name of Federal Candidate X Support Office Soug	ght: House District: 00
GREGORY JOSEPH BRANNON Oppose Presid	dent X Senate State: NC
Calendar Year-To-Date Disburseme Per Election for Office Sought 141905.96 2014	ent For: X Primary General
	Other (specify) ►
Full Name of Payee Date Facebook Date	e of Public Distribution/Dissemination
	05 / 08 / Y Y Y Y 2014
Mailing Address 15161 Collection Center Dr. Amo	punt
City State Zip Code	3000.00
enieuge	saction ID : SE.27140 e of Disbursement or Obligation
Purpose of Expenditure	M M / D D / Y Y Y Y
IE-McDaniel-Online Ads 004 Type 004	05 08 2014
Name of Federal Candidate X Support Office Souce	ght: House District: 00
CHRISTOPHER BRIAN MCDANIEL Oppose Presi	ident X Senate State: MS
Calendar Year-To-Date Disburseme Per Election for Office Sought 232869.26 2014	
	Other (specify) ►
(a) SUBTOTAL of Itemized Independent Expenditures	2865.43
(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 with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (i party committee) any political party committee or its agent.	
R. Russ Walker [Electronically Filed]	
Signature Date 06	20 2014

ITEMIZED INDEPENDENT EXPENDIT	URES				PAGE 94 FOR LINE 2	OF 207 24 OF FORM 3X
				FEC I	DENTIFICATI	ON NUMBER 🔻
FREEDOMWORKS FOR AMER	ICA			С	C00499020	
Check if 24-hour report 48-hour rep	port New re	eport Amends rep		M	/ D D /	Y I Y I Y I Y
Full Name of Payee			Date	of Publ	ic Distribution	/Dissemination
Facebook			Ν	05 ^M	/ D D / 08	2014 Y
Mailing Address 15161 Collection Center D)r.		Amou	nt		
City	State	Zip Code				3000.00
Chicago	IL	60693			D : SE.27141	Obligation
Purpose of Expenditure IE-Cochran-Facebook		Category/ Type 004			oursement or (08	
Name of Federal Candidate		Support	Office Sough	nt:	House	District: 00
THAD COCHRAN		X Oppose	Presid	ent [X Senate	State: MS
Calendar Year-To-Date		235869.26	Disbursemer 2014	t For:	X Primary	/ General
Per Election for Office Sought		233009.20		ther (s	pecify) 🕨	
Full Name of Payee Facebook			Date	of Pub	lic Distributior	/Dissemination
				05	/ D D / 09	2014
Mailing Address 15161 Collection Center D)r.		Amou	Int		
City	State	Zip Code				2000.00
Chicago	IL	60693			D : SE.27165	
Purpose of Expenditure		Category/	Date	of Dist	oursement or	Obligation
IE-Birman-Online Ads		Type 004		05	09	2014
Name of Federal Candidate		X Support	Office Sough	nt:	X House	District: 07
IGOR A BIRMAN		Oppose	Presid	ent	Senate	State: CA
Calendar Year-To-Date		20200 97	Disbursemer 2014	nt For:	X Primar	y General
Per Election for Office Sought		20299.87		Other (s	specify) 🕨	
(a) SUBTOTAL of Itemized Independent Ex	penditures		•••	-7	-7-	5000.00
(b) SUBTOTAL of Unitemized Independent	Expenditures					
(1)				-7		
(c) TOTAL Independent Expenditures			·· •			
				-7		
Under penalty of perjury I certify that the in with, or at the request or suggestion of, any party committee) any political party committe	candidate or authorize					
R. Russ Walker			M M /	DD) / Y Y	YY
Signature	[Electro	Date [Date DateDate	e 06	20	20	
Signature						

116	EMIZED INDEPENDENT EXPENDITORES					PAGE 95 FOR LINE 24	OF 207 1 OF FORM 3X
					FEC I	DENTIFICATIO	N NUMBER 🔻
	REEDOMWORKS FOR AMERICA				С	C00499020	
Ch	eck if 24-hour report 48-hour report	New rep	ort Amends repo	ort filed on	M M		Y Y Y Y Y
	Full Name of Payee Facebook			Dat	e of Publi	ic Distribution/E	Dissemination
					^M 05	/ D D / 09	2014
	Mailing Address 15161 Collection Center Dr.			Am	ount		
	City	State	Zip Code				2000.00
	Chicago	IL	60693			D:SE.27170 ursement or Ol	oligation
	Purpose of Expenditure IE-Loudermilk-Online Ads		Category/ Type 004		05 ^M		2014 Y
	Name of Federal Candidate		Support	Office Sou	ght:	X House D	District: 11
	BARRY LOUDERMILK		Oppose	Pres	ident	Senate	State: GA
	Calendar Year-To-Date		2300.94	Disbursem	ent For:	X Primary	General
	Per Election for Office Sought	nn	2300.94	2014	Other (s	pecify) 🕨	
	Full Name of Payee Facebook			Dat		ic Distribution/E	
					05	/ D D /	2014
	Mailing Address 15161 Collection Center Dr.			Am	ount		
	City	State	Zip Code				3600.00
	Chicago	IL	60693			D : SE.27202	Lineties
	Purpose of Expenditure		Category/			ursement or O	
	IE-Dinsdale-Online Ads		Type 004		05	10	2014
	Name of Federal Candidate		Support	Office Sou	ght:	House [District: 00
	SID DINSDALE		X Oppose	Pres	ident	X Senate	State: <u>NE</u>
	Calendar Year-To-Date		73092.90	Disbursem 2014	ent For:	X Primary	General
	Per Election for Office Sought	9 9			Other (s	pecify) 🕨	
	(a) SUBTOTAL of Itemized Independent Expenditures						5600.00
					-7-	-7-	
	(b) SUBTOTAL of Unitemized Independent Expenditu	res		• •			
	(c) TOTAL Independent Expenditures						
					-7	-7-	
	Under penalty of perjury I certify that the independen with, or at the request or suggestion of, any candidate party committee) any political party committee or its a	e or authorized					
	R. Russ Walker	[Electron	ically Filed]		/ 20	/ 2014	
	Signature	-	Date	,			

116	MIZED INDEPENDENT EXPENDITORES		PAGE 96 OF 207 FOR LINE 24 OF FORM 3X
	ME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
F	REEDOMWORKS FOR AMERICA		C C00499020
			0 000433020
Ch	eck if24-hour report48-hour report New re	eport Amends repo	rt filed on
	Full Name of Payee		Date of Public Distribution/Dissemination
	Facebook		05 / D D / Y Y Y Y 05 16 2014
	Mailing Address 15161 Collection Center Dr.		Amount
	City State	Zip Code	3500.00
	Chicago IL	60693	Transaction ID : SE.27242
	Purpose of Expenditure IE-Mathis-Online Ads	Category/ Type 004	Date of Disbursement or Obligation
	Name of Federal Candidate	Support	Office Sought: X House District: 06
	CHAD DR MATHIS	Oppose	President Senate State: <u>AL</u>
	Calendar Year-To-Date		Disbursement For: X Primary General
	Per Election for Office Sought	9522.13	2014 Other (specify) ►
	Full Name of Payee Facebook		Date of Public Distribution/Dissemination
			05 / ^D D / ^Y Y Y Y Y 05 16 2014
	Mailing Address 15161 Collection Center Dr.		Amount
	City State	Zip Code	2000.00
	Chicago IL	60693	Transaction ID : SE.27255
	Purpose of Expenditure	Category/	Date of Disbursement or Obligation
	IE-Schultz-Online Ads	Type 004	05 16 2014
	Name of Federal Candidate	X Support	Office Sought: X House District: 03
	MATTHEW DAVID SCHULTZ	Oppose	President Senate State: <u>IA</u>
	Calendar Year-To-Date Per Election for Office Sought	2517.80	Disbursement For:
	(a) SUBTOTAL of Itemized Independent Expenditures		5500.00
	(b) SUBTOTAL of Unitemized Independent Expenditures		
	(c) TOTAL Independent Expenditures		•
	Under penalty of perjury I certify that the independent expenditure with, or at the request or suggestion of, any candidate or authoriz party committee) any political party committee or its agent.		
	R. Russ Walker [Electro	onically Filed] Date	06 / 20 / 2014
	Signature		

116	EMIZED INDEPENDENT EXPENDITORES			PAGE 97 FOR LINE 24	OF 207
	ME OF COMMITTEE (In Full)		FEC II		N NUMBER 🔻
F	REEDOMWORKS FOR AMERICA		С	C00499020	
Ch	neck if 24-hour report 48-hour report New report Amends report		M /		Y Y Y Y Y
	Full Name of Payee Facebook	Date o	f Public	c Distribution/E	Dissemination
		М	05	/ D D / 29	2014
	Mailing Address 15161 Collection Center Dr.	Amour	ıt		
	City State Zip Code				5000.00
	Chicago IL 60693			D:SE.35523 ursement or Ol	oligation
	Purpose of Expenditure Category/ IE-McDaniel-Online Ads 004	М	05	/ 29 /	y y y y y 2014
	Name of Federal Candidate X Support	Office Sought	: [House D	District: 00
	CHRISTOPHER BRIAN MCDANIEL Oppose	Preside	nt [X Senate	State: MS
		Disbursement 2014	For:	X Primary	General
	Per Election for Office Sought		her (sp	oecify) ►	
	Full Name of Payee Facebook			ic Distribution/E	
		M	05	29	2014
	Mailing Address 15161 Collection Center Dr.	Amour	nt		
	City State Zip Code				5000.00
	Chicago IL 60693			D : SE.35524	hlipption
	Purpose of Expenditure Category/ Category/			ursement or O	
	IE-Cochran-Online Ads 004 Type 004	J L	05	29	2014
	Name of Federal Candidate Support	Office Sought		House [District: 00
	THAD COCHRAN Oppose	Preside	nt [X Senate	State: MS
	Calendar Year-To-Date Per Election for Office Sought 294335.21	Disbursement 2014		Primary	General
	<u>.</u>				
	(a) SUBTOTAL of Itemized Independent Expenditures	Image: A start of the start	-7-	-7-	10000.00
	(b) SUBTOTAL of Unitemized Independent Expenditures	•	7		
	(c) TOTAL Independent Expenditures	•			
	Under penalty of perjury I certify that the independent expenditures reported herein were n with, or at the request or suggestion of, any candidate or authorized committee or agent of party committee) any political party committee or its agent.				
	R. Russ Walker [Electronically Filed] Date	M M /	^D 20	/ Y Y 2014	
	Signature		_		

ITEMIZED INDEPENDENT EXPENDITORI	29				PAGE 98 OF 207 FOR LINE 24 OF FORM 3X
				FEC I	DENTIFICATION NUMBER V
FREEDOMWORKS FOR AMERIC	4			С	C00499020
Check if 24-hour report 48-hour report	New rep	port Amends repo		1 - M	/ D = D / Y = Y = Y
Full Name of Payee			Date	of Publi	ic Distribution/Dissemination
Facebook			P	05 ^M	/ D D / Y Y Y Y 29 2014
Mailing Address 15161 Collection Center Dr.			Amou		
City	State	Zip Code			3500.00
Chicago	IL	60693			D : SE.35539 ursement or Obligation
Purpose of Expenditure IE-Mathis-Online Ads		Category/ Type 004		05	/ <u>29</u> / <u>2014</u>
Name of Federal Candidate		Support	Office Sougl	nt:	X House District: 06
CHAD DR MATHIS		Oppose	Presid	ent	Senate State: AL
Calendar Year-To-Date		23883.43	Disbursemer 2014	nt For:	Primary General
Per Election for Office Sought	- J - J	20000.40		Other (s	pecify) ►
Full Name of Payee Facebook					ic Distribution/Dissemination
			[05	/ D D / Y Y Y Y 31 / 2014
Mailing Address 15161 Collection Center Dr.			Amo	unt	
City	State	Zip Code			1500.00
Chicago	IL	60693			D: SE.32539 ursement or Obligation
Purpose of Expenditure IE-McDaniel-Online Ads		Category/ Type 004		05	/ <u>31</u> / <u>2014</u>
Name of Federal Candidate		Support	Office Soug	nt:	House District: 00
CHRISTOPHER BRIAN MCDANIEL		Oppose	Presic	lent [Senate State: <u>MS</u>
Calendar Year-To-Date Per Election for Office Sought		324578.28	Disburseme 2014		Primary General
(a) SUBTOTAL of Itemized Independent Expend	tures				5000.00
(b) SUBTOTAL of Unitemized Independent Expe	nditures		• •		
(c) TOTAL Independent Expenditures			•		
Under penalty of perjury I certify that the indepe with, or at the request or suggestion of, any can party committee) any political party committee or	didate or authorize				
R. Russ Walker	[Electron	nically Filed]	, 06 /	20	/ Y Y Y Y Y 2014
Signature		Date	, 00	20	

ITEMIZED INDEPENDENT EXPENDITURES		PAGE 99 OF 207 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)	FEC I	DENTIFICATION NUMBER V
FREEDOMWORKS FOR AMERICA	C	C00499020
Check if 24-hour report 48-hour report A	mends report filed on	/ D = D / Y = Y = Y = Y
Full Name of Payee	Date of Publ	ic Distribution/Dissemination
Facebook	M – M	
Mailing Address 15161 Collection Center Dr.	05 Amount	31 2014
City State Zip Code		1500.00
Chicago IL 60693	Transaction II	
Purpose of Expenditure IE-Cochran-Online Ads Category Type	/ 004	/ D D / Y Y Y Y 31 2014
Name of Federal Candidate	Support Office Sought:	House District: 00
THAD COCHRAN	Oppose President	Senate State: <u>MS</u>
Calendar Year-To-Date Per Election for Office Sought 326078.	28 Disbursement For: 2014 Other (sp	Primary General
Full Name of Payee		lic Distribution/Dissemination
Fox & Hound	05	/ D D / Y Y Y Y 03 2014
Mailing Address 8711 Lindholm Dr.	Amount	03 2014
	Anount	
City State Zip Code Charlotte NC 28078	Transaction	588.35 D : SF 26986
Purpose of Expenditure		pursement or Obligation
IE-Brannon-Food/Beverage Category		/ D D / Y Y Y Y 2014
Name of Federal Candidate	Support Office Sought:	House District: 00
GREGORY JOSEPH BRANNON	Oppose President	Senate State: <u>NC</u>
Calendar Year-To-Date Per Election for Office Sought 142494.		Primary General
(a) SUBTOTAL of Itemized Independent Expenditures		2088.35
(b) SUBTOTAL of Unitemized Independent Expenditures	······ .	
(c) TOTAL Independent Expenditures	• •	
Under penalty of perjury I certify that the independent expenditures reported h with, or at the request or suggestion of, any candidate or authorized committee party committee) any political party committee or its agent.		
R. Russ Walker [Electronically Filed]		
Signature	Date 06 20	2014

ITE		RES				PAGE 100 OF 2 FOR LINE 24 OF FOR	207 3M 3X
	ME OF COMMITTEE (In Full)				FEC I	DENTIFICATION NUMBE	R V
F	REEDOMWORKS FOR AMERIC	CA				C00499020	
					U	000439020	
Ch	eck if 24-hour report 48-hour report	New rep	ort Amends repo	ort filed o	n		Y
	Full Name of Payee				Date of Publi	c Distribution/Disseminat	ion
	Candace Franklin				05	/ D D / Y Y Y Y 2014	
	Mailing Address 1687 KY Hwy 1247				Amount		
	City	State	Zip Code			4000.0	00
	Stanford	KY	40484		ransaction II	D : SE.26901 ursement or Obligation	
	Purpose of Expenditure IE-Bevin-Strategic Consulting		Category/ Type 001		05	/ D D / Y Y Y 01 2014	Ý
	Name of Federal Candidate		Support	Office S	Sought:	House District:	00
	MATTHEW GRISWOLD BEVIN		Oppose	F	President	K Senate State:	KY
	Calendar Year-To-Date Per Election for Office Sought		282544.78	Disburs 2014	ement For:		eneral
	Full Name of Payee					ic Distribution/Disseminat	tion
	Freedomworks, Inc.					/ D D / Y Y Y 01 2014	Y Y
	Mailing Address 400 N Capitol St., NW					2014	_
	Suite 735				Amount		
	City	State	Zip Code			2.7	74
	Washington	DC	20001			D : SE.26902 ursement or Obligation	
	Purpose of Expenditure IE-McConnell-Email/Social Media/Printing		Category/ Type 004		05	/ D D / Y Y Y Y 2014	1 1
	Name of Federal Candidate		Support	Office \$	Sought:	House District:	00
	MITCH MCCONNELL		X Oppose	F	President	Senate State:	KY
	Calendar Year-To-Date Per Election for Office Sought		282547.52	Disburs 2014	ement For:	X Primary Ge pecify) ►	eneral
							_
	(a) SUBTOTAL of Itemized Independent Exper	nditures				4002.74	
	(b) SUBTOTAL of Uniternized Independent Exp	penditures		• •			
	(c) TOTAL Independent Expenditures			►			
١	Under penalty of perjury I certify that the inde with, or at the request or suggestion of, any ca party committee) any political party committee	andidate or authorized					
	R. Russ Walker	[Electron	ically Filed]	M		/ Y Y Y Y Y	
	Signature		Date	€ 06	20	2014	
4							

TEMIZED INDEPENDENT EXPENDITU	RES				PAGE 101 FOR LINE	OF 207 24 OF FORM 3X
	<u>۲</u>			FEC	IDENTIFICAT	ION NUMBER V
FREEDOMWORKS FOR AMERIC	A			С	C00499020	
Check if 24-hour report 48-hour report	New re	eport Amends repo		M	/ D D /	Y Y Y Y Y
Full Name of Payee			Date	of Pub	lic Distributior	n/Dissemination
Freedomworks, Inc.			- F	^M 05	/ D D / 01	2014
Mailing Address 400 N Capitol St., NW			Amo	Int		
Suite 735						
City	State	Zip Code	- I L.			50.33
Washington	DC	20001			D: SE.26913 oursement or	
Purpose of Expenditure IE-Brannon-Travel		Category/ Type 002		^M 05	/ 01 /	2014
Name of Federal Candidate		Support	Office Soug	ht:	House	District: 00
GREGORY JOSEPH BRANNON		Oppose	Presic	lent	X Senate	State: NC
Calendar Year-To-Date		134807.05	Disburseme	nt For:	X Primar	y General
Per Election for Office Sought		134007.03		Other (s	specify) 🕨	
Full Name of Payee Freedomworks, Inc.					lic Distributior	n/Dissemination
				05	/ D D /	2014
Mailing Address 400 N Capitol St., NW			Amo	unt		
Suite 735						
City	State DC	Zip Code	Trans	action	ID : SE.26914	142.49
Washington	DC	20001			bursement or	
Purpose of Expenditure IE-Hagan-Email/Social Media/Printing		Category/ Type 004		^M 05	/ D D /	2014
Name of Federal Candidate		Support	Office Soug	ht:	House	District: 00
KAY R HAGAN		X Oppose	Presid	dent	X Senate	State: NC
Calendar Year-To-Date		124040 54	Disburseme	nt For:	X Primar	y General
Per Election for Office Sought		134949.54		Other (s	specify) 🕨	
(a) SUBTOTAL of Itemized Independent Expen	ditures		·· •			192.82
(b) SUBTOTAL of Unitemized Independent Exp	penditures					
(c) TOTAL Independent Expenditures			••••	7	n 1 47n	
Under penalty of perjury I certify that the indep with, or at the request or suggestion of, any ca party committee) any political party committee of	ndidate or authorize					
R. Russ Walker	[Electro	onically Filed]	o 06	20	20 ⁻	14 Y
Signature		Date		20	20	

TTEMIZED INDEPENDENT EXPENDI	URES				FOR LINE	2 OF 207 24 OF FORM 3X
NAME OF COMMITTEE (In Full)	_			FEC I		
FREEDOMWORKS FOR AME	RICA			С	C00499020	
Check if 24-hour report 48-hour rep	port New re	eport Amends repo		M = M	/ D D /	YYYYY
Full Name of Payee			Date	of Publ	lic Distribution	/Dissemination
Freedomworks, Inc.				05	/ D D / 01	2014 Y
Mailing Address 400 N Capitol St., NW			Amou	unt		
Suite 735			Amot	1111		
City	State	Zip Code				60.97
Washington	DC	20001			D: SE.26924 oursement or	Obligation
Purpose of Expenditure IE-Sasse-Email/Social Media/Printing		Category/ Type 004		05	/ 01 /	2014
Name of Federal Candidate		Support	Office Sougl	nt:	House	District: 00
BENJAMIN E SASSE		Oppose	Presid	L	X Senate	State: NE
Calendar Year-To-Date			Disbursemer	l		
Per Election for Office Sought		20970.03	2014	Other (s	pecify) ►	
Full Name of Payee			Date	of Pub	lic Distributior	n/Dissemination
Freedomworks, Inc.			- I F	05	/ 0 0 /	2014
Mailing Address 400 N Capitol St., NW				_		2014
Suite 735			Amo	unt		
City	State	Zip Code				97.20
Washington	DC	20001			ID : SE.26931 oursement or	
Purpose of Expenditure		Category/		M M	/ D D /	YYYYY
IE-Lynch-Email/Social Media/Printing		Type 004	L	05	01	2014
Name of Federal Candidate		X Support	Office Soug	ht:	X House	District: 14
MATT LYNCH		Oppose	Presic	lent	Senate	State: OH
Calendar Year-To-Date			Disburseme	nt For:	X Primar	y General
Per Election for Office Sought		78329.23	2014	Other (s	specify) 🕨	
(a) SUBTOTAL of Itemized Independent Ex	penditures					158.17
				_		
(b) SUBTOTAL of Unitemized Independent	Expenditures		• •	-7		
(a) TOTAL Independent Expanditures			_			
(c) TOTAL Independent Expenditures			·· •	-7	-7-	
Under penalty of perjury I certify that the in with, or at the request or suggestion of, any party committee) any political party committe	y candidate or authoriz	•		•		
R. Russ Walker	Flort	onically Filed]		20		Y Y
Signature		Date	9 06	20	20	

TEMIZED INDEPENDENT EXPENDITURE	:5				PAGE 103 OF 207 FOR LINE 24 OF FORM 3X
				FEC	IDENTIFICATION NUMBER V
FREEDOMWORKS FOR AMERICA	N .			С	C00499020
Check if 24-hour report 48-hour report	New rep	port Amends repo	ort filed on	M = M	/ D D / Y Y Y Y
Full Name of Payee			Dat	e of Pub	lic Distribution/Dissemination
Freedomworks, Inc.				^M 05	/ D D / Y Y Y Y 01 2014
Mailing Address 400 N Capitol St., NW			Am	ount	
Suite 735					
City	State	Zip Code			106.26
Washington	DC	20001			D: SE.27039 pursement or Obligation
Purpose of Expenditure IE-McDaniel-Email/Social Media/Printing		Category/ Type 004		05 ^M	/ D D / Y Y Y Y 01 / 2014
Name of Federal Candidate		Support	Office Sou	ght:	House District: 00
CHRISTOPHER BRIAN MCDANIEL		Oppose		-	X Senate State: MS
Calendar Year-To-Date Per Election for Office Sought		156775.53	Disbursem 2014		Primary General
Full Name of Payee			Dat		lic Distribution/Dissemination
Freedomworks, Inc.				M M	/ D D / Y Y Y Y
Mailing Address 400 N Capitol St., NW				05	01 2014
Suite 735			Am	ount	
City	State	Zip Code			5.49
Washington	DC	20001			ID : SE.35422 oursement or Obligation
Purpose of Expenditure IE-Shannon-Email/Social Media/Printing		Category/ Type 004		^M 05 ^M	/ 01 / Y Y Y Y 2014
Name of Federal Candidate		Support	Office Sou	ight:	House District: 00
T W SHANNON		Oppose	Pres	sident	Senate State: OK
Calendar Year-To-Date Per Election for Office Sought		59.12	Disbursem 2014		Primary General
(a) SUBTOTAL of Itemized Independent Expendit	ures		▶		111.75
(b) SUBTOTAL of Unitemized Independent Exper	nditures			7	
(c) TOTAL Independent Expenditures			•••	-7	
Under penalty of perjury I certify that the indeper with, or at the request or suggestion of, any cand party committee) any political party committee or i	idate or authorize				
R. Russ Walker	[Electron	nically Filed] Date		/ 20	2014
Signature			·		

ITEMIZED INDEPENDENT EXPEND	ITURES			PAGE 104 OF 207 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER V
FREEDOMWORKS FOR AME	RICA			C C00499020
Check if 24-hour report 48-hour r	report New rep	port Amends repo	ort filed on	
Full Name of Payee			Dat	ate of Public Distribution/Dissemination
Freedomworks, Inc.				05 / D D / Y Y Y Y 02 2014
Mailing Address 400 N Capitol St., NW			Am	nount
Suite 735 City	State	Zip Code		951.68
Washington	DC	20001		nsaction ID : SE.26956 ate of Disbursement or Obligation
Purpose of Expenditure IE-Hagan-Email/Social Media/Printing		Category/ Type 004		05 / 02 / Y Y Y 2014
Name of Federal Candidate		Support	Office Sou	ought: House District: 00
KAY R HAGAN		X Oppose	Pres	esident X Senate State: NC
Calendar Year-To-Date Per Election for Office Sought		135901.22	Disbursem 2014	ment For: X Primary General Other (specify) ►
Full Name of Payee			Dat	ate of Public Distribution/Dissemination
Freedomworks, Inc.				05 02 2014
Mailing Address 400 N Capitol St., NW				05 02 2014
Suite 735			Am	mount
City	State	Zip Code		1870.85
Washington	DC	20001		insaction ID : SE.26968 ate of Disbursement or Obligation
Purpose of Expenditure IE-Brannon-Travel		Category/ Type 002		M 05 / D D / Y Y Y Y 2014
Name of Federal Candidate		Support	Office Sou	ought: House District: 00
GREGORY JOSEPH BRANNON		Oppose	Pres	esident State: NC
Calendar Year-To-Date Per Election for Office Sought		141045.89	Disbursem 2014	ment For: X Primary General Other (specify) ►
(a) SUBTOTAL of Itemized Independent I	Expenditures			2822.53
(b) SUBTOTAL of Unitemized Independer	nt Expenditures		• •	
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the with, or at the request or suggestion of, a party committee) any political party comm	ny candidate or authorize			
R. Russ Walker	[Electro	nically Filed]		/ D D / Y Y Y Y Y Y Y 20 2014
Signature		Date	, 00	20 2014

ITEMIZED INDEPENDENT EXPENDITU	IRES				PAGE 105 OF 207 FOR LINE 24 OF FORM 3X
	<u></u>			FEC	IDENTIFICATION NUMBER V
FREEDOMWORKS FOR AMERI	CA			С	C00499020
Check if 24-hour report 48-hour report	rt 🗌 New rep	port Amends repo	ort filed on	M M	/ D = D / Y = Y = Y = Y
Full Name of Payee			Da	te of Pub	lic Distribution/Dissemination
Freedomworks, Inc.				^M 05	/ D D / Y Y Y Y 02 2014
Mailing Address 400 N Capitol St., NW			Am	nount	
Suite 735	.	7	E		
City Washington	State DC	Zip Code 20001	Trar	saction	196.84 ID : SE.27031
					pursement or Obligation
Purpose of Expenditure IE-Sasse-Email/Social Media/Printing		Category/ Type 004		^M 05	/ D D / Y Y Y Y 02 / 2014
Name of Federal Candidate		Support	Office So	ught:	House District: 00
BENJAMIN E SASSE		Oppose	Pre	sident	Senate State: <u>NE</u>
Calendar Year-To-Date Per Election for Office Sought		20352.86	Disbursen 2014	1	X Primary General specify) ▶
Full Name of Payee			Da	ite of Pub	lic Distribution/Dissemination
Freedomworks, Inc.				05	/ D D / Y Y Y Y 02 2014
Mailing Address 400 N Capitol St., NW					02 2014
Suite 735			An	nount	
City	State	Zip Code			106.26
Washington	DC	20001			ID : SE.27042 bursement or Obligation
Purpose of Expenditure IE-McDaniel-Email/Social Media/Printing		Category/ Type 004		05 ^M	/ D D / Y Y Y Y 02 2014
Name of Federal Candidate		Support	Office So	ught:	House District: 00
CHRISTOPHER BRIAN MCDANIEL		Oppose	Pre	sident	Senate State: MS
Calendar Year-To-Date Per Election for Office Sought		158105.47	Disburser 2014	1	Primary General
(a) SUBTOTAL of Itemized Independent Expe	nditures			7	303.10
(b) SUBTOTAL of Uniternized Independent Ex	penditures		••	-7	
(c) TOTAL Independent Expenditures			·· •		
Under penalty of perjury I certify that the inder with, or at the request or suggestion of, any c party committee) any political party committee	andidate or authorize				
R. Russ Walker	[Electron	nically Filed] Date	e 06	/ 20	D / Y Y Y Y Y 2014
Signature					

ITEMIZED INDEPENDENT EXPENDITORES	PAGE 106 OF 207 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER V
FREEDOMWORKS FOR AMERICA	С С00499020
Check if24-hour report48-hour report New report Amends report filed	ion / D = D / Y = Y = Y = Y
Full Name of Payee	Date of Public Distribution/Dissemination
Freedomworks, Inc.	M M / D D / Y Y Y Y 05 02 2014
Mailing Address 400 N Capitol St., NW	Amount
Suite 735	
City State Zip Code	2.74
Washington DC 20001	Transaction ID : SE.27271 Date of Disbursement or Obligation
Purpose of Expenditure Category/ IE-McConnell-Email/Social Media/Printing 004	05 / D D / Y Y Y Y 02 / 2014
Name of Federal Candidate Office	e Sought: House District: 00
MITCH MCCONNELL	President X Senate State: KY
Calendar Year-To-Date Per Election for Office Sought 282550.26 Disbu	ursement For: X Primary General Other (specify) ►
Full Name of Payee	Date of Public Distribution/Dissemination
Freedomworks, Inc.	M M / D D / Y Y Y
Mailing Address 400 N Capitol St., NW	05 02 2014
Suite 735	Amount
City State Zip Code	5.49
Washington DC 20001	Transaction ID : SE.35423 Date of Disbursement or Obligation
Purpose of Expenditure Category/ IE-Shannon-Email/Social Media/Printing 004	05 / 02 / Y Y Y Y 2014
Name of Federal Candidate Support Offic	e Sought: House District: 00
T W SHANNON Oppose	President X Senate State: OK
Calendar Year-To-Date Disb Per Election for Office Sought 64.61 2014	
	Other (specify) ►
(a) SUBTOTAL of Itemized Independent Expenditures	8.23
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not m with, or at the request or suggestion of, any candidate or authorized committee or agent of eithe party committee) any political party committee or its agent.	
R. Russ Walker [Electronically Filed]	06 20 2014
Signature	

ITEMIZED INDEPENDENT EXPENDITURES					PAGE 107 OF 207 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				EEC II	DENTIFICATION NUMBER V
FREEDOMWORKS FOR AMERICA					
				C	C00499020
Check if 24-hour report 48-hour report	New repo	ort Amends rep	oort filed	on	
Full Name of Payee				Date of Publi	c Distribution/Dissemination
Freedomworks, Inc.				^M 05	/ D D / Y Y Y Y 02 2014
Mailing Address 400 N Capitol St., NW				Amount	
Suite 735 City S	State	Zip Code			158.02
-	DC	20001		Transaction II	
Purpose of Expenditure IE-Lynch-Email/Social Media/Printing		Category/ Type 004	4	05	/ D D / Y Y Y Y 02 / 2014
Name of Federal Candidate		X Support	Office	e Sought:	K House District: 14
MATT LYNCH		Oppose		President	Senate State: OH
Calendar Year-To-Date Per Election for Office Sought		78487.25	Disbu 2014	rsement For:	X Primary General Decify) ►
Full Name of Payee				Date of Publi	ic Distribution/Dissemination
Freedomworks, Inc.				05	/ D D / Y Y Y Y 03 2014
Mailing Address 400 N Capitol St., NW				Amount	
Suite 735				Amount	
City 5	State	Zip Code			250.71
	DC	20001		Transaction II Date of Disb	D : SE.26994 ursement or Obligation
Purpose of Expenditure IE-Brannon-Travel		Category/ Type 002	2	05	/ D D / Y Y Y Y 03 / 2014
Name of Federal Candidate		Support	Office	e Sought:	House District: 00
GREGORY JOSEPH BRANNON		Oppose		President	Senate State: <u>NC</u>
Calendar Year-To-Date Per Election for Office Sought		142815.32	Disbu 2014		Primary General
				Other (s	pecify)
(a) SUBTOTAL of Itemized Independent Expenditures			🕨		408.73
(b) SUBTOTAL of Unitemized Independent Expenditure	es		···· ►		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
(c) TOTAL Independent Expenditures			▶		
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candidate party committee) any political party committee or its age	or authorized				
R. Russ Walker	[Electroni	cally Filed]		M / D D	/ 7 7 7 7 7
Signature		_ Dat	ite 0	6 20	2014

ITEMIZED INDEPENDENT EXPEND	TURES				FOR LINE 2	OF 207 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC I		
FREEDOMWORKS FOR AME	RICA			С	C00499020	
					00499020	
Check if 24-hour report 48-hour re	eport New re	port Amends repo		M = M	/ D D /	Y Y Y Y
Full Name of Payee			Date	of Publ	lic Distribution/	Dissemination
Freedomworks, Inc.				05	/ D D / 04 /	2014 Y
Mailing Address 400 N Capitol St., NW			Amo	unt		
Suite 735						
City	State	Zip Code				583.57
Washington	DC	20001			D: SE.27048 oursement or C	Obligation
Purpose of Expenditure IE-McDaniel-Travel		Category/ Type 002		05	/ D D / 04	2014
Name of Federal Candidate		Support	Office Soug	ht:	House	District: 00
CHRISTOPHER BRIAN MCDANIEL		Oppose	Presid	L	X Senate	State: MS
Calendar Year-To-Date		188694.04	Disburseme	nt For:	X Primary	General
Per Election for Office Sought		100034.04		Other (s	pecify) ►	
Full Name of Payee Freedomworks, Inc.			Date	of Publ	lic Distribution/	Dissemination
				05	/ D D / 04	2014 Y
Mailing Address 400 N Capitol St., NW			Amo	unt		
Suite 735			Amo	unt		
City	State	Zip Code			,	59.67
Washington	DC	20001			D:SE.27072	Obligation
Purpose of Expenditure IE-Brannon-Travel		Category/ 002		^M 05	/ D D / 04	2014
		Туре		00		2014
Name of Federal Candidate		X Support	Office Soug	ht:	House	District: 00
GREGORY JOSEPH BRANNON		Oppose	Presi	dent	X Senate	State: <u>NC</u>
Calendar Year-To-Date Per Election for Office Sought		143270.96	Disburseme 2014		Primary	General
				Other (s	specify) 🕨	
			_			
(a) SUBTOTAL of Itemized Independent E	xpenditures		•••	-7	-7-	643.24
(b) SUPTOTAL of Uniternized Independen	t Expandituraa					
(b) SUBTOTAL of Unitemized Independen	Experiorures		• •			
(c) TOTAL Independent Expenditures						
(-)				-7	-7-	
Under penalty of perjury I certify that the with, or at the request or suggestion of, ar party committee) any political party commit	ny candidate or authorize					
R. Russ Walker	[Flaatur	nically Filed]	M /			YYY
Signature		Date	9 06	20	201	4
ITEMIZED INDEPENDENT EXPENDITURES		PAGE 109 OF 207 FOR LINE 24 OF FORM 3X				
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NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼				
FREEDOMWORKS FOR AMERICA		C C00499020				
Check if 24-hour report 48-hour report New rep	port Amends report	filed on				
Full Name of Payee Freedomworks, Inc.		Date of Public Distribution/Dissemination				
		05 / D D / Y Y Y Y 05 / 2014				
Mailing Address 400 N Capitol St., NW		Amount				
Suite 735						
City State	Zip Code	97.12				
Washington DC	20001	Transaction ID : SE.27075 Date of Disbursement or Obligation				
Purpose of Expenditure IE-Brannon-Travel	Category/ Type 002	05 / Y Y Y Y 05 05 / 2014				
Name of Federal Candidate	Support C	Dffice Sought: House District: 00				
GREGORY JOSEPH BRANNON	Oppose	President X Senate State: <u>NC</u>				
Calendar Year-To-Date		Disbursement For: X Primary General				
Per Election for Office Sought	144176.08 2	014 Other (specify) ▶				
Full Name of Payee		Date of Public Distribution/Dissemination				
Freedomworks, Inc.		05 05 2014				
Mailing Address 400 N Capitol St., NW		Amount				
Suite 735		Amount				
City State	Zip Code	1607.86				
Washington DC	20001	Transaction ID : SE.27080 Date of Disbursement or Obligation				
Purpose of Expenditure IE-Hagan-Email/Social Media/Printing	Category/ Type 004	05 / 05 / <u>Y Y Y Y</u> 05 05 / 2014				
Name of Federal Candidate	Support (Office Sought: House District: 00				
KAY R HAGAN	X Oppose	President X Senate State: NC				
Calendar Year-To-Date		Disbursement For: X Primary General				
Per Election for Office Sought	145999.49	Other (specify)				
(a) SUBTOTAL of Itemized Independent Expenditures	······	1704.98				
(b) CURTOTAL of Unitamized Independent Evenenditures						
(b) SUBTOTAL of Uniternized Independent Expenditures						
(c) TOTAL Independent Expenditures						
Under penalty of perjury I certify that the independent expenditures with, or at the request or suggestion of, any candidate or authorized party committee) any political party committee or its agent.						
R. Russ Walker	rically Filedl	M M / D D / Y Y Y Y				
Signature	<i>nically Filed]</i> Date	06 20 2014				

ITEMIZED INDEPENDENT EXPENDITUR	ES				PAGE 110 OF 207 FOR LINE 24 OF FORM 3X
	٨			FEC	IDENTIFICATION NUMBER V
FREEDOMWORKS FOR AMERIC	A			С	C00499020
Check if 24-hour report 48-hour report	New rep	port Amends repo	ort filed on	M = M	/ D = D / Y = Y = Y = Y
Full Name of Payee			Dat	e of Pub	lic Distribution/Dissemination
Freedomworks, Inc.				^M 05 ^M	/ D D / Y Y Y Y 05 2014
Mailing Address 400 N Capitol St., NW			Am	ount	
Suite 735					
City	State	Zip Code			3842.53
Washington	DC	20001			D: SE.27127 bursement or Obligation
Purpose of Expenditure IE-McDaniel-Travel		Category/ Type 002		05	/ D D / Y Y Y Y 05 / 2014
Name of Federal Candidate		Support	Office Sou	ght:	House District: 00
CHRISTOPHER BRIAN MCDANIEL		Oppose	Pres	ident	Senate State: <u>MS</u>
Calendar Year-To-Date Per Election for Office Sought		192536.57	Disbursem 2014		Primary General
Full Name of Payee			Dat	te of Pub	lic Distribution/Dissemination
Freedomworks, Inc.				05	
Mailing Address 400 N Capitol St., NW				03	05 2014
Suite 735			Am	ount	
City	State	Zip Code			719.71
Washington	DC	20001			ID : SE.27128 oursement or Obligation
Purpose of Expenditure IE-McDaniel-Email/Social Media/Printing		Category/ Type 004		05	/ 05 / Y Y Y 2014
Name of Federal Candidate		Support	Office Sou	ight:	House District: 00
CHRISTOPHER BRIAN MCDANIEL		Oppose	Pres	sident	Senate State: MS
Calendar Year-To-Date Per Election for Office Sought		193256.28	Disbursem 2014		Primary General
(a) SUBTOTAL of Itemized Independent Expend	litures				4562.24
(b) SUBTOTAL of Uniternized Independent Expe	enditures		•• ►	-7	
(c) TOTAL Independent Expenditures					
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any can party committee) any political party committee or	didate or authorize				
R. Russ Walker	[Electro	nically Filed] Date	06	/ 20	2014
Signature					

ITEMIZED INDEPENDENT EXPENDITURES					PAGE 111 OF 207 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC I	DENTIFICATION NUMBER V
FREEDOMWORKS FOR AMERICA				С	C00499020
Check if 24-hour report 48-hour report	New rep	ort Amends repo		M = M	
Full Name of Payee Freedomworks, Inc.			Date	of Publi	ic Distribution/Dissemination
				05	/ D D / Y Y Y Y 05 2014
Mailing Address 400 N Capitol St., NW			Amo	unt	
Suite 735					
,	State	Zip Code			155.27
Washington	DC	20001			D: SE.27272 ursement or Obligation
Purpose of Expenditure IE-McConnell-Email/Social Media/Printing		Category/ Type 004] [05	/ D D / Y Y Y Y 05 / 2014
Name of Federal Candidate		Support	Office Soug	ht:	House District: 00
MITCH MCCONNELL		X Oppose	Presid	L	X Senate State: KY
Calendar Year-To-Date		000705 50	Disburseme	nt For:	X Primary General
Per Election for Office Sought	, , ,	282705.53	2014	Other (s	pecify) ►
Full Name of Payee Freedomworks, Inc.			Date	of Publ	ic Distribution/Dissemination
				^M 05	/ D D / Y Y Y Y 05 2014
Mailing Address 400 N Capitol St., NW			Amo	unt	
Suite 735			Amo	um	
City	State	Zip Code			147.25
Washington	DC	20001			D: SE.35425 pursement or Obligation
Purpose of Expenditure IE-Lynch-Email/Social Media/Printing		Category/ Type 004		^M 05	/ D D / Y Y Y Y 05 2014
Name of Foderal Condidate					
Name of Federal Candidate		Support	Office Soug	iht:	House District: <u>14</u>
		Oppose	Presi	L	Senate State: OH
Calendar Year-To-Date Per Election for Office Sought		78634.50	Disburseme 2014	ent For:	Y Primary General
	9 9	1 1 10 1		Other (s	pecify) ►
			_		
(a) SUBTOTAL of Itemized Independent Expenditures				-7-	302.52
(b) SUBTOTAL of Unitemized Independent Expenditur	res				
				-7	
(c) TOTAL Independent Expenditures					
				-7	
Under penalty of perjury I certify that the independen with, or at the request or suggestion of, any candidate party committee) any political party committee or its a	e or authorized				
party commuted, any pointed party commuted of its a	90m.				
R. Russ Walker	[Electron	ically Filed] Date	06	20	/ Y Y Y Y Y 2014
Signature				L	

ITEMIZED INDEPENDENT EXPENDI	IURES				FOR LINE	2 OF 207 24 OF FORM 3X
NAME OF COMMITTEE (In Full)	_			FEC I		
FREEDOMWORKS FOR AMEI	RICA			С	C00499020	
Check if 24-hour report 48-hour re	port New re	port Amends repo		1 – M	/ D D /	Y Y Y Y Y
Full Name of Payee			Date	of Publi	ic Distribution	n/Dissemination
Freedomworks, Inc.			1	05	/ D D / 06 /	2014 Y
Mailing Address 400 N Capitol St., NW			Amou	unt		
Suite 735			Amot			
City	State	Zip Code		7		157.17
Washington	DC	20001			D: SE.27130 ursement or	Obligation
Purpose of Expenditure IE-McDaniel-Travel		Category/ Type 002		05	/ 06 /	2014
Name of Federal Candidate		Support	Office Sough	nt:	House	District: 00
CHRISTOPHER BRIAN MCDANIEL		Oppose	Presid	L	X Senate	State: MS
Calendar Year-To-Date			Disbursemer	L	X Primar	
Per Election for Office Sought		196665.45	2014		pecify) ►	, <u> </u>
Full Name of Payee			Date	of Publ	lic Distributior	n/Dissemination
Freedomworks, Inc.			E P	05	/ D D / 06	2014
Mailing Address 400 N Capitol St., NW			L	00	00	2014
Suite 735			Amou	ınt		
City	State	Zip Code				548.74
Washington	DC	20001			D: SE.27131 oursement or	
Purpose of Expenditure		Category/		M M	/ D D /	YYYYY
IE-McDaniel-Email/Social Media/Printing		Type 004	L	05	06	2014
Name of Federal Candidate		X Support	Office Sough	nt:	House	District: 00
CHRISTOPHER BRIAN MCDANIEL		Oppose	Presid	ent	X Senate	State: MS
Calendar Year-To-Date			Disbursemer	nt For:	X Primar	y General
Per Election for Office Sought		197214.19	2014	Other (s	pecify) ►	
(a) SUBTOTAL of Itemized Independent Ex	penditures					705.91
(b) SUBTOTAL of Unitemized Independent	Expenditures		• •	-7		
			_			
(c) TOTAL Independent Expenditures			·· •	-7	-7-	
Under penalty of perjury I certify that the i with, or at the request or suggestion of, an party committee) any political party committ	y candidate or authorize			•		
R. Russ Walker	[1]4	migally Filed	M /	DDD		YYY
Signature		mically Filed] Date	9 06	20	20	14
-						

ITEMIZED INDEPENDENT EXPENDITURES					PAGE 113 OF 207 FOR LINE 24 OF FORM 3X
				FEC I	DENTIFICATION NUMBER V
FREEDOMWORKS FOR AMERICA				С	C00499020
Check if 24-hour report 48-hour report	New repo	ort Amends rep	ort filed c	on	/ D = D / Y = Y = Y = Y
Full Name of Payee				Date of Publ	ic Distribution/Dissemination
Freedomworks, Inc.				^M 05	/ D D / Y Y Y Y 06 2014
Mailing Address 400 N Capitol St., NW				Amount	
Suite 735					
	State	Zip Code		L,	1578.88
	DC	20001			D: SE.35427 pursement or Obligation
Purpose of Expenditure IE-Hagan-Email/Social Media/Printing		Category/ Type 004		05	/ D D / Y Y Y Y 06 2014
Name of Federal Candidate		Support	Office	Sought:	House District: 00
KAY R HAGAN		X Oppose		- L	Senate State: <u>NC</u>
Calendar Year-To-Date Per Election for Office Sought		148354.10	Disburs 2014	sement For:	Primary General
				Other (s	pecify) ►
Full Name of Payee Freedomworks, Inc.				Date of Publ	lic Distribution/Dissemination
Mailing Address				05	06 2014
400 N Capitol St., NVV				Amount	
City Suite 735	State	Zip Code		· · · ·	150.62
	DC	20001	т		D : SE.35428 pursement or Obligation
Purpose of Expenditure IE-Lynch-Email/Social Media/Printing		Category/ Type 004		05 05	/ D06 / Y Y Y 2014
Name of Federal Candidate		Support	Office	Sought:	X House District: <u>14</u>
MATT LYNCH		Oppose		President	Senate State: OH
Calendar Year-To-Date Per Election for Office Sought		79553.29	Disbur 2014	sement For:	Primary General
				Other (s	specify) ►
(a) SUBTOTAL of Itemized Independent Expenditures			🕨		1729.50
				-7-	
(b) SUBTOTAL of Unitemized Independent Expenditure	98		··· ►		· · · · · · · ·
(a) TOTAL Independent Expanditures					
(c) TOTAL Independent Expenditures			··· ►		
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candidate party committee) any political party committee or its ag	or authorized				
R. Russ Walker	Flastron	cally Filed]	M	M / D D	
Signature	Lucuon	Dat	e 06	20	2014
1					

ITEMIZED INDEPENDENT EXPENDITURES	•				PAGE 114 OF 207 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC ID	ENTIFICATION NUMBER V
FREEDOMWORKS FOR AMERICA				С	200499020
Check if 24-hour report 48-hour report	New rep	ort Amends repo	ort filed on	M M /	
Full Name of Payee			Dat	e of Public	Distribution/Dissemination
Freedomworks, Inc.				05 /	D D / Y Y Y Y 06 2014
Mailing Address 400 N Capitol St., NW			Am	ount	
Suite 735					
City	State	Zip Code			328.95
Washington	DC	20001			: SE.35561 rsement or Obligation
Purpose of Expenditure IE-Brannon-Travel		Category/ Type 002		^M 05	D D / Y Y Y Y 06 / 2014
Name of Federal Candidate		Support	Office Sou	ight:	House District: 00
GREGORY JOSEPH BRANNON		Oppose	Pres	sident	Senate State: <u>NC</u>
Calendar Year-To-Date		140115 26	Disbursem 2014	ent For:	Primary General
Per Election for Office Sought		149115.26	2014	Other (sp	ecify) ►
Full Name of Payee			Dat	te of Public	Distribution/Dissemination
Freedomworks, Inc.				05 /	D D / Y Y Y Y 06 2014
Mailing Address 400 N Capitol St., NW			Am	lount	
Suite 735					
City	State	Zip Code			267.78
Washington	DC	20001			: SE.35564 Irsement or Obligation
Purpose of Expenditure IE-Lynch-Travel		Category/ Type 002		05 /	D D / Y Y Y Y Y 06 / 2014
Name of Federal Candidate		Support	Office Sou	ıght: >	K House District: 14
MATT LYNCH		Oppose	Pres	sident	Senate State: OH
Calendar Year-To-Date		70004 07	Disbursem	nent For:	X Primary General
Per Election for Office Sought	9 9	79821.07	2014	Other (sp	ecify) ►
			_		
(a) SUBTOTAL of Itemized Independent Expenditur	′es		• •	-7-	596.73
(b) SUBTOTAL of Uniternized Independent Expend	ituroc				
				-7-	
(c) TOTAL Independent Expenditures					
				-7-	
Under penalty of perjury I certify that the independ with, or at the request or suggestion of, any candid party committee) any political party committee or its	late or authorized				
R. Russ Walker		• 11 1-1 12	M	/ D D	
Signature	[Electron	<i>ically Filed]</i> Date	9 06	20	2014
Ĭ					

ITEMIZED INDEPENDENT EXPENDITUR	RES				PAGE 115 OF 207 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC I	DENTIFICATION NUMBER
FREEDOMWORKS FOR AMERIC	A				C00499020
				C	000499020
Check if 24-hour report 48-hour report	New re	eport Amends repo	ort filed on	M	/ D = D / Y = Y = Y = Y
Full Name of Payee			Da	te of Publ	lic Distribution/Dissemination
Freedomworks, Inc.				^M 05	/ D D / Y Y Y Y 07 2014
Mailing Address 400 N Capitol St., NW			An	nount	
Suite 735			- F		
City	State	Zip Code			116.46
Washington	DC	20001			D: SE.27123 pursement or Obligation
Purpose of Expenditure IE-Sasse-Email/Social Media/Printing		Category/ Type 004		^M 05	/ D D / Y Y Y Y 07 2014
Name of Federal Candidate		Support	Office So	ught:	House District: 00
BENJAMIN E SASSE		Oppose			Senate State: NE
Calendar Year-To-Date		65935.96	Disburser 2014	nent For:	Primary General
Per Election for Office Sought		03933.90	2014	Other (s	specify) ►
Full Name of Payee Freedomworks, Inc.			Da	ate of Pub	lic Distribution/Dissemination
				^M 05	/ D D / Y Y Y Y 07 2014
Mailing Address 400 N Capitol St., NW			۸r	nount	
Suite 735				nount	
City	State	Zip Code			155.27
Washington	DC	20001			D : SE.27132 pursement or Obligation
Purpose of Expenditure IE-McDaniel-Email/Social Media/Printing		Category/ Type 004		05	/ D D / Y Y Y Y 07 2014
Name of Federal Candidate		X Support	Office So	ught:	House District: 00
CHRISTOPHER BRIAN MCDANIEL		Oppose	Pre	sident	Senate State: MS
Calendar Year-To-Date Per Election for Office Sought		197369.46	Disburser 2014	ment For:	Primary General
	77			Other (s	specify) ►
(a) SUBTOTAL of Itomized Independent Even	ditures				074 70
(a) SUBTOTAL of Itemized Independent Expen-			•		271.73
(b) SUBTOTAL of Unitemized Independent Exp	enditures				
(c) TOTAL Independent Expenditures			·· •		
Under penalty of perjury I certify that the indep with, or at the request or suggestion of, any car party committee) any political party committee o	ndidate or authorize				
R. Russ Walker	[Electro	onically Filed] Date	e 06	/ 20	2014
Signature					

ITEMIZED INDEPENDENT EXPENDITURES		PAGE 116 OF 207 FOR LINE 24 OF FORM 3X
		FEC IDENTIFICATION NUMBER ▼
FREEDOMWORKS FOR AMERICA		C C00499020
Check if 24-hour report 48-hour report	New report Amends rep	ort filed on
Full Name of Payee		Date of Public Distribution/Dissemination
Freedomworks, Inc.		05 07 2014
Mailing Address 400 N Capitol St., NW		Amount
Suite 735		
City State	Zip Code	46.59
Washington DC	20001	Transaction ID : SE.27208 Date of Disbursement or Obligation
Purpose of Expenditure IE-Smith-Email/Social Media/Printing	Category/ Type 004	05 / D D / Y Y Y Y 07 / 2014
Name of Federal Candidate	Support	Office Sought: X House District: 02
BRYAN SMITH	Oppose	President Senate State: ID
Calendar Year-To-Date	30543.53	Disbursement For: X Primary General
Per Election for Office Sought	30343.33	Other (specify) ►
Full Name of Payee		Date of Public Distribution/Dissemination
Freedomworks, Inc.		05 / D D / Y Y Y Y 05 07 2014
Mailing Address 400 N Capitol St., NW		Amount
Suite 735		Amount
City State	Zip Code	38.82
Washington DC	20001	Transaction ID : SE.27273 Date of Disbursement or Obligation
Purpose of Expenditure IE-McConnell-Email/Social Media/Printing	Category/ Type	
Name of Federal Candidate	Support	Office Sought: House District: 00
MITCH MCCONNELL	X Oppose	President X Senate State: KY
Calendar Year-To-Date	000744.05	Disbursement For: X Primary General
Per Election for Office Sought	282744.35	2014 Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures		▶ 85.41
(b) SUBTOTAL of Unitemized Independent Expenditures		··· ▶
(a) TOTAL Independent Expenditures		
(c) TOTAL Independent Expenditures		
Under penalty of perjury I certify that the independent expe with, or at the request or suggestion of, any candidate or au party committee) any political party committee or its agent.		
R. Russ Walker	Electronically Filed]	
Signature	Dat	e 06 20 2014

ITEMIZED INDEPENDENT EXPENDITU	RES				PAGE 117 OF 207 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC I	DENTIFICATION NUMBER ▼
FREEDOMWORKS FOR AMERIC	CA			С	C00499020
					000499020
Check if 24-hour report 48-hour report	New re	port Amends repo	ort filed on	M = M	/ D = D / Y = Y = Y = Y = = = =
Full Name of Payee			Date	of Publ	lic Distribution/Dissemination
Freedomworks, Inc.				^M 05	/ D D / Y Y Y Y 07 2014
Mailing Address 400 N Capitol St., NW			Amo	unt	
Suite 735 City	State	Zip Code		_	243.95
Washington	DC	20001			D : SE.35444 pursement or Obligation
Purpose of Expenditure IE-Hagan-Email/Social Media/Printing		Category/ Type 004		^M 05	/ D D / Y Y Y Y 07 / 2014
Name of Federal Candidate		Support	Office Soug	jht:	House District: 00
KAY R HAGAN		X Oppose	Presi	dent	Senate State: <u>NC</u>
Calendar Year-To-Date Per Election for Office Sought		243.95	Disburseme 2014		Primary X General specify) ►
Full Name of Payee			Date	of Pub	lic Distribution/Dissemination
Freedomworks, Inc.				^M 05	/ D D / Y Y Y Y 06 2014
Mailing Address 400 N Capitol St., NW				05	2014
Suite 735			Amo	ount	
City	State	Zip Code			180.08
Washington	DC	20001			D : SE.35562 Dursement or Obligation
Purpose of Expenditure IE-Brannon-Travel		Category/ Type 002		05	/ D D / Y Y Y Y 07 2014
Name of Federal Candidate		Support	Office Sou	ght:	House District: 00
GREGORY JOSEPH BRANNON		Oppose	Presi	dent	Senate State: NC
Calendar Year-To-Date Per Election for Office Sought		149340.34	Disburseme 2014		Primary General
				Other (s	specify) ►
(a) SUBTOTAL of Itemized Independent Exper	nditures				424.03
(b) SUBTOTAL of Unitemized Independent Exp	penditures		••	7	
(c) TOTAL Independent Expenditures			••		
				-7	
Under penalty of perjury I certify that the inde with, or at the request or suggestion of, any ca party committee) any political party committee	andidate or authorize				
R. Russ Walker			M	D	
Signature	[Electro	<i>nically Filed]</i> Date	e 06	20	2014

ITEMIZED INDEPENDENT EXPENDITURES	6				PAGE 118 OF 207 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FFC I	DENTIFICATION NUMBER V
FREEDOMWORKS FOR AMERICA				L a L	
				С	C00499020
Check if 24-hour report 48-hour report	New rep	port Amends repo	ort filed on	M = M	/ D = D / Y = Y = Y = Y
Full Name of Payee			Date	e of Publ	ic Distribution/Dissemination
Freedomworks, Inc.				^M 05	/ D D / Y Y Y Y 08 2014
Mailing Address 400 N Capitol St., NW			Amo	ount	
Suite 735		7. 0.1			000.00
City	State DC	Zip Code	Trees		203.93
Washington	DC	20001			D: SE.27144 bursement or Obligation
Purpose of Expenditure IE-McDaniel-Email/Social Media/Printing		Category/ Type 004		^M 05 ^M	/ D D / Y Y Y Y 08 / 2014
Name of Federal Candidate		Support	Office Sou	ght:	House District: 00
CHRISTOPHER BRIAN MCDANIEL		Oppose			Senate State: MS
Calendar Year-To-Date		248283.39	Disbursem	ent For:	Primary General
Per Election for Office Sought	7 7	240200.00		Other (s	pecify) ►
Full Name of Payee			Dat	e of Publ	lic Distribution/Dissemination
Freedomworks, Inc.				05 ^M	/ D D / Y Y Y Y 08 2014
Mailing Address 400 N Capitol St., NW					
Suite 735			Am	ount	
City	State	Zip Code			100.42
Washington	DC	20001			D : SE.27190 oursement or Obligation
Purpose of Expenditure		Category/ 004		M M	/ D D / Y Y Y
IE-Sasse-Email/Social Media/Printing		Type 004		05	08 2014
Name of Federal Candidate		X Support	Office Sou	ght:	House District: 00
BENJAMIN E SASSE		Oppose	Pres	ident	Senate State: <u>NE</u>
Calendar Year-To-Date Per Election for Office Sought		66036.38	Disbursem 2014	ent For:	Primary General
				Other (s	specify) ►
			_		
(a) SUBTOTAL of Itemized Independent Expenditu	res		• •	-7	304.35
(b) CURTOTAL of United independent Furger					
(b) SUBTOTAL of Unitemized Independent Expend	illures		· • L	-7	
(c) TOTAL Independent Expenditures					
				-7	
Under penalty of perjury I certify that the independ with, or at the request or suggestion of, any candid party committee) any political party committee or its	late or authorize				
	-				
R. Russ Walker	[Electron	nically Filed] Date		/ 20	2014
Signature					

ITEMIZED INDEPENDENT EXPENDITURES					PAGE 119 OF 207 FOR LINE 24 OF FORM 3X
				FEC II	DENTIFICATION NUMBER V
FREEDOMWORKS FOR AMERICA				С	C00499020
Check if 24-hour report 48-hour report	New repo	ort Amends rep	ort filed	on	
Full Name of Payee				Date of Publi	c Distribution/Dissemination
Freedomworks, Inc.				05	/ D D / Y Y Y Y 09 2014
Mailing Address 400 N Capitol St., NW				Amount	
Suite 735					
- ,		Zip Code		L,	11.39
	C	20001		Transaction II Date of Disb	D: SE.27174 ursement or Obligation
Purpose of Expenditure IE-Loudermilk-Email/Social Media/Printing		Category/ Type 004		05	/ D D / Y Y Y Y 09 / 2014
Name of Federal Candidate		Support	Office	Sought:	K House District: 11
BARRY LOUDERMILK		Oppose		President	Senate State: <u>GA</u>
Calendar Year-To-Date		10312.33	Disbu 2014	rsement For:	Primary General
Per Election for Office Sought		10312.33	2014	Other (sp	pecify) ▶
Full Name of Payee Freedomworks, Inc.				Date of Publ	ic Distribution/Dissemination
· · · · · · · · · · · · · · · · · · ·				05	/ D D / Y Y Y Y 09 2014
Mailing Address 400 N Capitol St., NW				Amount	
Suite 735					
,	State DC	Zip Code 20001		Transaction I	206.52 D : SE.27191
					ursement or Obligation
Purpose of Expenditure IE-Sasse-Email/Social Media/Printing		Category/ Type 004		05	/ 09 / Y Y Y Y 2014
Name of Federal Candidate		X Support	Office	Sought:	House District: 00
BENJAMIN E SASSE		Oppose		President	X Senate State: <u>NE</u>
Calendar Year-To-Date Per Election for Office Sought		66242.90	Disbu 2014	rsement For:	Primary General
				Other (s	pecity) ►
(a) SUBTOTAL of Itemized Independent Expenditures			🕨	· · · ·	217.91
(b) SUBTOTAL of Unitemized Independent Expenditure	s		··· ►		
(c) TOTAL Independent Expenditures			••• •		
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candidate party committee) any political party committee or its age	or authorized				
R. Russ Walker	[Electroni	cally Filed]	M	M / D D	/ 7 7 7 7 7
Signature	0	_ Dat	te 06	20	2014

ITEMIZED INDEPENDENT EXPENDITO	JRES				PAGE 120 OF 207 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FFC II	DENTIFICATION NUMBER V
FREEDOMWORKS FOR AMER	CA				C00499020
				С	000499020
Check if 24-hour report 48-hour report	ort New re	port Amends repo		I = M	
Full Name of Payee			Date	of Publi	c Distribution/Dissemination
Freedomworks, Inc.				05	/ D D / Y Y Y Y 09 2014
Mailing Address 400 N Capitol St., NW			Amou	Int	
Suite 735			_		
City	State	Zip Code	و ال		195.85
Washington	DC	20001			D: SE.27209 ursement or Obligation
Purpose of Expenditure IE-Smith-Email/Social Media/Printing		Category/ Type 004		05	/ D D / Y Y Y Y 09 / 2014
Name of Federal Candidate		Support	Office Sough	nt:	K House District: 02
BRYAN SMITH		Oppose	Presid	Ē	Senate State: ID
Calendar Year-To-Date		30739.38	Disbursemer	nt For:	Primary General
Per Election for Office Sought		30733.30		Other (sp	pecify) ►
Full Name of Payee Freedomworks, Inc.			Date	of Publi	ic Distribution/Dissemination
Freedomworks, inc.				05	/ D D / Y Y Y Y 09 2014
Mailing Address 400 N Capitol St., NW			Amou	unt	
Suite 735			Amot	<i></i>	
City	State	Zip Code			384.74
Washington	DC	20001			D: SE.27224 ursement or Obligation
Purpose of Expenditure IE-McDaniel-Email/Social Media/Printing		Category/ Type 004		05	/ D D / Y Y Y Y 2014
Name of Federal Candidate		Support	Office Sougl	nt:	House District: 00
CHRISTOPHER BRIAN MCDANIEL		Oppose	Presid	lent	Senate State: MS
Calendar Year-To-Date Per Election for Office Sought		257958.13	Disbursemer 2014		Primary General
, L , · L				Other (s	pecify) ►
(a) SUBTOTAL of Itemized Independent Exp	andituras				580.59
				-7-	560.59
(b) SUBTOTAL of Unitemized Independent E	xpenditures		• •		
(c) TOTAL Independent Expenditures			••		
Under penalty of perjury I certify that the ind with, or at the request or suggestion of, any of party committee) any political party committee	candidate or authorize				
R. Russ Walker					
	[Electro	mically Filed]	06	20	2014
Signature				_	

ITEMIZED INDEPENDENT EXPENDITU	IRES				PAGE 121 OF 207 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC I	DENTIFICATION NUMBER V
FREEDOMWORKS FOR AMERI	CA			С	C00499020
Check if 24-hour report 48-hour report	rt 📃 New r	eport Amends repo	ort filed on	M = M	
Full Name of Payee Freedomworks, Inc.			Date	of Publ	ic Distribution/Dissemination
				^M 05	/ D D / Y Y Y Y 09 2014
Mailing Address 400 N Capitol St., NW			Amo	unt	
Suite 735					
City	State	Zip Code		7	6.83
Washington	DC	20001			D: SE.35445 pursement or Obligation
Purpose of Expenditure IE-Schultz-Email/Social Media/Printing		Category/ Type 004		^M 05	/ D D / Y Y Y Y Y 09 2014
Name of Federal Candidate		Support	Office Sou	ıht:	X House District:03
MATTHEW DAVID SCHULTZ		Oppose	Presi	· Ŀ	Senate State: IA
Calendar Year-To-Date		054.07	Disburseme	ent For:	Primary General
Per Election for Office Sought		251.87	2014	Other (s	pecify) ▶
Full Name of Payee			Date	e of Publ	lic Distribution/Dissemination
Freedomworks, Inc.				^M 05	/ D D / Y Y Y Y 09 2014
Mailing Address 400 N Capitol St., NW			Amo		
Suite 735			And	Jun	
City	State	Zip Code		;	32.27
Washington	DC	20001			D: SE.35446 pursement or Obligation
Purpose of Expenditure IE-Mathis-Email/Social Media/Printing		Category/ Type 004		^M 05	/ D D / Y Y Y Y Y 2014
Name of Federal Candidate		Support	Office Sou	ght:	X House District: 06
CHAD DR MATHIS		Oppose	Pres		Senate State: AL
Calendar Year-To-Date		1000.14	Disbursem	ent For:	X Primary General
Per Election for Office Sought		1882.14	2014	Other (s	specify) ►
(a) SUBTOTAL of Itemized Independent Expe	nditures		• •	-7	39.10
(b) SUBTOTAL of Unitermized Independent Ex	roondituroo				
(b) SUBTOTAL of Uniternized Independent Ex	cperialiures		••	-7	
(c) TOTAL Independent Expenditures			Г		
				-7	
Under penalty of perjury I certify that the inde with, or at the request or suggestion of, any c party committee) any political party committee	andidate or authoriz				
R. Russ Walker	[Electr	conically Filed] Date	06	20	2014
Signature					

SCHEDULE E (FEC Form 3X)

ITEMIZED INDEPENDENT EXPENDITURES	PAGE 122 OF 207 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER
FREEDOMWORKS FOR AMERICA	
	С соо499020
Check if 24-hour report 48-hour report New report Amends report file	d on
Full Name of Payee	Date of Public Distribution/Dissemination
Freedomworks, Inc.	05 12 2014
Mailing Address 400 N Capitol St., NW	Amount
Suite 735	
City State Zip Code	93.18
Washington DC 20001	Transaction ID : SE.27213 Date of Disbursement or Obligation
Purpose of Expenditure IE-Smith-Email/Social Media/Printing Category/ Type 004	05 / D D / Y Y Y Y 2014
Name of Federal Candidate Support Office	ce Sought: X House District: 02
BRYAN SMITH Oppose	President Senate State: ID
	ursement For: X Primary General
Per Election for Office Sought 31461.36 2014	⁺ Other (specify) ►
Full Name of Payee	Date of Public Distribution/Dissemination
Freedomworks, Inc.	05 12 2014
Mailing Address 400 N Capitol St., NW	
Suite 735	Amount
City State Zip Code	211.52
Washington DC 20001	Transaction ID : SE.27225 Date of Disbursement or Obligation
Purpose of Expenditure IE-McDaniel-Email/Social Media/Printing Category/ Type 004	05 12 2014
	ce Sought: House District: 00
CHRISTOPHER BRIAN MCDANIEL Oppose	President X Senate State: MS
Calendar Year-To-Date Per Election for Office Sought 258169.65	oursement For:
(a) SUBTOTAL of Itemized Independent Expenditures	304.70
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not n with, or at the request or suggestion of, any candidate or authorized committee or agent of eith party committee) any political party committee or its agent.	
	06 20 / Y = Y = Y = Y 2014
Signature	

	ZED INDEPENDENT EXPEND	ITURES				PAGE 123 FOR LINE 24	OF 207 OF FORM 3X
					FEC ID	ENTIFICATIO	N NUMBER 🔻
FRE	EDOMWORKS FOR AME	RICA			С	C00499020	
Check	if 24-hour report 48-hour re	eport New rep	ort Amends repo		/ M /		Y Y Y Y Y
	I Name of Payee eedomworks, Inc.			Date	of Public	c Distribution/D	issemination
	·				05 /	12 ^D /	2014 Y
Ма	iling Address 400 N Capitol St., NW			Amou	unt		
	Suite 735						
City	·	State DC	Zip Code	T	J		232.91
	shington	DC	20001			: SE.35448 Irsement or Ob	oligation
	pose of Expenditure Sasse-Email/Social Media/Printing		Category/ Type 004		05	12 /	2014 Y
Na	me of Federal Candidate		Support	Office Sough	nt:	House D	istrict: 00
BE	NJAMIN E SASSE		Oppose	Presid	ent	K Senate	State: NE
	Calendar Year-To-Date		74005.04	Disbursemer	nt For:	X Primary	General
	Per Election for Office Sought		74225.81		Other (sp	ecify) ►	
	I Name of Payee			Date	of Public	c Distribution/D	Dissemination
	reedomworks, Inc.				05	/ D D / 12	2014
Ма	iling Address 400 N Capitol St., NW			A mor			
	Suite 735			Amou	anı		
Cit	у	State	Zip Code	L.			108.44
W	ashington	DC	20001			D:SE.35449 ursement or Ot	oligation
	rpose of Expenditure -Birman-Email/Social Media/Printing		Category/ Type 004		05	12	y y y y 2014
Na	me of Federal Candidate		Support	Office Soug	ht: 🗋	K House D	District: 07
IG	OR A BIRMAN		Oppose	Presid		Senate	State: CA
	Calendar Year-To-Date		1.1.1.1.1	Disburseme	nt For:	X Primary	General
	Per Election for Office Sought		28408.31	2014	Other (sp	pecify) ►	
(a) (SUBTOTAL of Itemized Independent E	zpenditures					341.35
()					-7-	-7	
(b) \$	SUBTOTAL of Unitemized Independen	t Expenditures		• •			
<i>.</i>				_			
(c)	TOTAL Independent Expenditures			•	-7-		1.47.1
with,	er penalty of perjury I certify that the or at the request or suggestion of, ar committee) any political party commi	ny candidate or authorized					
	R. Russ Walker	[E] a stress	ically Filed1	M_M /		/ Y Y	(T
s	Signature	[Eactron	<i>ically Filed]</i> Date	9 06	20	2014	

ITEMIZED INDEPENDENT EXPENDITURI	ES				PAGE 124 OF 207 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC I	DENTIFICATION NUMBER
FREEDOMWORKS FOR AMERICA	1			С	C00499020
					000400020
Check if 24-hour report 48-hour report	New rep	port Amends repo		M M	
Full Name of Payee			Date	of Publ	lic Distribution/Dissemination
Freedomworks, Inc.			- I I	05	/ D D / Y Y Y Y 12 2014
Mailing Address 400 N Capitol St., NW					
Suite 735			Amo	um	
City	State	Zip Code			77.64
Washington	DC	20001			D: SE.35450 pursement or Obligation
Purpose of Expenditure IE-Mathis-Email/Social Media/Printing		Category/ Type 004		^M 05	/ D D / Y Y Y Y 12 / 2014
Name of Federal Candidate		Support	Office Soug	jht:	X House District: 06
CHAD DR MATHIS		Oppose	Presi	dent	Senate State: <u>AL</u>
Calendar Year-To-Date		1050 70	Disburseme	ent For:	X Primary General
Per Election for Office Sought		1959.78	2014	Other (s	specify) ►
Full Name of Payee			Date	e of Pub	lic Distribution/Dissemination
Freedomworks, Inc.				^M 05	/ D D / Y Y Y Y 13 2014
Mailing Address 400 N Capitol St., NW			Amo		
Suite 735				Juni	
City	State	Zip Code			116.48 D : SE.27214
Washington	DC	20001			bursement or Obligation
Purpose of Expenditure IE-Smith-Email/Social Media/Printing		Category/ Type 004		05 ^M	/ D D / Y Y Y Y 13 / 2014
Name of Federal Candidate		X Support	Office Sou	ght:	X House District:02
BRYAN SMITH		Oppose	Presi	dent	Senate State: <u>ID</u>
Calendar Year-To-Date		24577.04	Disburseme	ent For:	Primary General
Per Election for Office Sought		31577.84	2014	Other (s	specify) ►
(a) SUBTOTAL of Itemized Independent Expendi	tures			-7	194.12
(b) SUBTOTAL of Unitemized Independent Expe	nditures		•		
(c) TOTAL Independent Expenditures				-7	
Under penalty of perjury I certify that the indepe with, or at the request or suggestion of, any can party committee) any political party committee or	didate or authorized				
R. Russ Walker	[Electroi	nically Filed] Date	06	20	2014
Signature					

FOR LINE 24 OF FORM NAME OF COMMITTEE (In Full) FREEDOMWORKS FOR AMERICA C cood99020 Check if 24-hour report 48-hour report Amends report filed on Full Name of Payee Freedomworks, Inc. Mailing Address 400 N Capitol St., NW Suite 735 City Vashington Purpose of Expenditure IE-McDaniel-Email/Social Media/Printing Name of Federal Candidate CHRISTOPHER BRIAN MCDANIEL
FREEDOMWORKS FOR AMERICA Check if 24-hour report 48-hour report Amends report filed on Full Name of Payee Freedomworks, Inc. Date of Public Distribution/Dissemination Mailing Address 400 N Capitol St., NW Date of Public Distribution/Dissemination Suite 735 City State Zip Code Purpose of Expenditure DC 20001 Transaction ID : SE.27226 Date of Disbursement or Obligation 05 13 2014 Name of Federal Candidate Support Office Sought: House District: Oppose CHRISTOPHER BRIAN MCDANIEL Oppose President Senate State: M
Check if 24-hour report 48-hour report New report Amends report filed on Mailing address Full Name of Payee Freedomworks, Inc. Date of Public Distribution/Dissemination Mailing Address 400 N Capitol St., NW Date of Public Distribution/Dissemination Suite 735 State Zip Code City State Zip Code Purpose of Expenditure DC 20001 Purpose of Expenditure Category/ 004 IE-McDaniel-Email/Social Media/Printing Category/ 004 Name of Federal Candidate Support Office Sought: House District: O CHRISTOPHER BRIAN MCDANIEL Oppose President Senate State: M
Check if 24-hour report Amends report Amends report filed on Full Name of Payee Freedomworks, Inc. Date of Public Distribution/Dissemination Mailing Address 400 N Capitol St., NW Date of Public Distribution/Dissemination Suite 735 City State Zip Code Vashington DC 20001 Transaction ID : SE.27226 Purpose of Expenditure Category/ 004 05 IE-McDaniel-Email/Social Media/Printing Category/ 004 05 Name of Federal Candidate Support Office Sought: House District: 0 CHRISTOPHER BRIAN MCDANIEL Oppose President Senate State: M
Freedomworks, Inc. Mailing Address 400 N Capitol St., NW Suite 735 City State Zip Code Washington DC 20001 Purpose of Expenditure Category/ 004 IE-McDaniel-Email/Social Media/Printing Category/ 004 Name of Federal Candidate Support Office Sought: House District: O CHRISTOPHER BRIAN MCDANIEL Oppose President Senate State: M
Mailing Address 400 N Capitol St., NW Suite 735 State Zip Code City State Zip Code Washington DC 20001 Purpose of Expenditure Category/ 004 IE-McDaniel-Email/Social Media/Printing Category/ 004 Name of Federal Candidate Support Office Sought: House District: O CHRISTOPHER BRIAN MCDANIEL Oppose President Senate State: M
Amount Suite 735 City State Zip Code Washington DC 2001 Purpose of Expenditure IE-McDaniel-Email/Social Media/Printing Category/ Type 004 05 13 2014 Name of Federal Candidate X Support Office Sought: House District: 0 CHRISTOPHER BRIAN MCDANIEL Oppose President Senate State: M
City State Zip Code 251.54 Washington DC 20001 Transaction ID : SE.27226 Date of Disbursement or Obligation Purpose of Expenditure IE-McDaniel-Email/Social Media/Printing Category/ Type 004 05 13 2014 Name of Federal Candidate CHRISTOPHER BRIAN MCDANIEL Image: Support Coppose Office Sought: House District: Image: Coppose
Washington DC 2001 Transaction ID : SE.27226 Purpose of Expenditure IE-McDaniel-Email/Social Media/Printing Category/ Type 004 004 Name of Federal Candidate CHRISTOPHER BRIAN MCDANIEL X Support Office Sought: House District: 0
Purpose of Expenditure IE-McDaniel-Email/Social Media/Printing Category/ Type 004 Date of Disbursement or Obligation Name of Federal Candidate CHRISTOPHER BRIAN MCDANIEL X Support Office Sought: House District: O
IE-McDaniel-Email/Social Media/Printing Category/ Type 004 05 13 2014 Name of Federal Candidate Support Office Sought: House District: 0 CHRISTOPHER BRIAN MCDANIEL Oppose President Senate State: M
CHRISTOPHER BRIAN MCDANIEL Oppose President Senate State: M
CHRISTOPHER BRIAN MCDANIEL Oppose President State: M
Calendar Year-To-Date Disbursement For: X Primary Gen
Per Election for Office Sought 258421.20 2014 Other (specify) ▶
Full Name of Payee Date of Public Distribution/Dissemination Freedomworks, Inc. Date of Public Distribution/Dissemination
05 13 2014
Mailing Address 400 N Capitol St., NW Amount
Suite 735
City State Zip Code 379.74
Washington DC 20001 Transaction ID : SE.35453 Date of Disbursement or Obligation
Purpose of Expenditure Category/ 004 IE-Sasse-Email/Social Media/Printing Category/ 004
Name of Federal Candidate X Support Office Sought: House District:
BENJAMIN E SASSE
Calendar Year-To-Date Disbursement For: X Primary Ger
Per Election for Office Sought 74975.16 2014 Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures
(b) CURTOTAL of Uniterpied Independent Funce ditures
(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 cond 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 polit party committee) any political party committee or its agent.
R. Russ Walker [Electronically Filed] Date 06 20 2014
Signature Date 06 20 2014

ITEMIZED INDEPENDENT EXPENDI	TURES			PAGE 126 OF 207 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER V
FREEDOMWORKS FOR AME	RICA			C C00499020
				0 0000020
Check if 24-hour report 48-hour re	port New repo	ort Amends repo		
Full Name of Payee			Date	of Public Distribution/Dissemination
Freedomworks, Inc.			N	05 / D D / Y Y Y Y 2014
Mailing Address 400 N Capitol St., NW			Amou	unt
Suite 735				
City	State	Zip Code		77.64
Washington	DC	20001		action ID : SE.35454 of Disbursement or Obligation
Purpose of Expenditure IE-Shannon-Email/Social Media/Printing		Category/ Type 001		05 / D D / Y Y Y Y 13 2014
Name of Federal Candidate		Support	Office Sough	nt: House District: 00
T W SHANNON		Oppose	Preside	ent 🗙 Senate State: <u>OK</u>
Calendar Year-To-Date			Disbursemer	nt For: X Primary General
Per Election for Office Sought		142.25	2014 🗌 C	Other (specify) ►
Full Name of Payee			Date	of Public Distribution/Dissemination
Freedomworks, Inc.				05 13 2014
Mailing Address 400 N Capitol St., NW			L	05 13 2014
Suite 735			Amou	unt
City	State	Zip Code		101.17
Washington	DC	20001		action ID : SE.35455 of Disbursement or Obligation
Purpose of Expenditure		Category/ 004		M M / D D / Y Y Y Y
IE-Loudermilk-Email/Social Media/Printing		Туре 004	L	05 13 2014
Name of Federal Candidate		X Support	Office Sough	ht: X House District: 11
BARRY LOUDERMILK		Oppose	Presid	lent Senate State: GA
Calendar Year-To-Date		40440 50	Disbursemer	nt For: X Primary General
Per Election for Office Sought		10413.50	2014	Other (specify) ►
(a) SUBTOTAL of Itemized Independent Ex	penditures		• •	178.81
(b) SUBTOTAL of Unitemized Independent	Expenditures		• •	
(c) TOTAL Independent Expenditures				
Under penalty of perjury I certify that the in with, or at the request or suggestion of, any party committee) any political party committ	y candidate or authorized			
R. Russ Walker				
	[Electron	<i>ically Filed]</i> Date	, 06 /	20 2014
Signature				

SCHEDULE E (FEC Form 3X)

ITEMIZED INDEPENDENT EXPENDITURES	PAGE 127 OF 207 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER
FREEDOMWORKS FOR AMERICA	C C00499020
Check if 24-hour report 48-hour report New report Amends	report filed on
Full Name of Payee	Date of Public Distribution/Dissemination
Freedomworks, Inc.	05 / D / Y Y Y Y 2014
Mailing Address 400 N Capitol St., NW	Amount
Suite 735	
CityStateZip CodeWashingtonDC20001	23.53 Transaction ID : SE.35456
	Date of Disbursement or Obligation
Purpose of Expenditure IE-Schultz-Email/Social Media/Printing	004 05 ⁷ 05 ⁷ 2014 ⁹ 2014
Name of Federal Candidate X Support	rt Office Sought: X House District: 03
MATTHEW DAVID SCHULTZ Oppose	e President Senate State: IA
Calendar Year-To-Date	Disbursement For: X Primary General
Per Election for Office Sought 275.40	2014 Other (specify) ▶
Full Name of Payee	Date of Public Distribution/Dissemination
Freedomworks, Inc.	05 / Y Y Y Y 05 13 2014
Mailing Address 400 N Capitol St., NW	
Suite 735	Amount
City State Zip Code	23.53
Washington DC 20001	Transaction ID : SE.35457 Date of Disbursement or Obligation
Purpose of Expenditure IE-Mathis-Email/Social Media/Printing Category/ Type	004 05 / D D / Y Y Y Y 05 13 2014
Name of Federal Candidate	rt Office Sought: X House District: 06
CHAD DR MATHIS Oppos	
Calendar Year-To-Date	Disbursement For: X Primary General
Per Election for Office Sought	2014 Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	47.06
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein w with, or at the request or suggestion of, any candidate or authorized committee or age party committee) any political party committee or its agent.	
R. Russ Walker [Electronically Filed]	Date 06 20 2014
Signature	Date 06 20 2014

ITEMIZED INDEPENDENT EXPENDIT	URES			FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER V
FREEDOMWORKS FOR AMER	ICA			C C00499020
				0
Check if 24-hour report 48-hour rep	ort New re	port Amends repo		
Full Name of Payee			Date	of Public Distribution/Dissemination
Freedomworks, Inc.			N	05 / D D / Y Y Y Y 14 2014
Mailing Address 400 N Capitol St., NW			Amou	int
Suite 735				
City	State	Zip Code		69.89
Washington	DC	20001		ction ID : SE.27234 of Disbursement or Obligation
Purpose of Expenditure IE-Smith-Email/Social Media/Printing		Category/ Type 004		05 / D D / Y Y Y Y 2014
Name of Federal Candidate		Support	Office Sough	nt: X House District: 02
BRYAN SMITH		Oppose	Preside	
Calendar Year-To-Date		04047.70	Disbursemer	nt For: X Primary General
Per Election for Office Sought		31647.73	2014 🗌 C	Other (specify)
Full Name of Payee			Date	of Public Distribution/Dissemination
Freedomworks, Inc.			P	05 14 2014
Mailing Address 400 N Capitol St., NW			Amou	
Suite 735			Amou	лп.
City	State	Zip Code		341.35
Washington	DC	20001		action ID : SE.32504 of Disbursement or Obligation
Purpose of Expenditure IE-McDaniel-Email/Social Media/Printing		Category/ Type 004		05 / D D / Y Y Y Y 05 / 14 2014
Name of Federal Candidate		Support	Office Sough	nt: House District: 00
CHRISTOPHER BRIAN MCDANIEL		Oppose	Presid	
Calendar Year-To-Date		0.44.05	Disbursemer	nt For: X Primary General
Per Election for Office Sought		341.35	2013	Dther (specify)
(a) SUBTOTAL of Itemized Independent Exp	penditures			411.24
(b) SUBTOTAL of Unitemized Independent B	Expenditures		• •	
			_	
(c) TOTAL Independent Expenditures			•••	
Under penalty of perjury I certify that the inv with, or at the request or suggestion of, any party committee) any political party committe	candidate or authorize	•		
R. Russ Walker			M M /	
Signature	[Electro	Date []	9 06	20 2014
- g. and - c				

ITEMIZED INDEPENDENT EXPENDITURES	5			PAGE 129 OF 207 FOR LINE 24 OF FORM 3X
				FEC IDENTIFICATION NUMBER V
FREEDOMWORKS FOR AMERICA				C C00499020
Check if 24-hour report 48-hour report	New rep	ort Amends repo	ort filed on	
Full Name of Payee			D	Pate of Public Distribution/Dissemination
Freedomworks, Inc.				05 / Y Y Y Y 05 14 2014
Mailing Address 400 N Capitol St., NW			A	mount
Suite 735			r	
City	State	Zip Code		119.39
Washington	DC	20001		ansaction ID : SE.35459 Date of Disbursement or Obligation
Purpose of Expenditure IE-Sasse-Email/Social Media/Printing		Category/ Type 004		M M / D D / Y Y Y Y 05 / 14 / 2014
Name of Federal Candidate		Support	Office So	ought: House District: 00
BENJAMIN E SASSE		Oppose		resident X Senate State: <u>NE</u>
Calendar Year-To-Date Per Election for Office Sought		75094.55	Disburse 2014	ement For: X Primary General
				Other (specify)
Full Name of Payee Freedomworks, Inc.			D	Date of Public Distribution/Dissemination
Mailing Address				05 14 2014
400 N Capitol St., NW			A	Amount
Suite 735	State	Zip Code	F	77.64
Washington	DC	20001		ansaction ID : SE.35460 Date of Disbursement or Obligation
Purpose of Expenditure IE-Shannon-Email/Social Media/Printing		Category/ Type 004		M M / D D / Y Y Y Y 05 / 14 2014
Name of Federal Candidate		Support	Office S	ought: House District: 00
T W SHANNON		Oppose	Pr	resident X Senate State: OK
Calendar Year-To-Date Per Election for Office Sought		219.89	Disburse 2014	ement For: X Primary General
	7 7			Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditu	Iree		. Γ	197.03
(a) SOBTOTAL OF REINIZED INdependent Expendito				197.03
(b) SUBTOTAL of Unitemized Independent Expendent	ditures		• •	
(c) TOTAL Independent Expenditures			►	
Under penalty of perjury I certify that the independ with, or at the request or suggestion of, any candid party committee) any political party committee or it	date or authorized			
R. Russ Walker	[Elastron	ically Filed]	M	
Signature		Date	e 06	20 2014
ľ				

ITEMIZED INDEPENDENT EXPENDIT	URES				PAGE 130 OF FOR LINE 24 OF F	207 ORM 3X
NAME OF COMMITTEE (In Full)				FEC II	L DENTIFICATION NUM	IBER 🔻
FREEDOMWORKS FOR AMER	ICA			С	C00499020	
Check if 24-hour report 48-hour rep	oort 📃 New rep	port Amends repo		M		YY
Full Name of Payee			Date	of Publi	c Distribution/Dissemi	nation
Freedomworks, Inc.			N	05)14
Mailing Address 400 N Capitol St., NW			Amou			
Suite 735			Amou	n.		
City	State	Zip Code			:	38.82
Washington	DC	20001			D:SE.35461 ursement or Obligation	n
Purpose of Expenditure IE-Birman-Email/Social Media/Printing		Category/ Type 004		05	/ D D / Y Y)14)14
Name of Federal Candidate		Support	Office Sough	it:	K House District:	07
IGOR A BIRMAN		Oppose	Preside	Ē	Senate State:	CA
Calendar Year-To-Date			Disbursemer	t For:	X Primary	General
Per Election for Office Sought		28447.13	2014 C	ther (sp	pecify) ►	
Full Name of Payee			Date	of Publi	ic Distribution/Dissem	ination
Freedomworks, Inc.			7	05) 014
Mailing Address 400 N Capitol St., NW						
Suite 735			Amou	Int		
City	State	Zip Code				77.64
Washington	DC	20001			D: SE.35462 ursement or Obligatio	n
Purpose of Expenditure IE-Loudermilk-Email/Social Media/Printing		Category/ Type 004		05		014
		Туре				
Name of Federal Candidate		Support	Office Sough	nt:	House District:	
BARRY LOUDERMILK		Oppose	Presid	ent	Senate State:	GA
Calendar Year-To-Date		10491.14	Disbursemer 2014	nt For:	Primary	General
Per Election for Office Sought				ther (s	pecify) ►	
(a) SUBTOTAL of Itemized Independent Exp	penditures		• •		116	.46
(b) SUBTOTAL of Unitemized Independent	Expenditures					
(b) CODICIAE OF CHIRCHIZED INdependent			·· •	-7-		-
(c) TOTAL Independent Expenditures						
				-7		
Under penalty of perjury I certify that the in with, or at the request or suggestion of, any party committee) any political party committe	candidate or authorize					
R. Russ Walker			M M /	DD	/	
Signature	[Electron	nically Filed] Date	9 06	20	2014	
Signature						

TTEMIZED INDEPENDENT EXPENDI	TURES				PAGE 131 FOR LINE	OF 207 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC ID	ENTIFICATI	ON NUMBER 🔻
FREEDOMWORKS FOR AME	RICA			С	C00499020	
Check if 24-hour report 48-hour re	eport New re	eport Amends repo		/ M /	D D /	Y Y Y Y Y
Full Name of Payee Freedomworks, Inc.			Date	of Public	Distribution	/Dissemination
Freedomworks, Inc.				05 ^{//}	D D /	2014 Y
Mailing Address 400 N Capitol St., NW			Amou	unt		
Suite 735			Amot			
City	State	Zip Code				77.64
Washington	DC	20001			: SE.35463 rsement or	Obligation
Purpose of Expenditure IE-Schultz-Email/Social Media/Printing		Category/ Type 004		05 ^M /	D D /	2014
Name of Federal Candidate		Support	Office Sough	nt: 🔉	K House	District: 03
MATTHEW DAVID SCHULTZ		Oppose	Presid		Senate	State: IA
Calendar Year-To-Date			Disbursemer	nt For:	Rimary	General
Per Election for Office Sought	,	353.04	2014	Other (sp	ecify) ►	
Full Name of Payee			Date	of Public	c Distributior	n/Dissemination
Freedomworks, Inc.			- I F	05 [/]	D D /	2014
Mailing Address 400 N Capitol St., NW						2011
Suite 735			Amo	unt		
City	State	Zip Code				38.82
Washington	DC	20001			: SE.35464 Irsement or	Obligation
Purpose of Expenditure IE-Mathis-Email/Social Media/Printing		Category/ 004		M M /	14 D	YYYYY
		Type 004		05	14	2014
Name of Federal Candidate		X Support	Office Soug	ht: 🔰	K House	District: 06
CHAD DR MATHIS		Oppose	Presic	lent	Senate	State: AL
Calendar Year-To-Date		2022 42	Disburseme	nt For:	X Primar	y General
Per Election for Office Sought		2022.13	2014	Other (sp	ecify) ►	
			_			
(a) SUBTOTAL of Itemized Independent E	xpenditures			-7-		116.46
<u> </u>			_			
(b) SUBTOTAL of Unitemized Independent	Expenditures		••	-7-	-7-	
(c) TOTAL Independent Expenditures						
				-7-	-7-	
Under penalty of perjury I certify that the i with, or at the request or suggestion of, an party committee) any political party commit	y candidate or authoriz	•		•		
R. Russ Walker	Flort	onically Filed]				Y Y
Signature	[Little	Date	9 06	20	207	

ITEMIZED INDEPENDENT EXPENDITU	RES				PAGE 132 OF 207 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC I	□ DENTIFICATION NUMBER ▼
FREEDOMWORKS FOR AMERI	CA			С	C00499020
				U	
Check if 24-hour report 48-hour repor	t 📃 New rep	port Amends repo		I M	
Full Name of Payee			Date	of Publi	ic Distribution/Dissemination
Freedomworks, Inc.			7	05	/ D D / Y Y Y Y 15 2014
Mailing Address 400 N Capitol St., NW			Amou	Int	
Suite 735					
City	State	Zip Code			1015.03
Washington	DC	20001			D: SE.27235 ursement or Obligation
Purpose of Expenditure IE-Smith-Travel		Category/ Type 002		05	/ D D / Y Y Y Y 15 / 2014
Name of Federal Candidate		Support	Office Sough	nt:	K House District: 02
BRYAN SMITH		Oppose	Presid	ent	Senate State: <u>ID</u>
Calendar Year-To-Date		32662.76	Disbursemer 2014	nt For:	Primary General
Per Election for Office Sought		52002.70		ther (s)	pecify) ►
Full Name of Payee Freedomworks, Inc.			Date	of Publ	lic Distribution/Dissemination
				05	/ D D / Y Y Y Y 15 2014
Mailing Address 400 N Capitol St., NW			Amou	Int	
Suite 735					
City	State	Zip Code	Trans	, stion II	723.77 D : SE.27236
Washington	DC	20001			bursement or Obligation
Purpose of Expenditure IE-Smith-Email/Social Media/Printing		Category/ Type 004		05	/ 15 / 2014
Name of Federal Candidate		Support	Office Sougl	nt:	X House District: 02
BRYAN SMITH		Oppose	Presid	ent	Senate State: ID
Calendar Year-To-Date		22206 52	Disbursemer 2014	nt For:	X Primary General
Per Election for Office Sought		33386.53		Other (s	pecify) ►
				_	
(a) SUBTOTAL of Itemized Independent Expe	nditures		• •		1738.80
(b) SUBTOTAL of Unitemized Independent Ex	nandituras				
				-7	
(c) TOTAL Independent Expenditures					
				-7	-7
Under penalty of perjury I certify that the inde with, or at the request or suggestion of, any c party committee) any political party committee	andidate or authorize				
D. Durge WH					
R. Russ Walker	[Electron	nically Filed] Date	e 06 /	20	2014
Signature					

ITEMIZED INDEPENDENT EXPENDITURES	PAGE 133 OF 207 FOR LINE 24 OF FORM 3X
	FEC IDENTIFICATION NUMBER V
FREEDOMWORKS FOR AMERICA	С С00499020
Check if 24-hour report 48-hour report New report Amends report file	id on
Full Name of Payee	Date of Public Distribution/Dissemination
Freedomworks, Inc.	05 / ^y y y y y 15 2014
Mailing Address 400 N Capitol St., NW	Amount
Suite 735	10170
City State Zip Code	164.76
Washington DC 20001	Transaction ID : SE.27257 Date of Disbursement or Obligation
Purpose of Expenditure IE-Schultz-Email/Social Media/Printing Category/ Type 004	M M / D D / Y Y Y Y 05 / 15 / 2014
Name of Federal Candidate Support Office	ce Sought: X House District: 03
MATTHEW DAVID SCHULTZ Oppose	President Senate State:
Calendar Year-To-Date Per Election for Office Sought	oursement For: X Primary General 4 Other (specify) ►
Full Name of Payee	Date of Public Distribution/Dissemination
Freedomworks, Inc.	
Mailing Address	05152014
400 N Capitol St., NVV	Amount
Suite 735 City State Zip Code	9.49
WashingtonDC20001	Transaction ID : SE.27274 Date of Disbursement or Obligation
Purpose of Expenditure Category/ IE-McConnell-Email/Social Media/Printing 004	05 / 15 / 2014
Name of Federal Candidate Support Offi	ce Sought: House District: 00
MITCH MCCONNELL	President X Senate State: KY
Calendar Year-To-DateDisPer Election for Office Sought282753.84	
	Other (specify) ►
(a) SUBTOTAL of Itemized Independent Expenditures	174.25
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
	· · · · · · · · · · · · · · · · · · ·
Under penalty of perjury I certify that the independent expenditures reported herein were not r with, or at the request or suggestion of, any candidate or authorized committee or agent of eith party committee) any political party committee or its agent.	
R. Russ Walker [Electronically Filed] Date	06 20 / Y Y Y Y Y Y
Signature	

ITEMIZED INDEPENDENT EXPENDITURES					PAGE 134 OF 207 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC I	DENTIFICATION NUMBER V
FREEDOMWORKS FOR AMERICA				С	C00499020
					000100020
Check if 24-hour report 48-hour report	New rep	ort Amends repo	ort filed on	M = M	
Full Name of Payee			Da	te of Publi	ic Distribution/Dissemination
Freedomworks, Inc.				^M 05	/ D D / Y Y Y Y 15 2014
Mailing Address 400 N Capitol St., NW					
Suite 735			Arr	ount	
City	State	Zip Code			187.54
Washington	DC	20001			D: SE.32505 ursement or Obligation
Purpose of Expenditure IE-McDaniel-Email/Social Media/Printing		Category/ Type 004		05	/ D D / Y Y Y Y 15 / 2014
Name of Federal Candidate		Support	Office Sou	ught:	House District: 00
CHRISTOPHER BRIAN MCDANIEL		Oppose	Pres	sident	X Senate State: MS
Calendar Year-To-Date		050000 74	Disbursen	nent For:	X Primary General
Per Election for Office Sought	9 9	258608.74	2014	Other (s	pecify) ►
Full Name of Payee			Da	te of Publ	ic Distribution/Dissemination
Freedomworks, Inc.				^M 05	/ D D / Y Y Y Y 15 2014
Mailing Address 400 N Capitol St., NW			Δm	nount	
Suite 735				iount	
City	State	Zip Code			155.27 D : SE.35467
Washington	DC	20001			D: SE.33467 pursement or Obligation
Purpose of Expenditure IE-Shannon-Email/Social Media/Printing		Category/ Type 004		^M 05	/ D D / Y Y Y Y 15 / 2014
Name of Federal Candidate		Support	Office So	ught:	House District: 00
T W SHANNON		Oppose	Pre	sident	X Senate State: OK
Calendar Year-To-Date		275 16	Disbursen	nent For:	Primary General
Per Election for Office Sought	7 7	375.16	2014	Other (s	pecify) ►
(a) SUBTOTAL of Itemized Independent Expenditur	es				342.81
(b) SUBTOTAL of Unitemized Independent Expendi	tures		•• •	7	
(c) TOTAL Independent Expenditures			•• •		
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized				
R. Russ Walker	[Electron	ically Filed] Date	e 06	/ 20	/ Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature					

ITEMIZED INDEPENDENT EXPENDITURES					PAGE 135 OF 207 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC II	DENTIFICATION NUMBER V
FREEDOMWORKS FOR AMERICA				С	C00499020
Check if 24-hour report 48-hour report	New rep	ort Amends repo		ЛМ	
Full Name of Payee Freedomworks, Inc.			Date	of Publi	c Distribution/Dissemination
· · · · · · · · · · · · · · · · · · ·				05	/ D D / Y Y Y Y 15 2014
Mailing Address 400 N Capitol St., NW			Amo	unt	
Suite 735					
City	State	Zip Code			106.54
Washington	DC	20001			D : SE.35468 ursement or Obligation
Purpose of Expenditure IE-Birman-Email/Social Media/Printing		Category/ Type 004		05	/ D D / Y Y Y Y 15 / 2014
Name of Federal Candidate		Support	Office Soug	nt:	K House District: 07
IGOR A BIRMAN		Oppose	Presic	L.	Senate State: CA
Calendar Year-To-Date			Disburseme	nt For:	X Primary General
Per Election for Office Sought	, ,	28553.67	2014	Other (sp	oecify) ▶
Full Name of Payee			Date	of Publ	ic Distribution/Dissemination
Freedomworks, Inc.				05	/ D D / Y Y Y Y 15 2014
Mailing Address 400 N Capitol St., NW			Amo		
Suite 735			Amo	un	
City	State	Zip Code			28.90
Washington	DC	20001			D: SE.35469 ursement or Obligation
Purpose of Expenditure IE-Loudermilk-Email/Social Media/Printing		Category/ Type 004		^M 05	/ D D / Y Y Y Y Y 15 / 2014
Name of Federal Candidate		Support	Office Soug	ht:	X House District:11
BARRY LOUDERMILK		Oppose	Presid	-	Senate State: GA
Calendar Year-To-Date Per Election for Office Sought		10520.04	Disburseme 2014	nt For:	Primary General
	JJ			Other (s	pecify) ►
					105.44
(a) SUBTOTAL of Itemized Independent Expenditures	ii			-7-	135.44
(b) SUBTOTAL of Uniternized Independent Expenditu	res				
				-7	
(c) TOTAL Independent Expenditures			•		
				-7-	
Under penalty of perjury I certify that the independen with, or at the request or suggestion of, any candidate party committee) any political party committee or its a	e or authorized				
R. Russ Walker	[Electron	ically Filed] Date	06	20	/ Y Y Y Y 2014
Signature					

ITEMIZED INDEPENDENT EXPENDI	IURES				FOR LINE	24 OF 207
NAME OF COMMITTEE (In Full)				FEC		
FREEDOMWORKS FOR AME	RICA					
				С	C00499020	
Check if 24-hour report 48-hour re	eport New re	port Amends repo	ort filed on	M	/ D D /	Y Y Y Y Y
Full Name of Payee			D	ate of Pu	blic Distributior	n/Dissemination
Freedomworks, Inc.				05	/ D D /	2014
Mailing Address 400 N Capitol St., NW			Δ	mount		
Suite 735				mount		
City	State	Zip Code			a	87.13
Washington	DC	20001			D: SE.27244 sbursement or	
Purpose of Expenditure IE-Mathis-Email/Social Media/Printing		Category/ Type 004		^M 05	/ D D /	2014 Y
Name of Federal Candidate		Support	Office So	ought:	X House	District: 06
CHAD DR MATHIS		Oppose		esident	Senate	State: AL
Calendar Year-To-Date		20100.26	Disburse 2014	ment For	: X Primar	y General
Per Election for Office Sought		20109.26	2014	Other	(specify) ►	
Full Name of Payee Freedomworks, Inc.			D			n/Dissemination
				05	16	2014
Mailing Address 400 N Capitol St., NW			A	mount		
Suite 735			r			
City	State	Zip Code			n ID : SE.27258	29.11
Washington	DC	20001			sbursement or	
Purpose of Expenditure IE-Schultz-Email/Social Media/Printing		Category/ Type 004		05	/ ^D 16	2014
Name of Federal Candidate		X Support	Office S	ought:	X House	District: 03
MATTHEW DAVID SCHULTZ		Oppose	Pr	esident	Senate	State: <u>IA</u>
Calendar Year-To-Date		10546.91	Disburse 2014	ement For	: 🗙 Primar	y General
Per Election for Office Sought				Other	(specify) ►	
(a) SUBTOTAL of Itemized Independent E	xpenditures					116.24
(b) SUBTOTAL of Unitemized Independent	Expenditures		••		77-	
(c) TOTAL Independent Expenditures			Г			
()					7 7	
Under penalty of perjury I certify that the with, or at the request or suggestion of, ar party committee) any political party commit	ly candidate or authorize					
R. Russ Walker	[F]ectro	nically Filed]		/ 0		14 Y
Signature		Date	9 06	20	20	

TTEMIZED INDEPENDENT EXPENDIT	UNES			PAGE 137 OF 207 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER V
FREEDOMWORKS FOR AMER	ICA			C C00499020
Check if 24-hour report 48-hour rep	ort New re	eport Amends repo		M = M / D = D / Y = Y = Y = Y
Full Name of Payee			Date	of Public Distribution/Dissemination
Freedomworks, Inc.			1	05 / D D / Y Y Y Y 05 16 2014
Mailing Address 400 N Capitol St., NW			Amou	and Land Landau
Suite 735			Amot	лн.
City	State	Zip Code		2041.70
Washington	DC	20001		action ID : SE.27276 of Disbursement or Obligation
Purpose of Expenditure IE-McConnell-Travel		Category/ Type 002		05 / 16 / 2014
Name of Federal Candidate		Support	Office Sough	ht: House District: 00
MITCH MCCONNELL		X Oppose	Presid	
Calendar Year-To-Date			Disbursemer	
Per Election for Office Sought		284795.54	2014	Dther (specify) ►
Full Name of Payee			Date	of Public Distribution/Dissemination
Freedomworks, Inc.				05 / Y Y Y Y 05 16 2014
Mailing Address 400 N Capitol St., NW				
Suite 735			Amou	
City	State	Zip Code		102.83
Washington	DC	20001		action ID : SE.27283 of Disbursement or Obligation
Purpose of Expenditure		Category/		M M / D D / Y Y Y Y
IE-McConnell-Email/Social Media/Printing		Type 004	L	05 16 2014
Name of Federal Candidate		Support	Office Sough	ht: House District: 00
MITCH MCCONNELL		X Oppose	Presid	dent 🗙 Senate State: <u>KY</u>
Calendar Year-To-Date			Disbursemer	nt For: X Primary General
Per Election for Office Sought		284898.37	2014	Other (specify) ►
(a) SUBTOTAL of Itemized Independent Exp	penditures			2144.53
(b) SUBTOTAL of Unitemized Independent I	Expenditures		• •	
(c) TOTAL Independent Expenditures			• •	
Under penalty of perjury I certify that the in- with, or at the request or suggestion of, any party committee) any political party committe	candidate or authoriz	•		•
R. Russ Walker	[Electro	onically Filed] Date	06	20 / Y Y Y Y Y 20 2014
Signature				

116	MIZED INDEPENDENT EXPENDITORES		PAGE 138 OF 207 FOR LINE 24 OF FORM 3X
NA	ME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
F	REEDOMWORKS FOR AMERICA		C C00499020
			C C00499020
Ch	eck if 24-hour report 48-hour report Ne	ew report Amends repo	rt filed on
	Full Name of Payee		Date of Public Distribution/Dissemination
	Freedomworks, Inc.		05 16 2014
	Mailing Address 400 N Capitol St., NW		Amount
	Suite 735		
	City State Washington DC	Zip Code 20001	807.46 Transaction ID : SE.27286
		20001	Date of Disbursement or Obligation
	Purpose of Expenditure IE-Smith-Email/Social Media/Printing	Category/ Type 004	05 / D D / Y Y Y Y 16 / 2014
	Name of Federal Candidate	X Support	Office Sought: X House District: 02
	BRYAN SMITH	Oppose	President Senate State:
	Calendar Year-To-Date	0.44.00.00	Disbursement For: X Primary General
	Per Election for Office Sought	34193.99	2014 Other (specify) ►
	Full Name of Payee		Date of Public Distribution/Dissemination
	Freedomworks, Inc.		05 16 Y Y Y Y 05 16 2014
	Mailing Address 400 N Capitol St., NW		
	Suite 735		Amount
	City State	Zip Code	314.14
	Washington DC	20001	Transaction ID : SE.27288 Date of Disbursement or Obligation
	Purpose of Expenditure	Category/	M M / D D / Y Y Y Y
	IE-Smith-Travel	Type 002	05 16 2014
	Name of Federal Candidate	X Support	Office Sought: X House District: 02
	BRYAN SMITH	Oppose	President Senate State: ID
	Calendar Year-To-Date	34514.20	Disbursement For: X Primary General
	Per Election for Office Sought		Other (specify)
	(a) SUBTOTAL of Itemized Independent Expenditures		1121.60
	(b) SUBTOTAL of Unitemized Independent Expenditures		• •
	(c) TOTAL Independent Expenditures		
	Under penalty of perjury I certify that the independent expend with, or at the request or suggestion of, any candidate or auth party committee) any political party committee or its agent.	•	
	R. Russ Walker [E	lectronically Filed] Date	06 20 Y Y Y Y Y Y
	Signature		

116	EMIZED INDEPENDENT EXPENDITORES		PAGE 139 OF 207 FOR LINE 24 OF FORM 3X
			FEC IDENTIFICATION NUMBER V
	REEDOMWORKS FOR AMERICA		C C00499020
Ch	neck if 24-hour report 48-hour report New m	report Amends repo	rt filed on
	Full Name of Payee		Date of Public Distribution/Dissemination
	Freedomworks, Inc.		05 / Y Y Y Y 05 16 2014
	Mailing Address 400 N Capitol St., NW		Amount
	Suite 735		
	City State Washington DC	Zip Code	239.12
		20001	Transaction ID : SE.32506 Date of Disbursement or Obligation
	Purpose of Expenditure IE-McDaniel-Email/Social Media/Printing	Category/ Type 004	05 / D D / Y Y Y Y 16 / 2014
	Name of Federal Candidate	X Support	Office Sought: House District: 00
	CHRISTOPHER BRIAN MCDANIEL	Oppose	President X Senate State: MS
	Calendar Year-To-Date Per Election for Office Sought	258847.86	Disbursement For: 2014 General Other (specify) ►
	Full Name of Payee	,	
	Freedomworks, Inc.		Date of Public Distribution/Dissemination
	Mailing Address 400 N Capitol St., NW		05 <u>17</u> 2015
	Suite 735		Amount
	City State	Zip Code	119.15
	Washington DC	20001	Transaction ID : SE.32495 Date of Disbursement or Obligation
	Purpose of Expenditure IE-Smith-Travel	Category/ Type 002	05 / ^D D / ^Y Y Y Y 2014
	Name of Federal Candidate	X Support	Office Sought: X House District: 02
	BRYAN SMITH	Oppose	President Senate State: ID
	Calendar Year-To-Date Per Election for Office Sought	34633.35	Disbursement For:
	(a) SUBTOTAL of Itemized Independent Expenditures		358.27
	(b) SUBTOTAL of Unitemized Independent Expenditures		• • • • • • • • • • • • • • • • • • •
	(c) TOTAL Independent Expenditures		
	Under penalty of perjury I certify that the independent expenditur with, or at the request or suggestion of, any candidate or authoriz party committee) any political party committee or its agent.		
	R. Russ Walker [Electr	ronically Filed] Date	06 20 2014
	Signature		

ITEMIZED INDEPENDENT EXPENDITU	RES				PAGE 140 OF 207 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC I	 DENTIFICATION NUMBER ▼
FREEDOMWORKS FOR AMERIC	CA			С	C00499020
					000433020
Check if 24-hour report 48-hour report	New rep	port Amends repo		/I = M	/ D = D / Y = Y = Y = Y
Full Name of Payee			Date	of Publ	ic Distribution/Dissemination
Freedomworks, Inc.			[05 ^M	/ D D / Y Y Y Y 17 2014
Mailing Address 400 N Capitol St., NW			Amou	unt	
Suite 735 City	State	Zip Code			25.00
Washington	DC	20001			D : SE.35558 ursement or Obligation
Purpose of Expenditure IE-McConnell-Travel		Category/ Type 002		05 ^M	/ D D / Y Y Y Y 17 2014
Name of Federal Candidate		Support	Office Soug	nt:	House District: 00
MITCH MCCONNELL		X Oppose	Presid	ent	Senate State: <u>KY</u>
Calendar Year-To-Date Per Election for Office Sought		284923.37	Disbursemen 2014		X Primary General pecify) ►
Full Name of Payee			Date	of Publ	lic Distribution/Dissemination
Freedomworks, Inc.			- I F	05	/ D D / Y Y Y Y Y 18 2014
Mailing Address 400 N Capitol St., NW			L	00	10 2014
Suite 735			Amo	unt	
City	State	Zip Code			621.09
Washington	DC	20001			D : SE.32496 oursement or Obligation
Purpose of Expenditure IE-Smith-Travel		Category/ Type 002		05 ^M	/ D D / Y Y Y Y 18 / 2014
Name of Federal Candidate		Support	Office Soug	ht:	X House District: 02
BRYAN SMITH		Oppose	Presid	lent	Senate State:ID
Calendar Year-To-Date Per Election for Office Sought		35254.44	Disburseme 2014		Primary General
	, ,			Juliel (S	
(a) SUBTOTAL of Itemized Independent Expen	nditures				646.09
(b) SUBTOTAL of Unitemized Independent Ex	penditures		·· •		
(c) TOTAL Independent Expenditures					
				-7	
Under penalty of perjury I certify that the inde with, or at the request or suggestion of, any ca party committee) any political party committee	andidate or authorize				
R. Russ Walker			M M /	DD	
Signature	[Electro	mically Filed] Date	e 06	20	2014

TEMIZED INDEPENDENT EXPENDITURES	5				PAGE 141 FOR LINE 2	OF 207 4 OF FORM 3X
				FEC I	DENTIFICATIO	ON NUMBER 🔻
FREEDOMWORKS FOR AMERICA				С	C00499020	
Check if 24-hour report 48-hour report	New rep	ort Amends repo		Л — М	/ D D /	Y Y Y Y
Full Name of Payee			Date	of Publ	ic Distribution/I	Dissemination
Freedomworks, Inc.			E P	05	/ D D / 19	2014 Y
Mailing Address 400 N Capitol St., NW			Amou	unt		
Suite 735						
City	State	Zip Code				1085.65
Washington	DC	20001			D:SE.32497 ursement or O	bligation
Purpose of Expenditure IE-Smith-Email/Social Media/Printing		Category/ Type 002		05 ^M	/ 19 /	2014
Name of Federal Candidate		Support	Office Soug	nt:	X House I	District: 02
BRYAN SMITH		Oppose	Presid	ent	Senate	State:ID
Calendar Year-To-Date		36340.09	Disbursemer	nt For:	X Primary	General
Per Election for Office Sought	7	30340.09		Other (s	pecify) 🕨	
Full Name of Payee Freedomworks, Inc.			Date	of Publ	lic Distribution/	Dissemination
				05	/ D D / 19	2014 Y
Mailing Address 400 N Capitol St., NW			Amo	unt		
Suite 735						
City	State DC	Zip Code 20001	Trans	action I	D : SE.32507	5.73
Washington	DC	20001			oursement or C	Obligation
Purpose of Expenditure IE-McDaniel-Travel		Category/ Type 002		05	/ 1 9 /	2014
Name of Federal Candidate		Support	Office Soug	ht:	House	District: 00
CHRISTOPHER BRIAN MCDANIEL		Oppose	Presic	lent	X Senate	State: MS
Calendar Year-To-Date Per Election for Office Sought		258853.59	Disburseme 2014	nt For:	X Primary	General
	7 7			Other (s	pecify) ►	
· · · · · · · · · · · · · · · · · · ·			_			
(a) SUBTOTAL of Itemized Independent Expenditur	es		• •	-7	-7-	1091.38
(b) SUBTOTAL of Uniternized Independent Expendi	tures		. —			
				-7		
(c) TOTAL Independent Expenditures						
				-7		
Under penalty of perjury I certify that the independ- with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized					
R. Russ Walker						
	[Electron	<i>ically Filed]</i> Date	, 06 /	20	/ Y Y 2014	Y Y 4
Signature						

TIEMIZED INDEPENDENT EXPENDIT	URES				PAGE 142 OF 20 FOR LINE 24 OF FORM	07 M 3X
NAME OF COMMITTEE (In Full)				FEC I	DENTIFICATION NUMBE	
FREEDOMWORKS FOR AMER	ICA				C00499020	
				C	000499020	
Check if 24-hour report 48-hour rep	ort 🗌 New rep	port Amends repo		M		Y
Full Name of Payee			Date	of Publi	ic Distribution/Disseminati	on
Freedomworks, Inc.			N	05	/ D D / Y Y Y 19 2014	Y
Mailing Address 400 N Capitol St., NW			Amou	nt		
Suite 735			Amou			
City	State	Zip Code			223.8	0
Washington	DC	20001			D:SE.32510 ursement or Obligation	
Purpose of Expenditure IE-McDaniel-Email/Social Media/Printing		Category/ Type 004		05	/ D D / Y Y Y 19 / 2014	Y
Name of Federal Candidate		Support	Office Sough	it:	House District:	00
CHRISTOPHER BRIAN MCDANIEL		Oppose	Preside			IS
Calendar Year-To-Date			Disbursemen	t For:	Primary Ger	neral
Per Election for Office Sought		259112.94	2014	ther (s	pecify) ►	
Full Name of Payee			Date	of Publ	ic Distribution/Disseminati	ion
Freedomworks, Inc.			T.	05	/ D D / Y Y Y 19 2014	Y
Mailing Address 400 N Capitol St., NW			Amou	Int		
Suite 735			Amou			
City	State	Zip Code	L.		115.2	8
Washington	DC	20001			D:SE.35472 ursement or Obligation	
Purpose of Expenditure IE-McConnell-Email/Social Media/Printing		Category/ Type 004		05	/ D D / Y Y Y 19 / 2014	
Name of Federal Candidate		Support	Office Sough	nt:	House District:	00
MITCH MCCONNELL		X Oppose	Presid	ent	X Senate State:	٢Y
Calendar Year-To-Date Per Election for Office Sought		285038.65	Disbursemer 2014			neral
				other (s	pecify) ►	
(a) SUBTOTAL of Itemized Independent Exp	penditures				339.08	
				-7-		-
(b) SUBTOTAL of Unitemized Independent	Expenditures					
				-7		
(c) TOTAL Independent Expenditures			••			
Under penalty of perjury I certify that the in with, or at the request or suggestion of, any party committee) any political party committe	candidate or authorize					
R. Russ Walker	[Electron	nically Filed]	/	20	/ Y Y Y Y Y 2014	
Signature		Date		20	2014	

ITEMIZED		DITURES				PAGE 143 OF 207 FOR LINE 24 OF FORM 3X
NAME OF (COMMITTEE (In Full)				FEC	
	OMWORKS FOR AME	ERICA				
					С	C00499020
Check if	24-hour report 48-hour	report New rep	ort Amends repo	ort filed on	M	/ D D / Y Y Y Y Y Y
	ne of Payee			Da	te of Publ	lic Distribution/Dissemination
	lomworks, Inc.				05 ^M	/ D D / Y Y Y Y 19 / 2014
Mailing	Address 400 N Capitol St., NW			An	nount	
City	Suite 735	Ctoto	Zin Codo	I I I		133.40
City Washing	gton	State DC	Zip Code 20001			D : SE.35473 bursement or Obligation
	e of Expenditure lue-Email/Social Media/Printing		Category/ Type 004		05	/ D D / Y Y Y Y 19 2014
Name c	f Federal Candidate		Support	Office So	ught:	House District: 00
DAVID	PERDUE		X Oppose	Pre	sident	Senate State: <u>GA</u>
	lendar Year-To-Date r Election for Office Sought		133.40	Disbursen 2014	1	X Primary General specify) ►
	me of Payee			Da	ate of Pub	lic Distribution/Dissemination
⊢ree	domworks, Inc.				^M ^M 05	/ D D / Y Y Y Y 19 2014
Mailing	Address 400 N Capitol St., NW					
	Suite 735			An	nount	
City		State	Zip Code			64.70
Washir	C	DC	20001			ID : SE.35476 pursement or Obligation
	e of Expenditure han-Email/Social Media/Printing		Category/ Type 004		05	/ D D / Y Y Y Y 19 / 2014
Name o	of Federal Candidate		X Support	Office So	ught:	X House District: 07
IGOR A	A BIRMAN		Oppose	Pre	sident	Senate State: CA
	lendar Year-To-Date r Election for Office Sought		28618.37	Disburser 2014	г	Primary General
					Uther (s	specify) ►
(a) SUB	TOTAL of Itemized Independent	Expenditures		• •	7	198.10
(b) SUB	TOTAL of Unitemized Independe	nt Expenditures		·· •		
(c) TOTA	AL Independent Expenditures			·· •		
with, or a	enalty of perjury I certify that the at the request or suggestion of, a nmittee) any political party comm	any candidate or authorized				
	R. Russ Walker	[Electron	ically Filed]	- ^M M	/ 20	2014
Signa	ture		Date	8 00	20	2014
8						

ITEMIZED INDEPENDENT EXPENDITURES		PAGE 144 OF 207 FOR LINE 24 OF FORM 3X			
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER			
FREEDOMWORKS FOR AMERICA					
		C C00499020			
Check if 24-hour report 48-hour report New report	ort Amends report f	iled on			
Full Name of Payee		Date of Public Distribution/Dissemination			
Freedomworks, Inc.		05 / Y Y Y Y 2014			
Mailing Address 400 N Capitol St., NW		Amount			
Suite 735 City State	Zip Code	115.28			
UniversityStateWashingtonDC	20001	Transaction ID : SE.35477 Date of Disbursement or Obligation			
Purpose of Expenditure IE-Loudermilk-Email/Social Media/Printing	Category/ Type 004	05 / 19 / 2014			
Name of Federal Candidate	Support O	ffice Sought: X House District: 11			
BARRY LOUDERMILK	Oppose	President Senate State: GA			
Calendar Year-To-Date Per Election for Office Sought		isbursement For: X Primary General 14 Other (specify) ►			
Full Name of Payee		Date of Public Distribution/Dissemination			
Freedomworks, Inc.		05 19 2014			
Mailing Address 400 N Capitol St., NW					
Suite 735		Amount			
City State	Zip Code	37.65			
Washington DC	20001	Transaction ID : SE.35478 Date of Disbursement or Obligation			
Purpose of Expenditure IE-Moll-Email/Social Media/Printing	Category/ Type 004	05 / D D / Y Y Y Y 2014			
Name of Federal Candidate	Support O	ffice Sought: X House District: 04			
THOMAS MOLL	Oppose	President Senate State: AR			
Calendar Year-To-Date Per Election for Office Sought		isbursement For: X Primary General			
		Other (specify) ►			
(a) SUBTOTAL of Itemized Independent Expenditures	••••••	152.93			
(b) SUBTOTAL of Unitemized Independent Expenditures	••••••				
(c) TOTAL Independent Expenditures	•				
Under penalty of perjury I certify that the independent expenditures with, or at the request or suggestion of, any candidate or authorized party committee) any political party committee or its agent.					
R. Russ Walker	ically Filed]				
Signature	Date	06 20 2014			
ITEMIZED INDEPENDENT EXPENDITI	URES			- L	PAGE 145 OF 207 FOR LINE 24 OF FORM 3X
--	------------------------	-----------------------	---------------------	---------------------	---
				FEC ID	ENTIFICATION NUMBER V
FREEDOMWORKS FOR AMER	ICA			C	00499020
Check if 24-hour report 48-hour report	ort New rep	port Amends repo		M /	
Full Name of Payee			Date of	of Public	Distribution/Dissemination
Freedomworks, Inc.			M	05	D D / Y Y Y Y 19 2014
Mailing Address 400 N Capitol St., NW			Amou	nt	
Suite 735	Chata	Zin Onde			58.23
City Washington	State DC	Zip Code 20001			: SE.35479 rsement or Obligation
Purpose of Expenditure IE-Schultz-Email/Social Media/Printing		Category/ Type 004	M	05	$\begin{array}{c} D & D \\ 19 \end{array} / \begin{array}{c} Y & Y & Y \\ 2014 \end{array}$
Name of Federal Candidate		Support	Office Sough	t: 🔀	House District: 03
MATTHEW DAVID SCHULTZ		Oppose	Preside	ent	Senate State: IA
Calendar Year-To-Date Per Election for Office Sought	· · · · · · · ·	10605.14	Disbursemen 2014	t For: ther (spe	Primary General ecify) ▶
Full Name of Payee Freedomworks, Inc.				of Public	Distribution/Dissemination
Mailing Address 400 N Capitol St., NW			Amou		13 2014
Suite 735		71.0.1			70.40
City Washington	State DC	Zip Code 20001			76.46 : SE.35480 rsement or Obligation
Purpose of Expenditure IE-Johnson-Email/Social Media/Printing		Category/ Type 004		05 ¹ /	D D D / Y Y Y Y 19 / 2014
Name of Federal Candidate		Support	Office Sough	it: >	K House District: 01
ROBERT EUGENE MD JOHNSON		Oppose	Preside		Senate State: <u>GA</u>
Calendar Year-To-Date Per Election for Office Sought	· · · · · · · · ·	90.30	Disbursemen 2014	t For: ther (sp	✓ Primary General ecify) ▶
(a) SUBTOTAL of Itemized Independent Exp	enditures		•		134.69
(b) SUBTOTAL of Unitemized Independent E	xpenditures		•	-7-	
(c) TOTAL Independent Expenditures			•	-7-	· · · · · · · ·
Under penalty of perjury I certify that the inc with, or at the request or suggestion of, any party committee) any political party committee	candidate or authorize				
R. Russ Walker	[Electron	nically Filed] Date	06 /	20	/ Y Y Y Y Y 2014
Signature					

TTEMIZED INDEPENDENT EXPENDIT	UNES				PAGE 146 FOR LINE :	OF 207 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDE	ENTIFICATI	ON NUMBER V
FREEDOMWORKS FOR AMER	ICA				00499020	
					00499020	
Check if24-hour report48-hour rep	ort New re	eport Amends repo		1 M /	D D /	Y Y Y Y Y
Full Name of Payee			Date	of Public	Distribution	/Dissemination
Freedomworks, Inc.			1	05 /	D D / 19	2014 Y
Mailing Address 400 N Capitol St., NW			Amou	_		
Suite 735						
City	State	Zip Code				38.82
Washington	DC	20001			SE.35533 sement or (Obligation
Purpose of Expenditure IE-Mathis-Email/Social Media/Printing		Category/ Type 004		05	D D / 19	2014
Name of Federal Candidate		Support	Office Sough	nt: 🗙	House	District: 06
CHAD DR MATHIS		Oppose	Presid		Senate	State:AL
Calendar Year-To-Date			Disbursemer	nt For:	X Primary	/ General
Per Election for Office Sought		20148.08	2014	Other (spe	ecify) ►	
Full Name of Payee			Date	of Public	Distribution	/Dissemination
Freedomworks, Inc.			- P	05 /	20	2014
Mailing Address 400 N Capitol St., NW			L	05	20	2014
Suite 735			Amou	unt		
City	State	Zip Code				232.91
Washington	DC	20001			: SE.32519 sement or	Obligation
Purpose of Expenditure IE-McDaniel-Email/Social Media/Printing		Category/ 004		05	^D 20 /	YYYYY
		Туре		05	20	2014
Name of Federal Candidate		X Support	Office Sougl	nt:	House	District: 00
CHRISTOPHER BRIAN MCDANIEL		Oppose	Presid	lent 🗙	Senate	State: MS
Calendar Year-To-Date			Disbursemer	nt For:	X Primar	y General
Per Election for Office Sought		263238.78	2014	Other (spe	ecify) ►	
(a) SUBTOTAL of Itemized Independent Exp	penditures		• •			271.73
(b) SUBTOTAL of Unitemized Independent I	Expenditures		·· •			
			_			
(c) TOTAL Independent Expenditures			•••			
Under penalty of perjury I certify that the in- with, or at the request or suggestion of, any party committee) any political party committe	candidate or authoriz	•		•		
R. Russ Walker	[Electro	onically Filed] Date	06	20	/ Y Y 201	Y Y 14
Signature						

ITEMIZED INDEPENDENT EXPENDIT	URES			PAGE 147 OF 207 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER V
FREEDOMWORKS FOR AMER	ICA			
				C C00499020
Check if 24-hour report 48-hour rep	ort New re	port Amends repo	ort filed on	M = M / D = D / Y = Y = Y = Y
Full Name of Payee			Date	e of Public Distribution/Dissemination
Freedomworks, Inc.				05 / D D / Y Y Y Y 20 2014
Mailing Address 400 N Capitol St., NW			Amo	bunt
Suite 735				
City	State	Zip Code		332.24
Washington	DC	20001		saction ID : SE.35481 e of Disbursement or Obligation
Purpose of Expenditure IE-McConnell-Email/Social Media/Printing		Category/ Type 004		M M / D D / Y Y Y Y 05 20 2014
Name of Federal Candidate		Support	Office Soug	ght: House District: 00
MITCH MCCONNELL		X Oppose	Presi	
Calendar Year-To-Date Per Election for Office Sought		285370.89	Disburseme 2014	
	, , ,			Other (specify) ►
Full Name of Payee Freedomworks, Inc.			Date	e of Public Distribution/Dissemination
Mailing Address 400 N Carrital Ct. NW				05 20 2014
400 N Capitol St., NW			Amo	ount
City	State	Zip Code		2.28
Washington	DC	20001		saction ID : SE.35482 e of Disbursement or Obligation
Purpose of Expenditure IE-Perdue-Email/Social Media/Printing		Category/ 004		05 / 20 / Y Y Y Y 05 / 20 / 2014
		Туре		
Name of Federal Candidate		Support	Office Sou	
DAVID PERDUE		X Oppose	Presi	ident 🗙 Senate State: <u>GA</u>
Calendar Year-To-Date Per Election for Office Sought		135.68	Disburseme 2014	
	, , ,			Other (specify)
				004.50
(a) SUBTOTAL of Itemized Independent Exp	benaltures		·· • L.	334.52
(b) SUBTOTAL of Unitemized Independent	Expenditures			
(c) TOTAL Independent Expenditures			•••	
Under penalty of perjury I certify that the in- with, or at the request or suggestion of, any party committee) any political party committe	candidate or authorize			
R. Russ Walker				
	[Electro	mically Filed]	9 06	20 2014
Signature				

TIEMIZED INDEPENDENT EXPENDIT	URES				FOR LINE	OF 207 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC I		ON NUMBER V
FREEDOMWORKS FOR AMER	ICA				C00499020	
					000433020	
Check if24-hour report48-hour rep	ort New re	eport Amends repo		M = M	/ D D /	Y Y Y Y Y
Full Name of Payee			Date	of Publi	ic Distribution	/Dissemination
Freedomworks, Inc.				05	/ D D / 20	2014 Y
Mailing Address 400 N Capitol St., NW			Amou			
Suite 735			_			200 74
City	State DC	Zip Code	Transa	7	D : SE.35483	809.74
Washington	DC	20001			ursement or (Obligation
Purpose of Expenditure IE-Smith-Email/Social Media/Printing		Category/ Type 004		05	/ 20 /	Y Y Y Y 2014
Name of Federal Candidate		Support	Office Sough	nt:	X House	District: 02
BRYAN SMITH		Oppose	Presid		Senate	State: ID
Calendar Year-To-Date		27140.92	Disbursemer 2014	nt For:	X Primary	/ General
Per Election for Office Sought		37149.83		other (s	pecify) 🕨	
Full Name of Payee			Date	of Publ	lic Distributior	/Dissemination
Freedomworks, Inc.			P	05	/ D D / 20	2014
Mailing Address 400 N Capitol St., NW			L	00	20	2014
Suite 735			Amou	ınt		
City	State	Zip Code		_		79.92
Washington	DC	20001			D: SE.35484 oursement or	Obligation
Purpose of Expenditure IE-Loudermilk-Email/Social Media/Printing		Category/ Type 004		05 ^M	/ 20 /	2014 Y
Name of Federal Candidate		Support	Office Sougl	nt:	X House	District: 11
BARRY LOUDERMILK		Oppose	Presid		Senate	State: GA
Calendar Year-To-Date			Disbursemer	L	Rrimar	
Per Election for Office Sought		10715.24	2014		specify) ►	
(a) SUBTOTAL of Itemized Independent Exp	penditures		•• •	-7-		889.66
			_			
(b) SUBTOTAL of Unitemized Independent	Expenditures		• •	-7		
			_			
(c) TOTAL Independent Expenditures			·· •	-7		
Under penalty of perjury I certify that the in with, or at the request or suggestion of, any party committee) any political party committe	candidate or authorize	•				
R. Russ Walker	[Electro	onically Filed]	/	20	/ <u>20</u>	Y Y
Signature		Date		20	20	

ITEMIZED INDEPENDENT EXPENDITORES		PAGE 149 OF 207 FOR LINE 24 OF FORM 3X
		FEC IDENTIFICATION NUMBER ▼
FREEDOMWORKS FOR AMERICA		С С00499020
Check if 24-hour report 48-hour report New report	Amends report filed	on / / / Y = Y = Y
Full Name of Payee		Date of Public Distribution/Dissemination
Freedomworks, Inc.		05 20 2014
Mailing Address 400 N Capitol St., NW		Amount
City State Zip	o Code	2.28
		Transaction ID : SE.35485 Date of Disbursement or Obligation
Purpose of Expenditure IE-Moll-Email/Social Media/Printing	Category/ Type 004	05 / D D / Y Y Y Y 20 / 2014
Name of Federal Candidate	Support Office	e Sought: X House District: 04
THOMAS MOLL	Oppose	President Senate State: AR
Calendar Year-To-Date Per Election for Office Sought	311.02 Disbu	ursement For: X Primary General General Other (specify) ►
Full Name of Payee		Date of Public Distribution/Dissemination
Freedomworks, Inc.		05 20 2014
Mailing Address 400 N Capitol St., NW		Amount
Suite 735		Amount
	p Code	38.82
	0001	Transaction ID : SE.35486 Date of Disbursement or Obligation
Purpose of Expenditure IE-Schultz-Email/Social Media/Printing	Category/ Type 004	M M / D D / Y Y Y Y Y 05 20 2014
Name of Federal Candidate	Support Office	e Sought: X House District: 03
MATTHEW DAVID SCHULTZ	Oppose	President Senate State: IA
Calendar Year-To-Date Per Election for Office Sought	10643.96 Disbu 2014	ursement For: X Primary General Other (specify) ►
(a) SUBTOTAL of Itemized Independent Expenditures	····· •	41.10
(b) SUBTOTAL of Unitemized Independent Expenditures	•	
(c) TOTAL Independent Expenditures	►	
Under penalty of perjury I certify that the independent expenditures rep with, or at the request or suggestion of, any candidate or authorized co party committee) any political party committee or its agent.		
R. Russ Walker [Electronical	ly Filed] Date 0	6 20 / Y Y Y Y Y
Signature	Date	

ITEMIZED INDEPENDENT EXPENDI	IURES				FOR LINE	0 OF 207 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC I		ION NUMBER V
FREEDOMWORKS FOR AME	RICA			С	C00499020	
Check if 24-hour report 48-hour re	port New re	eport Amends repo		1 – M	/ D D /	Y Y Y Y Y
Full Name of Payee			Date	of Publ	ic Distributior	n/Dissemination
Freedomworks, Inc.			· · · · · · · · · · · · · · · · · · ·	05	/ D D / 20	Y Y Y Y 2014
Mailing Address 400 N Capitol St., NW			Amou	unt		
Suite 735			Amot			
City	State	Zip Code		7		2.28
Washington	DC	20001			D: SE.35487 ursement or	Obligation
Purpose of Expenditure IE-Johnson-Email/Social Media/Printing		Category/ Type 004		05	/ 20 /	2014
Name of Federal Candidate		Support	Office Sough	nt:	X House	District: 01
ROBERT EUGENE MD JOHNSON		Oppose	Presid		Senate	State: GA
Calendar Year-To-Date			Disbursemer	nt For:	X Primar	y General
Per Election for Office Sought		92.58	2014	Other (s	pecify) 🕨	
Full Name of Payee			Date	of Publ	lic Distributior	n/Dissemination
Freedomworks, Inc.			- I P	05	/ D D /	2014
Mailing Address 400 N Capitol St., NW						
Suite 735			Amou	unt		
City	State	Zip Code				38.82
Washington	DC	20001			D: SE.35534 oursement or	
Purpose of Expenditure IE-Mathis-Email/Social Media/Printing		Category/ 004		M M	/ ^D 20 /	YYYYY
		Туре		05	20	2014
Name of Federal Candidate		X Support	Office Soug	nt: [X House	District: 06
CHAD DR MATHIS		Oppose	Presic	lent [Senate	State: AL
Calendar Year-To-Date		204.00 00	Disburseme	nt For:	X Primar	y General
Per Election for Office Sought		20186.90	2014	Other (s	pecify) ►	
			_			
(a) SUBTOTAL of Itemized Independent Ex	penditures		•• ►	-7	-7-	41.10
<u> </u>			_			
(b) SUBTOTAL of Unitemized Independent	Expenditures		•••	-7		
(c) TOTAL Independent Expenditures						
()				-7		
Under penalty of perjury I certify that the in with, or at the request or suggestion of, any party committee) any political party committ	/ candidate or authorize	•				
R. Russ Walker	[T]4	wiggly Filed	M /			YYY
Signature		Date [Date	9 06	20	20	14

ITEMIZED INDEPENDENT EXPENDI	TURES				PAGE 151 OF 207 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC II	DENTIFICATION NUMBER V
FREEDOMWORKS FOR AME	RICA				C00499020
				U	000499020
Check if24-hour report48-hour re	port New re	port Amends repo		1 - M	
Full Name of Payee			Date	of Publi	c Distribution/Dissemination
Freedomworks, Inc.				05	/ D D / Y Y Y Y 20 2014
Mailing Address 400 N Capitol St., NW			L		10 1011
Suite 735			Amou	Int	
City	State	Zip Code			438.86
Washington	DC	20001			D : SE.35555 ursement or Obligation
Purpose of Expenditure IE-Smith-Travel		Category/ Type 002		05	/ 20 / Y Y Y Y 20 / 2014
Name of Federal Candidate		Support	Office Sough	nt· 🔊	X House District:02
BRYAN SMITH		Oppose	Presid	Ē	Senate State: ID
Calendar Year-To-Date			Disbursemer	nt For:	Primary General
Per Election for Office Sought		37588.69	2014	Other (sp	pecify) ▶
Full Name of Payee			Date	of Publi	ic Distribution/Dissemination
Freedomworks, Inc.				05	/ D D / Y Y Y Y 21 2014
Mailing Address 400 N Capitol St., NW			A		
Suite 735			Amou	int	
City	State	Zip Code			252.32
Washington	DC	20001			D: SE.32524 ursement or Obligation
Purpose of Expenditure IE-McDaniel-Email/Social Media/Printing		Category/ Type 004		05	/ D_D / Y_Y_Y_Y 21 2014
Name of Federal Candidate		Support	Office Soug	nt:	House District: 00
CHRISTOPHER BRIAN MCDANIEL		Oppose	Presid	lent	Senate State: <u>MS</u>
Calendar Year-To-Date Per Election for Office Sought		263491.10	Disbursemer 2014	nt For:	Primary General
				Other (s	pecify) ►
(a) SUBTOTAL of Itemized Independent	un and it. was				004.40
(a) SUBTOTAL of Itemized Independent E:	xpenditures		·· •	-7-	691.18
(b) SUBTOTAL of Unitemized Independent	Expenditures				
(c) TOTAL Independent Expenditures			• •		
Under penalty of perjury I certify that the i with, or at the request or suggestion of, an party committee) any political party commit	y candidate or authorize				
R. Russ Walker			M M /	D D	
Signature	[Electro	mically Filed] Date	e 06	20	2014
Oignature					

ITEMIZED INDEPENDENT EXPENDI	IONEO				PAGE 152 FOR LINE 2	OF 207 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC ID		
FREEDOMWORKS FOR AME	RICA				C00499020	
					500499020	
Check if 24-hour report 48-hour re	port New re	port Amends repo		- M /		Y Y Y Y
Full Name of Payee			Date of	of Public	Distribution/	Dissemination
Freedomworks, Inc.			M	05	21	2014 Y
Mailing Address 400 N Capitol St., NW			Amou	nt		
Suite 735			Amou	n		
City	State	Zip Code				807.46
Washington	DC	20001			: SE.35488 irsement or C	Obligation
Purpose of Expenditure IE-Smith-Email/Social Media/Printing		Category/ Type 004		05	21	2014 Y
Name of Federal Candidate		Support	Office Sough	t: 🔉	K House	District: 02
BRYAN SMITH		Oppose	Preside		Senate	State: ID
Calendar Year-To-Date		007.40	Disbursemen	t For:	Primary	X General
Per Election for Office Sought		807.46	2014 🗌 0	ther (sp	ecify) ►	
Full Name of Payee			Date	of Public	c Distribution	Dissemination
Freedomworks, Inc.			N	05	21	2014 Y
Mailing Address 400 N Capitol St., NW			Amou	nt		
Suite 735			Anou			
City	State	Zip Code		7		38.82
Washington	DC	20001			: SE.35489 Irsement or (Obligation
Purpose of Expenditure IE-Birman-Email/Social Media/Printing		Category/ Type 004	N.	05	21	2014 Y
Name of Federal Candidate		Support	Office Sough	it: 🔉	K House	District: 07
IGOR A BIRMAN		Oppose	Preside	ent	Senate	State: CA
Calendar Year-To-Date Per Election for Office Sought		28657.19	Disbursemen 2014		Primary	General
(a) SUBTOTAL of Itemized Independent Ex	nondituroo				(colly) •	846.28
				-7-	-7-	040.20
(b) SUBTOTAL of Unitemized Independent	Expenditures		• •	-7-		
(c) TOTAL Independent Expenditures			•			
Under penalty of perjury I certify that the in with, or at the request or suggestion of, any party committee) any political party committe	/ candidate or authorize					
R. Russ Walker	[Electro.	nically Filed]	06 /	20	/ 201	v v A
Signature		Date		20	201	

ITEMIZED INDEPENDENT EXPENDIT	URES				PAGE 153 FOR LINE 24	OF 207 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC I		
FREEDOMWORKS FOR AMER	ICA			С	C00499020	
					000499020	
Check if 24-hour report 48-hour rep	ort New re	port Amends repo		M M	/ D D /	Y Y Y Y
Full Name of Payee			Date	of Publ	lic Distribution/Di	ssemination
Freedomworks, Inc.			- I I	05	/ D D / 21	2014
Mailing Address 400 N Capitol St., NW						
Suite 735			Amou	unt		
City	State	Zip Code				4.56
Washington	DC	20001			D:SE.35490 oursement or Ob	ligation
Purpose of Expenditure IE-Loudermilk-Email/Social Media/Printing		Category/ Type 004		05 ^M		2014
Name of Federal Candidate		Support	Office Soug	nt:	X House Di	strict: 11
BARRY LOUDERMILK		Oppose	Presic	r		State: GA
Calendar Year-To-Date			Disburseme	L	Primary	X General
Per Election for Office Sought		4.56	2014	Other (s	pecify) ▶	·
Full Name of Payee			Date	of Pub	lic Distribution/D	issemination
Freedomworks, Inc.			- I I	05	/ D D / 21	2014
Mailing Address 400 N Capitol St., NW				_		2014
Suite 735			Amo	unt		
City	State	Zip Code				24.46
Washington	DC	20001			ID: SE.35491 oursement or Ob	ligation
Purpose of Expenditure		Category/		M M		Y Y Y Y
IE-Rosendale-Email/Social Media/Printing		Type 004		05	21	2014
Name of Federal Candidate		Support	Office Soug	ht:	X House D	istrict: 00
MATT ROSENDALE		Oppose	Presid	lent	Senate	State: MT
Calendar Year-To-Date			Disburseme	nt For:	Primary	General
Per Election for Office Sought		24.46	2014	Other (s	specify) 🕨	
(a) SUBTOTAL of Itemized Independent Exp	penditures		•••	-7	-7-	29.02
(b) SUBTOTAL of Unitemized Independent	Expanditures					
(b) SOBTOTAL OF ORREINIZED INdependent	_xpenditures		· • L.	-7		
(c) TOTAL Independent Expenditures						
				-7		
Under penalty of perjury I certify that the in with, or at the request or suggestion of, any party committee) any political party committe	candidate or authorize					
R. Russ Walker			NA - NA - /	DD) / Y Y Y	V
Cignoture	[Electro	mically Filed] Date	e 06 /	20	2014	
Signature						

ITEMIZED INDEPENDENT EXPENDITORES	PAGE 154 OF 207 FOR LINE 24 OF FORM 3X
	FEC IDENTIFICATION NUMBER V
FREEDOMWORKS FOR AMERICA	C C00499020
Check if 24-hour report 48-hour report New report Ame	ends report filed on
Full Name of Payee	Date of Public Distribution/Dissemination
Freedomworks, Inc.	05 / D D / Y Y Y Y 21 2014
Mailing Address 400 N Capitol St., NW	Amount
Suite 735 City State Zip Code	38.82
CityStateZip CodeWashingtonDC20001	Transaction ID : SE.35535 Date of Disbursement or Obligation
Purpose of Expenditure IE-Mathis-Email/Social Media/Printing Category/ Type	004 05 / D D / 21 Y Y Y Y
Name of Federal Candidate	Support Office Sought: X House District: 06
CHAD DR MATHIS	Oppose President Senate State: AL
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: X Primary General 2014 Other (specify) ▶
Full Name of Payee	Date of Public Distribution/Dissemination
Freedomworks, Inc.	05 20 2014
Mailing Address 400 N Capitol St., NW	Amount
Suite 735	Amount
City State Zip Code Washington DC 20001	241.56 Transaction ID : SE.35556
	Date of Disbursement or Obligation
Purpose of Expenditure IE-Smith-Travel Category/ Type	002 / D D / Y Y Y Y Y Y 2014
Name of Federal Candidate	Support Office Sought: X House District: 02
BRYAN SMITH	Dppose President Senate State: ID
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: X Primary General 2014 Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	280.38
(b) SUBTOTAL of Unitemized Independent Expenditures	······ •
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported her with, or at the request or suggestion of, any candidate or authorized committee or party committee) any political party committee or its agent.	
R. Russ Walker [Electronically Filed]	Date 06 20 2014
Signature	Date 06 20 2014

TTEMIZED INDEPENDENT EXPENDIT	URES			FOR I	155 OF 207 LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIF	ICATION NUMBER V
FREEDOMWORKS FOR AMER	RICA			C C00499	9020
				0	
Check if 24-hour report 48-hour rep	oort New re	eport Amends repo		M / D	D / Y Y Y Y Y
Full Name of Payee			Date	of Public Distri	bution/Dissemination
Freedomworks, Inc.				05 / D	
Mailing Address 400 N Capitol St., NW			Amou		
Suite 735			Anot		
City	State	Zip Code			4.56
Washington	DC	20001		of Disburseme	5567 nt or Obligation
Purpose of Expenditure IE-Loudermilk-Email/Social Media/Printing		Category/ Type 004			D / Y Y Y Y
Name of Federal Candidate		Support	Office Sough	nt: 🗙 Hou	se District: 11
BARRY LOUDERMILK		Oppose	Presid		C A
Calendar Year-To-Date			Disbursemer		rimary 🗙 General
Per Election for Office Sought		9.12	2014	Other (specify)	• <u> </u>
Full Name of Payee			Date	of Public Distri	bution/Dissemination
Freedomworks, Inc.			- I P		D / Y Y Y Y 2 2014
Mailing Address 400 N Capitol St., NW					2014
Suite 735			Amou	unt	
City	State	Zip Code			99.04
Washington	DC	20001		action ID : SE.3 of Disburseme	32525 nt or Obligation
Purpose of Expenditure IE-McDaniel-Travel		Category/		M M / D	D / Y Y Y Y
ie-wcDaniei-i ravei		Type 002	L	05 22	2 2014
Name of Federal Candidate		X Support	Office Soug	nt: Hou	use District: 00
CHRISTOPHER BRIAN MCDANIEL		Oppose	Presid	lent 🗙 Ser	nate State: <u>MS</u>
Calendar Year-To-Date			Disburseme	nt For: 🗙 F	rimary General
Per Election for Office Sought		263590.14	2014	Other (specify)	·
(a) SUBTOTAL of Itemized Independent Ex	penditures		• •		103.60
			_		
(b) SUBTOTAL of Unitemized Independent	Expenditures		·· •		
(c) TOTAL Independent Expenditures					
			"▶	-7-	
Under penalty of perjury I certify that the ir with, or at the request or suggestion of, any party committee) any political party committe	candidate or authorize	•			-
R. Russ Walker	[Flaster	onically Filed]	M_M /		2014
Signature		Date	9 06	20	2014

ITEMIZED INDEPENDENT EXPENDITU	RES			PAGE 156 OF 207 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
FREEDOMWORKS FOR AMERIC	CA			C C00499020
				0 00010020
Check if 24-hour report 48-hour repor	t 📃 New repo	ort Amends repo		
Full Name of Payee			Date	of Public Distribution/Dissemination
Freedomworks, Inc.			M	05 / D D / Y Y Y Y 22 2014
Mailing Address 400 N Capitol St., NW			Amou	int
Suite 735				
City	State	Zip Code		2.74
Washington	DC	20001		ction ID : SE.35493 of Disbursement or Obligation
Purpose of Expenditure IE-McConnell-Email/Social Media/Printing		Category/ Type 004	M	05 / D D / Y Y Y Y 22 2014
Name of Federal Candidate		Support	Office Sough	nt: House District: 00
MITCH MCCONNELL		X Oppose	Preside	ent 🔀 Senate State: <u>KY</u>
Calendar Year-To-Date			Disbursemen	nt For: Primary X General
Per Election for Office Sought		2.74	2014	Other (specify)
Full Name of Payee			Date	of Public Distribution/Dissemination
Freedomworks, Inc.			N	05 22 2014
Mailing Address 400 N Capitol St., NW				
Suite 735			Amou	int
City	State	Zip Code		2.74
Washington	DC	20001		action ID : SE.35494 of Disbursement or Obligation
Purpose of Expenditure IE-Smith-Email/Social Media/Printing		Category/ 004		M M / D D / Y Y Y Y
		Туре 004		05 22 2014
Name of Federal Candidate		X Support	Office Sough	nt: X House District: 02
BRYAN SMITH		Oppose	Preside	ent Senate State: ID
Calendar Year-To-Date			Disbursemer	nt For: Primary X General
Per Election for Office Sought		810.20	2014	Other (specify) ►
(a) SUBTOTAL of Itemized Independent Expe	nditures		• •	5.48
			_	
(b) SUBTOTAL of Unitemized Independent Ex	penditures		••	
(a) TOTAL Independent Expanditures			_	
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the inde with, or at the request or suggestion of, any ca party committee) any political party committee	andidate or authorized			
R. Russ Walker	[Electron	ically Filed] Date	06	20 / Y Y Y Y 20 2014
Signature				

ITE	EMIZED INDEPENDENT EXPEND	DITURES				PAGE 157 OF 207 FOR LINE 24 OF FORM 3X
NA	ME OF COMMITTEE (In Full)				FFC II	DENTIFICATION NUMBER
F	REEDOMWORKS FOR AME	ERICA				C00499020
						000433020
Ch	eck if 24-hour report 48-hour	report New rep	ort Amends repo		/ M	
	Full Name of Payee			Date	of Publi	c Distribution/Dissemination
	Freedomworks, Inc.			[05	/ D D / Y Y Y Y 22 2014
	Mailing Address 400 N Capitol St., NW			Amou	unt	
	Suite 735				_	
	City	State	Zip Code	يار ا		92.61
	Washington	DC	20001			D: SE.35495 ursement or Obligation
	Purpose of Expenditure IE-Loudermilk-Email/Social Media/Printing	g	Category/ Type 004		05 ^M	/ D D / Y Y Y Y 22 / 2014
	Name of Federal Candidate		Support	Office Soug	nt:	K House District: <u>11</u>
	BARRY LOUDERMILK		Oppose	Presic		Senate State: <u>GA</u>
	Calendar Year-To-Date			Disburseme	nt For:	Primary X General
	Per Election for Office Sought		101.73	2014	Other (sp	pecify) ▶
	Full Name of Payee			Date	of Publi	ic Distribution/Dissemination
	Freedomworks, Inc.			- I r		
	Mailing Address 400 N Copital St. NW			- L	05	22 2014
	400 N Capitol St., NW Suite 735			Amo	unt	
	City	State	Zip Code			2.74
	Washington	DC	20001			D : SE.35496 ursement or Obligation
	Purpose of Expenditure IE-Moll-Email/Social Media/Printing		Category/ 004		M M	/ D D / Y Y Y
	E-Mon-Email/Social Media/Filming		Туре		05	22 2014
	Name of Federal Candidate		X Support	Office Soug	ht:	K House District: 04
	THOMAS MOLL		Oppose	Presid	lent	Senate State: AR
	Calendar Year-To-Date			Disburseme	nt For:	Primary X General
	Per Election for Office Sought		2.74	2014	Other (s	pecify) ►
	(a) SUBTOTAL of Itemized Independent	Expenditures				95.35
	(b) SUBTOTAL of Unitemized Independent	nt Expenditures		•• ►		
				_		
	(c) TOTAL Independent Expenditures			▶	-7	
-						
	Under penalty of perjury I certify that the with, or at the request or suggestion of, a party committee) any political party comm	ny candidate or authorized				
1	D D W H					
1	R. Russ Walker	[Electron	ically Filed] Date	- 06 /	20	/ Y Y Y Y Y 2014
	Signature				<u> </u>	

TIEMIZED INDEPENDENT EXPENDITO	JRES			PAGE 158 OF 207 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER
FREEDOMWORKS FOR AMER	ICA			
				C C00499020
Check if 24-hour report 48-hour report	ort New rep	port Amends repo	ort filed on	M = M / D = D / Y = Y = Y = Y
Full Name of Payee			Date	e of Public Distribution/Dissemination
Freedomworks, Inc.				05 22 2014
Mailing Address 400 N Capitol St., NW			Amo	
Suite 735				
City	State	Zip Code		38.82
Washington	DC	20001		saction ID : SE.35497 e of Disbursement or Obligation
Purpose of Expenditure IE-Schultz-Email/Social Media/Printing		Category/ Type 004		M M / D D / Y Y Y Y 05 / 22 / 2014
Name of Federal Candidate		Support	Office Soug	ght: X House District: 03
MATTHEW DAVID SCHULTZ		Oppose	Presi	ident Senate State: IA
Calendar Year-To-Date		10682.78	Disburseme	ent For: 🗙 Primary 🗌 General
Per Election for Office Sought		10002.70		Other (specify) ►
Full Name of Payee			Date	e of Public Distribution/Dissemination
Freedomworks, Inc.				M M / D D / Y Y Y Y 05 22 2014
Mailing Address 400 N Capitol St., NW				
Suite 735			Amo	ount
City	State	Zip Code		14.98
Washington	DC	20001		saction ID : SE.35498
Purpose of Expenditure		Catagory	Date	e of Disbursement or Obligation
IE-Johnson-Email/Social Media/Printing		Category/ Type 004		05 22 2014
Name of Federal Candidate		X Support	Office Sou	ght: 🗙 House District: <u>01</u>
ROBERT EUGENE MD JOHNSON		Oppose	Presi	ident Senate State: GA
Calendar Year-To-Date Per Election for Office Sought	7 7 7	14.98	Disburseme 2014	ent For: Primary X General Other (specify) ►
(a) SUBTOTAL of Itemized Independent Exp(b) SUBTOTAL of Unitemized Independent E				53.80
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the inc with, or at the request or suggestion of, any party committee) any political party committee	candidate or authorize			
R. Russ Walker	[Electron	nically Filed]	06	/ D=D / Y=Y=Y=Y 20 2014
Signature		Date		

ITEMIZED INDEPENDENT EXPENDITURES	PAGE 159 OF 207 FOR LINE 24 OF FORM 3X
	FEC IDENTIFICATION NUMBER V
FREEDOMWORKS FOR AMERICA	C C00499020
Check if 24-hour report 48-hour report New report Amends repor	t filed on
Full Name of Payee	Date of Public Distribution/Dissemination
Freedomworks, Inc.	05 / D D / Y Y Y Y 05 22 2014
Mailing Address 400 N Capitol St., NW	
Suite 735	Amount
City State Zip Code	5.49
Washington DC 20001	Transaction ID : SE.35536 Date of Disbursement or Obligation
Purpose of Expenditure Category/ IE-Mathis-Email/Social Media/Printing 004	05 / D D / Y Y Y Y 2014
Name of Federal Candidate Support	Office Sought: X House District: 06
CHAD DR MATHIS Oppose	President Senate State: <u>AL</u>
Calendar Year-To-Date	Disbursement For: X Primary General
Per Election for Office Sought	2014 Other (specify) ▶
Full Name of Payee	Date of Public Distribution/Dissemination
Freedomworks, Inc.	05 / Y Y Y Y 05 22 2014
Mailing Address 400 N Capitol St., NW	Amount
Suite 735	Amount
City State Zip Code	236.28
Washington DC 20001	Transaction ID : SE.35565 Date of Disbursement or Obligation
Purpose of Expenditure IE-McDaniel-Email/Social Media/Printing Category/ Type 004	M M / D D / Y Y Y Y 05 / 22 / 2014
Name of Federal Candidate Support	Office Sought: House District: 00
CHRISTOPHER BRIAN MCDANIEL Oppose	President X Senate State: MS
Calendar Year-To-Date Per Election for Office Sought 263826.42	Disbursement For: X Primary General
Per Election for Office Sought	Other (specify) ►
(a) SUBTOTAL of Itemized Independent Expenditures	241.77
(b) SUBTOTAL of Unitemized Independent Expenditures	I I I I I I I I I I I I I I I I I I I
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were r with, or at the request or suggestion of, any candidate or authorized committee or agent of party committee) any political party committee or its agent.	
R. Russ Walker [Electronically Filed] Date	06 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature	

TEMIZED INDEPENDENT EXPENDITORES	PAGE 160 OF 207 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER
FREEDOMWORKS FOR AMERICA	C C00499020
Check if 24-hour report 48-hour report New report Amends report filed	
Full Name of Payee Freedomworks, Inc.	Date of Public Distribution/Dissemination
	05 / D D / Y Y Y Y Y 2014
Mailing Address 400 N Capitol St., NW	Amount
Suite 735	200.05
CityStateZip CodeWashingtonDC20001	206.95 Transaction ID : SE.32526 Date of Disbursement or Obligation
Purpose of Expenditure Category/ IE-McDaniel-Email/Social Media/Printing 004	05 / D D / Y Y Y Y 2014
Name of Federal Candidate X Support Office	Sought: House District: 00
CHRISTOPHER BRIAN MCDANIEL	President Senate State: MS
Calendar Year-To-Date Disbu Per Election for Office Sought 264033.37	rsement For: X Primary General General Other (specify) ►
Full Name of Payee	Date of Public Distribution/Dissemination
Freedomworks, Inc.	05 / D D / Y Y Y Y 05 23 2014
Mailing Address 400 N Capitol St., NW	
Suite 735	Amount
City State Zip Code	19.41
Washington DC 20001	Transaction ID : SE.35499 Date of Disbursement or Obligation
Purpose of Expenditure IE-Loudermilk-Email/Social Media/Printing Category/ Type 004	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate X Support Office	e Sought: X House District: 11
BARRY LOUDERMILK Oppose	President Senate State: GA
Calendar Year-To-Date Disbu Per Election for Office Sought 121.14	Irsement For: Primary X General Other (specify) ►
(a) SUBTOTAL of Itemized Independent Expenditures	226.36
	7 7 7
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not ma with, or at the request or suggestion of, any candidate or authorized committee or agent of either party committee) any political party committee or its agent.	
R. Russ Walker [Electronically Filed]	6 / D D / Y Y Y Y
Signature	20 2014

ITEMIZED INDEPENDENT EXPENDI	IURES				PAGE 161 FOR LINE 24	OF 207 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC I	DENTIFICATION	
FREEDOMWORKS FOR AME	RICA				C00499020	
				C	00499020	
Check if24-hour report48-hour re	eport New rep	port Amends repo		M		Y Y Y Y
Full Name of Payee			Date	of Publi	ic Distribution/Di	ssemination
Freedomworks, Inc.			N	05	/ D D / 23	2014
Mailing Address 400 N Capitol St., NW			Amou	nt		
Suite 735						
City	State	Zip Code				38.82
Washington	DC	20001			D:SE.35500 ursement or Ob	ligation
Purpose of Expenditure IE-Schultz-Email/Social Media/Printing		Category/ Type 004		05	/ 23 /	2014
Name of Federal Candidate		Support	Office Sough	it:	X House Di	strict: 03
MATTHEW DAVID SCHULTZ		Oppose	Preside			State: IA
Calendar Year-To-Date		40704.00	Disbursemer	t For:	X Primary	General
Per Election for Office Sought		10721.60	2014 C	ther (s	pecify) 🕨	
Full Name of Payee Freedomworks, Inc.			Date	of Publ	ic Distribution/D	issemination
				05	23 /	2014 Y
Mailing Address 400 N Capitol St., NW			Amou	Int		
Suite 735						
City	State	Zip Code	Transa	otion I	D : SE.35537	48.31
Washington	DC	20001			bursement or Ob	ligation
Purpose of Expenditure IE-Mathis-Email/Social Media/Printing		Category/ Type 004		05	/ D_0 /	2014 Y
Name of Federal Candidate		X Support	Office Sough	nt:	X House D	istrict: 06
CHAD DR MATHIS		Oppose	Presid	ent	Senate	State: AL
Calendar Year-To-Date Per Election for Office Sought		20279.52	Disbursemer 2014		Primary	General
						07.40
(a) SUBTOTAL of Itemized Independent E	xperialares			-7-		87.13
(b) SUBTOTAL of Unitemized Independent	t Expenditures		• •			
				-7-	7	
(c) TOTAL Independent Expenditures			·· •			
Under penalty of perjury I certify that the with, or at the request or suggestion of, ar party committee) any political party commit	ny candidate or authorize					
R. Russ Walker	IElectro	nically Filed]		20		Y
Signature		Date	9 06	20	2014	

TIEMIZED INDEPENDENT EXPENDIT	URES			PAGE 162 OF 207 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)			EEC I	DENTIFICATION NUMBER V
FREEDOMWORKS FOR AMER	RICA			
			C	C00499020
Check if 24-hour report 48-hour rep	port New rep	port Amends repo	rt filed on	/ D = D / Y = Y = Y = Y
Full Name of Payee			Date of Publ	ic Distribution/Dissemination
Freedomworks, Inc.			05	/ D D / Y Y Y Y 27 2014
Mailing Address 400 N Capitol St., NW			Amount	
Suite 735	01.1	7. 0.1		400.47
City	State DC	Zip Code	Transaction	180.17
Washington	DC	20001	Transaction I Date of Disb	ursement or Obligation
Purpose of Expenditure IE-McDaniel-Email/Social Media/Printing		Category/ Type 004	^M 05	/ D D / Y Y Y Y 27 2014
Name of Federal Candidate		Support	Office Sought:	House District: 00
CHRISTOPHER BRIAN MCDANIEL		Oppose	L	Senate State: MS
Calendar Year-To-Date		264213.54	Disbursement For:	Primary General
Per Election for Office Sought		204213.34	Other (s	pecify) 🕨
Full Name of Payee			Date of Publ	ic Distribution/Dissemination
Freedomworks, Inc.			05	/ D D / Y Y Y Y 27 2014
Mailing Address 400 N Capitol St., NW				
Suite 735			Amount	
City	State	Zip Code		21.81
Washington	DC	20001	Transaction I Date of Disb	D: SE.35501 pursement or Obligation
Purpose of Expenditure IE-Begich-Email/Social Media/Printing		Category/ Type 004	M 05	/ D D / Y Y Y Y 27 2014
Name of Federal Candidate		Support	Office Sought:	House District: 00
MARK BEGICH		X Oppose		X Senate State: <u>AK</u>
Calendar Year-To-Date			Disbursement For:	X Primary General
Per Election for Office Sought		909.41	2014 Other (s	pecify) ▶
(a) SUBTOTAL of Itemized Independent Ex	penditures		•	201.98
(b) SUBTOTAL of Unitemized Independent	Expenditures		•	
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the in with, or at the request or suggestion of, any party committee) any political party committe	candidate or authorize			
R. Russ Walker	[Electron	nically Filed]	06 / 20	/ Y Y Y Y Y Y 2014
Signature		Date	20	2014

TEMIZED INDEPENDENT EXPENDITURES					PAGE 163 FOR LINE 2	OF 207 4 OF FORM 3X
				FEC I	IDENTIFICATIO	N NUMBER 🔻
FREEDOMWORKS FOR AMERICA				С	C00499020	
Check if 24-hour report 48-hour report	New rep	ort Amends repo	ort filed on	M	/ D D /	Y Y Y Y Y
Full Name of Payee			Date	e of Publ	lic Distribution/I	Dissemination
Freedomworks, Inc.				^M 05	/ D D / 27	2014
Mailing Address 400 N Capitol St., NW			Amo			
Suite 735			74110			
City	State	Zip Code		,		5.49
Washington	DC	20001			D: SE.35502 oursement or O	bligation
Purpose of Expenditure IE-Pryor-Email/Social Media/Printing		Category/ Type 004		^M 05	/ 27 /	2014
Name of Federal Candidate		Support	Office Sou	ght:	House I	District: 00
MARK LUNSFORD PRYOR			Presi	dent	X Senate	State: AR
Calendar Year-To-Date		5.49	Disburseme	ent For:	Primary	X General
Per Election for Office Sought	J J			Other (s	specify) 🕨	
Full Name of Payee Freedomworks, Inc.			Date		lic Distribution/	
· · · · · · · · · · · · · · · · · · ·				05	/ D D /	2014
Mailing Address 400 N Capitol St., NW			Amo	ount		
Suite 735	0					04.04
City Washington	State DC	Zip Code 20001			ID:SE.35503 oursement or C	21.81 Obligation
Purpose of Expenditure IE-Landreiu-Email/Social Media/Printing		Category/ Type 004		^M 05	/ D_D /	2014
Name of Federal Candidate		Support	Office Sou	ght:	House	District: 00
MARY L LANDRIEU		X Oppose	Pres	ident	X Senate	State: LA
Calendar Year-To-Date Per Election for Office Sought		7915.22	Disbursem 2014		Primary	General
(a) SUBTOTAL of Itemized Independent Expenditure	es			Other (s	specify) ►	27.30
				-7		
(b) SUBTOTAL of Unitemized Independent Expendi	tures		·· ▶ []	-7		
(c) TOTAL Independent Expenditures						
				-7	-7-	
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized					
R. Russ Walker	[Electron	ically Filed]		/ 20		Y Y
Signature		Date	9 06	20	2014	<u> </u>

ITEMIZED INDEPENDENT EXPENDITURES		PAGE 164 OF 207 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)	FE	C IDENTIFICATION NUMBER ▼
FREEDOMWORKS FOR AMERICA	C	C00499020
Check if 24-hour report 48-hour report New report	Amends report filed on	
Full Name of Payee	Date of F	Public Distribution/Dissemination
Freedomworks, Inc.	05	M / D D / Y Y Y Y 27 2014
Mailing Address 400 N Capitol St., NW	Amount	
Suite 735		
CityStateZip CodeWashingtonDC20001		21.81 on ID : SE.35504
		Disbursement or Obligation
Purpose of Expenditure IE-Hagan-Email/Social Media/Printing Ty		/ D D / Y Y Y Y 27 / 2014
Name of Federal Candidate	Support Office Sought:	House District: 00
KAY R HAGAN	Oppose President	Senate State: <u>NC</u>
Calendar Year-To-Date	Disbursement Fo	or: Primary X General
Per Election for Office Sought		r (specify) ►
Full Name of Payee	Date of F	Public Distribution/Dissemination
Freedomworks, Inc.	05	
Mailing Address 400 N Capitol St., NW	Amount	
Suite 735	Anount	
City State Zip Cod		975.63
Washington DC 20001		on ID : SE.32528 Disbursement or Obligation
Purpose of Expenditure Catego IE-McDaniel-Travel Ty	ry/ 002 05	
		House District: 00
CHRISTOPHER BRIAN MCDANIEL		
Calendar Year-To-Date Per Election for Office Sought 26518		
		r (specify) ►
(a) SUBTOTAL of Itemized Independent Expenditures		997.44
(b) SUBTOTAL of Unitemized Independent Expenditures		
(c) TOTAL Independent Expenditures		
Under penalty of perjury I certify that the independent expenditures reported with, or at the request or suggestion of, any candidate or authorized committee party committee) any political party committee or its agent.		
R. Russ Walker [Electronically File]		20 / Y Y Y Y 2014
Signature		لينبا ل

ITEMIZED INDEPENDENT EXPENDITURES					PAGE 165 OF 207 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC I	DENTIFICATION NUMBER V
FREEDOMWORKS FOR AMERICA				С	C00499020
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M M	
Full Name of Payee			Dat	e of Publi	ic Distribution/Dissemination
Freedomworks, Inc.				05 ^M	/ D D / Y Y Y Y 28 2014
Mailing Address 400 N Capitol St., NW			Am	ount	
Suite 735	24-4-	Zin Oada			247.04
,	State DC	Zip Code 20001			247.04 D : SE.32529 ursement or Obligation
Purpose of Expenditure IE-McDaniel-Email/Social Media/Printing		Category/ Type 004		05	/ D D / Y Y Y Y 28 / 2014
Name of Federal Candidate		Support	Office Sou	aht:	House District: 00
CHRISTOPHER BRIAN MCDANIEL		Oppose			Senate State: MS
Calendar Year-To-Date Per Election for Office Sought		265436.21	Disbursem 2014	ent For: Other (s	✓ Primary General pecify) ►
Full Name of Payee Freedomworks, Inc.			Dat	e of Publ	ic Distribution/Dissemination
Mailing Address 400 N Capitol St., NW				ount	20 2014
Suite 735			AIII	ouni	
City	State	Zip Code			2.74
Washington	DC	20001			D: SE.35505 pursement or Obligation
Purpose of Expenditure IE-Begich-Email/Social Media/Printing		Category/ Type 004		05	⁷ 28 ⁷ 2014
Name of Federal Candidate		Support	Office Sou	ight:	House District: 00
MARK BEGICH		X Oppose			Senate State: <u>AK</u>
Calendar Year-To-Date Per Election for Office Sought	,	912.15	Disbursem 2014		Primary General General General
(a) SUBTOTAL of Itemized Independent Expenditures.			• •	-7-	249.78
(b) SUBTOTAL of Unitemized Independent Expenditure	əs		• •	-7	
(c) TOTAL Independent Expenditures			•	-7	
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candidate party committee) any political party committee or its ag	or authorized				
R. Russ Walker	[Electron	ically Filed] Date	M M M	/ 20	/ Y Y Y Y Y 2014
Signature					

TIEMIZED INDEPENDENT EXPENDIT	UNES			PAGE 166 OF 207 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER V
FREEDOMWORKS FOR AMER	RICA			
				C C00499020
Check if 24-hour report 48-hour rep	port New rep	port Amends repo		
Full Name of Payee			Date	of Public Distribution/Dissemination
Freedomworks, Inc.			E E	05 28 2014
Mailing Address 400 N Capitol St., NW			Amou	
Suite 735				
City	State	Zip Code		2.74
Washington	DC	20001		action ID : SE.35506 of Disbursement or Obligation
Purpose of Expenditure IE-Pryor-Email/Social Media/Printing		Category/ Type 004		05 / D D / Y Y Y Y 2014
Name of Federal Candidate		Support	Office Soug	ht: House District: 00
MARK LUNSFORD PRYOR		X Oppose	Presic	
Calendar Year-To-Date		8.23	Disbursemer	nt For: Primary X General
Per Election for Office Sought		0.20		Dther (specify) ►
Full Name of Payee Freedomworks, Inc.			Date	of Public Distribution/Dissemination
				05 28 2014
Mailing Address 400 N Capitol St., NW			Amo	unt
Suite 735				
City	State	Zip Code		2.74
Washington	DC	20001		action ID : SE.35507 of Disbursement or Obligation
Purpose of Expenditure IE-Landrieu-Email/Social Media/Printing		Category/ Type 004		05 / 28 / Y Y Y Y 2014
Name of Federal Candidate		Support	Office Soug	ht: House District: 00
MARY L LANDRIEU		X Oppose	Presid	lent X Senate State: LA
Calendar Year-To-Date		7917.96	Disburseme 2014	nt For: X Primary General
Per Election for Office Sought		7917.90		Other (specify) ►
(a) SUBTOTAL of Itemized Independent Ex	penditures			5.48
(b) SUBTOTAL of Unitemized Independent	Expenditures		•	· · · · · · · · · ·
(c) TOTAL Independent Expenditures				· · · · · · · · · ·
Under penalty of perjury I certify that the ir with, or at the request or suggestion of, any party committee) any political party committee	candidate or authorize			
R. Russ Walker	[Electron	nically Filed]	, 06 /	20 / Y Y Y Y Y Y
Signature	• • • • •	Date	;	

TIEMIZED INDEPENDENT EXPENDIT	UNLO				FOR LINE	OF 207 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC I		ON NUMBER 🔻
FREEDOMWORKS FOR AMER	ICA			С	C00499020	
				U		
Check if 24-hour report 48-hour report	ort New re	eport Amends repo		1 – M	/ D D /	Y Y Y Y Y
Full Name of Payee			Date	of Publi	ic Distribution	/Dissemination
Freedomworks, Inc.			P.	05	/ D D / 28	2014 Y
Mailing Address 400 N Capitol St., NW			Amou	unt		
Suite 735			Amot			
City	State	Zip Code		7		2.74
Washington	DC	20001			D: SE.35508 ursement or	Obligation
Purpose of Expenditure IE-Hagan-Email/Social Media/Printing		Category/ Type 004		05	/ 28	2014
Name of Federal Candidate		Support	Office Sough	nt:	House	District: 00
KAY R HAGAN		X Oppose	Presid	L	X Senate	State: NC
Calendar Year-To-Date			Disbursemer	L	Primary	
Per Election for Office Sought	, , , , ,	268.50	2014		pecify) ►	
Full Name of Payee			Date	of Publ	ic Distributior	/Dissemination
Freedomworks, Inc.			E P	05	/ D D / 29	2014
Mailing Address 400 N Capitol St., NW						
Suite 735			Amou	unt		
City	State	Zip Code				103.91
Washington	DC	20001			D: SE.35509 pursement or	Obligation
Purpose of Expenditure		Category/		M M	/ D D /	YYYYY
IE-Birman-Email/Social Media/Printing		Type 004	L	05	29	2014
Name of Federal Candidate		X Support	Office Sough	nt:	X House	District: 07
IGOR A BIRMAN		Oppose	Presid	lent	Senate	State: CA
Calendar Year-To-Date			Disbursemer	nt For:	X Primar	y General
Per Election for Office Sought		28761.10	2014	Other (s	pecify) ►	
(a) SUBTOTAL of Itemized Independent Exp	enditures					106.65
				-7-		
(b) SUBTOTAL of Unitemized Independent E	Expenditures		• •			
				-1		
(c) TOTAL Independent Expenditures			•••			
Under penalty of perjury I certify that the inc with, or at the request or suggestion of, any party committee) any political party committee	candidate or authoriz	•		•		
R. Russ Walker	[Electro	onically Filed] Date	06	20	/ Y Y 202	ү ү 14
Signature					نعا ا	

TTEMIZED INDEPENDENT EXPENDITO				L	PAGE 168 FOR LINE 2	OF 207 24 OF FORM 3X
NAME OF COMMITTEE (In Full)	_			FEC ID	ENTIFICATI	ON NUMBER 🔻
FREEDOMWORKS FOR AMERIC	CA			Cc	00499020	
Check if 24-hour report 48-hour report	New r	eport Amends repo		/ M /		YYYYY
Full Name of Payee			Date	of Public	Distribution	Dissemination
Freedomworks, Inc.			7	05	29 /	2014 Y
Mailing Address 400 N Capitol St., NW			Amou	unt		
Suite 735	Suite 735					
City	State	Zip Code				26.28
Washington	DC	20001			: SE.35510 sement or (Obligation
Purpose of Expenditure IE-Schultz-Email/Social Media/Printing		Category/ Type 004		05	^D 29 /	y y y y 2014
Name of Federal Candidate		Support	Office Sough	nt: 🗙	House	District: 03
MATTHEW DAVID SCHULTZ		Oppose	Presid	-	Senate	State: IA
Calendar Year-To-Date			Disbursemer	nt For:	_ X Primary	General
Per Election for Office Sought		10747.88	2014)ther (spe	ecify) ►	
Full Name of Payee			Date	of Public	Distribution	/Dissemination
Freedomworks, Inc.			E E	05 /	D D / 19	2014
Mailing Address 400 N Capitol St., NW					10	2014
Suite 735			Amou	unt		
City	State	Zip Code				45.69
Washington	DC	20001			: SE.35511 rsement or (Obligation
Purpose of Expenditure		Category/		M M /	D D /	YYYYY
IE-Rosendale-Email/Social Media/Printing		Type 004	L	05	29	2014
Name of Federal Candidate		X Support	Office Soug	nt: 🗡	K House	District: 00
MATT ROSENDALE		Oppose	Presid	lent	Senate	State: MT
Calendar Year-To-Date			Disburseme	nt For:	X Primary	/ General
Per Election for Office Sought	7	70.15	2014	Other (spe	ecify) 🕨	
(a) SUBTOTAL of Itemized Independent Exper	nditures		• •			71.97
				_		
(b) SUBTOTAL of Unitemized Independent Exp	penditures		• •	-7-	-7-	
(a) TOTAL Independent Expanditures						
(c) TOTAL Independent Expenditures				-7-	-7-	
Under penalty of perjury I certify that the indep with, or at the request or suggestion of, any ca party committee) any political party committee of	andidate or authoriz	•		•		
R. Russ Walker	[Electr	onically Filed]	M M /	^D 20	/ Y Y 201	4 Y Y
Signature	-	Date			201	

ITEMIZED INDEPENDENT EXPENDI	IURES			PAGE 169 OF 207 FOR LINE 24 OF FORM 3X
				FEC IDENTIFICATION NUMBER V
FREEDOMWORKS FOR AME	RICA			C C00499020
Check if 24-hour report 48-hour re	port New rep	ort Amends repo		M = M / D = D / Y = Y = Y = Y
Full Name of Payee			Date	of Public Distribution/Dissemination
Freedomworks, Inc.				05 / D D / Y Y Y Y 29 2014
Mailing Address 400 N Capitol St., NW			Amou	unt
Suite 735 City	State	Zin Code		544.16
Washington	DC	Zip Code 20001		action ID : SE.35531 of Disbursement or Obligation
Purpose of Expenditure IE-McDaniel-Email/Social Media/Printing		Category/ Type 004		05 / D D / Y Y Y Y 2014
Name of Federal Candidate		Support	Office Soug	ht: House District: 00
CHRISTOPHER BRIAN MCDANIEL		Oppose	Presic	
Calendar Year-To-Date Per Election for Office Sought	7 7 7	315980.37	Disbursemer 2014	nt For: X Primary General Other (specify) ►
Full Name of Payee			Date	of Public Distribution/Dissemination
Freedomworks, Inc.			- I F	M M / D D / Y Y Y Y 05 29 2014
Mailing Address 400 N Capitol St., NW				
Suite 735			Amo	
City	State	Zip Code		1360.83
Washington	DC	20001		action ID : SE.35532 of Disbursement or Obligation
Purpose of Expenditure IE-McDaniel-Travel		Category/ Type 002		M M / D D / Y Y Y Y Y 05 29 2014
Name of Federal Candidate		Support	Office Soug	ht: House District: 00
CHRISTOPHER BRIAN MCDANIEL		Oppose	Presid	
Calendar Year-To-Date Per Election for Office Sought	7 7 7	317341.20	Disburseme	ent For: X Primary General Other (specify) ►
(a) SUBTOTAL of Itemized Independent Ex	xpenditures			1904.99
(b) SUBTOTAL of Unitemized Independent	Expenditures		•	
(c) TOTAL Independent Expenditures				· · · · · · · · · · ·
Under penalty of perjury I certify that the in with, or at the request or suggestion of, any party committee) any political party committ	y candidate or authorized			
R. Russ Walker	[Electron	ically Filed]	M M /	20 / Y Y Y Y Y
Signature		Date	00	20 2014

ITEMIZED INDEPENDENT EXPENDI	IURES				PAGE 170 OF 207 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC II	DENTIFICATION NUMBER ▼
FREEDOMWORKS FOR AME	RICA				C00499020
				C	000499020
Check if24-hour report48-hour re	port New rep	port Amends repo		M	/ D = D / Y = Y = Y = Y
Full Name of Payee			Date	of Publi	ic Distribution/Dissemination
Freedomworks, Inc.			N	05	/ D D / Y Y Y Y 29 2014
Mailing Address 400 N Capitol St., NW			Amou	nt	
Suite 735			, and a		
City	State	Zip Code			103.91
Washington	DC	20001			D: SE.35538 ursement or Obligation
Purpose of Expenditure IE-Mathis-Email/Social Media/Printing		Category/ Type 004		05	/ D_D_ / Y_YYY 29 / 2014
Name of Federal Candidate		Support	Office Sough	nt:	X House District: 06
CHAD DR MATHIS		Oppose	Preside	L.	Senate State: AL
Calendar Year-To-Date		20202 42	Disbursemer	t For:	X Primary General
Per Election for Office Sought		20383.43	2014 C	ther (sp	pecify) ►
Full Name of Payee Freedomworks, Inc.			Date	of Publ	ic Distribution/Dissemination
				05	/ D D / Y Y Y Y 30 2014
Mailing Address 400 N Capitol St., NW			Amou	Int	
Suite 735					
City Washington	State DC	Zip Code 20001	Transa	tion l	352.87 D : SE.32543
		20001			ursement or Obligation
Purpose of Expenditure IE-McDaniel-Email/Social Media/Printing		Category/ Type 004		05	/ D D / Y Y Y Y 30 / 2014
Name of Federal Candidate		X Support	Office Sough	nt:	House District: 00
CHRISTOPHER BRIAN MCDANIEL		Oppose	Presid	ent	Senate State: <u>MS</u>
Calendar Year-To-Date Per Election for Office Sought		317694.07	Disbursemer 2014		Primary General
(a) SUBTOTAL of Itemized Independent Ex	cpenditures			- 7-	456.78
(b) SUBTOTAL of Unitemized Independent	Expenditures		•		
(c) TOTAL Independent Expenditures			•••	-7	
Under penalty of perjury I certify that the i with, or at the request or suggestion of, an party committee) any political party commit	y candidate or authorize				
R. Russ Walker	[Electron	nically Filed] Date	/ /	20	/ Y Y Y Y Y 2014
Signature					

ITEMIZED INDEPENDENT EXPENDIT	URES				FOR LINE	OF 207 24 OF FORM 3X
NAME OF COMMITTEE (In Full)	_			FEC ID		
FREEDOMWORKS FOR AMER	RICA			С	C00499020	
Check if 24-hour report 48-hour rep	port New r	eport Amends repo		I M /		Y Y Y Y Y
Full Name of Payee Freedomworks, Inc.			Date	of Publi	c Distributior	/Dissemination
				05	/ D D / 30 /	2014 Y
Mailing Address 400 N Capitol St., NW			Amou	Int		
Suite 735						
City	State	Zip Code		7		384.21
Washington	DC	20001			D: SE.32544 ursement or	Obligation
Purpose of Expenditure IE-McDaniel-Travel		Category/ Type 002		05	30	2014 Y
Name of Federal Candidate		Support	Office Sough	nt:	House	District: 00
CHRISTOPHER BRIAN MCDANIEL		Oppose	Presid		X Senate	State: MS
Calendar Year-To-Date			Disbursemer	nt For:	X Primar	y General
Per Election for Office Sought		318078.28	2014	Other (sp	becify) ►	
Full Name of Payee			Date	of Publi	c Distributior	n/Dissemination
Freedomworks, Inc.			- I F	05	/ D D /	2014
Mailing Address 400 N Capitol St., NW						
Suite 735			Amo	int		
City	State	Zip Code				165.32
Washington	DC	20001			D: SE.35512 ursement or	
Purpose of Expenditure IE-Birman-Email/Social Media/Printing		Category/ Type 004		05	30	2014 Y
Name of Federal Candidate		Support	Office Soug	nt:	X House	District: 07
IGOR A BIRMAN		Oppose	Presic	lent	Senate	State: CA
Calendar Year-To-Date			Disburseme	nt For:	X Primar	y General
Per Election for Office Sought		28926.42	2014	Other (sp	oecify) ►	
(a) SUBTOTAL of Itemized Independent Ex	penditures		·· •	-7-		549.53
<u> </u>			_			
(b) SUBTOTAL of Unitemized Independent	Expenditures		••	-7-		
(c) TOTAL Independent Expenditures						
				-7-		
Under penalty of perjury I certify that the ir with, or at the request or suggestion of, any party committee) any political party committe	/ candidate or authoriz	•				
R. Russ Walker			M M /	DD		YY
Signature	[Electr	conically Filed] Date	06	20	20	14
Ŭ						

ITEMIZED INDEPENDENT EXPENDI	IURES				FOR LINE 2	OF 207 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC II	DENTIFICATI	ON NUMBER 🔻
FREEDOMWORKS FOR AME	RICA			С	C00499020	
Check if 24-hour report 48-hour re	eport New r	eport Amends repo	ort filed on	M M /	/ D D /	Y = Y = Y = Y
Full Name of Payee			Date	e of Publi	c Distribution	/Dissemination
Freedomworks, Inc.				05	/ D D / 30	2014
Mailing Address 400 N Capitol St., NW			٨٣	ount		
Suite 735				Jun		
City	State	Zip Code				107.09
Washington	DC	20001			D: SE.35513 ursement or (Obligation
Purpose of Expenditure IE-Schultz-Email/Social Media/Printing		Category/ Type 004		^M 05	/ D D / 30	Y Y Y Y 2014
Name of Federal Candidate		Support	Office Sou	ght:	K House	District: 03
MATTHEW DAVID SCHULTZ		Oppose	Pres	ident	Senate	State: <u>IA</u>
Calendar Year-To-Date Per Election for Office Sought		10854.97	Disbursem 2014	ent For: Other (sp	Primary	General
Full Name of Payee	, , , , , , , , , , , , , , , , , , , ,	,	Dat			/Dissemination
Freedomworks, Inc.			Dai	M M	/ D D /	YYYYY
Mailing Address 400 N Conital St. NW				05	30	2014
400 N Capitol St., NW Suite 735			Am	ount		
City	State	Zip Code				184.73
Washington	DC	20001			D:SE.35514 ursement or	Obligation
Purpose of Expenditure IE-Mathis-Email/Social Media/Printing		Category/ Type 004		^M 05 ^M	/ 30	2014
Name of Federal Candidate		Support	Office Sou	ght:	X House	District: 06
CHAD DR MATHIS		Oppose	Pres	ident	Senate	State: AL
Calendar Year-To-Date Per Election for Office Sought		30568.16	Disbursem 2014	ent For: Other (sp	Primary	General
	, , ,	,		Other (S	pecity) 🖻	
(a) SUBTOTAL of Itemized Independent E	xpenditures		••			291.82
(b) SUBTOTAL of Unitemized Independent	Expenditures		••	-7-		
(c) TOTAL Independent Expenditures						
Under penalty of perjury I certify that the with, or at the request or suggestion of, ar party committee) any political party commit	ny candidate or authoriz					
R. Russ Walker	[Electr	conically Filed] Date		/ D D 20	/ 201	Y Y 4
Signature						

ITEMIZED INDEPENDENT EXPENDITURE	5				PAGE 173 OF 207 FOR LINE 24 OF FORM 3
NAME OF COMMITTEE (In Full)				FEC I	DENTIFICATION NUMBER
FREEDOMWORKS FOR AMERICA	L .			С	C00499020
				U	
Check if24-hour report48-hour report	New rep	port Amends repo		1 - M	
Full Name of Payee			Date	of Publi	ic Distribution/Dissemination
Freedomworks, Inc.				05	/ D D / Y Y Y Y 30 2014
Mailing Address 400 N Capitol St., NW			Amou	Int	
Suite 735					
City	State	Zip Code			10.04
Washington	DC	20001			D : SE.35515 ursement or Obligation
Purpose of Expenditure IE-Rosendale-Email/Social Media/Printing		Category/ Type 004		05	/ D D / Y Y Y Y 30 / 2014
Name of Federal Candidate		Support	Office Sough	nt:	X House District: 00
MATT ROSENDALE		Oppose	Presid		Senate State: <u>MT</u>
Calendar Year-To-Date		80.19	Disbursemer	nt For:	Primary Genera
Per Election for Office Sought		00.19		Other (s	pecify) ►
Full Name of Payee Freedomworks, Inc.			Date	of Publ	ic Distribution/Dissemination
				05	/ D D / Y Y Y Y 31 2014
Mailing Address 400 N Capitol St., NW			Amou	Int	
Suite 735					
City	State	Zip Code	Trans	notion I	101.75 D : SE.32545
Washington	DC	20001			bursement or Obligation
Purpose of Expenditure IE-McDaniel-Travel		Category/ Type 002		05 ^M	/ D D / Y Y Y Y 31 2014
Name of Federal Candidate		Support	Office Soug	nt: [House District: 00
CHRISTOPHER BRIAN MCDANIEL		Oppose	Presic	ent	Senate State: MS
Calendar Year-To-Date		328180.03	Disbursemer 2014	nt For:	X Primary Genera
Per Election for Office Sought		320100.03		Other (s	pecify) 🕨
(a) SUBTOTAL of Itemized Independent Expendit	ures		• •	-7-	111.79
(b) SUBTOTAL of Unitemized Independent Expen	dituroc				
				-7	
(c) TOTAL Independent Expenditures					
				-7	
Under penalty of perjury I certify that the indeper with, or at the request or suggestion of, any cand party committee) any political party committee or i	idate or authorize				
R. Russ Walker	[Electron	nically Filed] Date	06	20	/ Y Y Y Y Y 2014
Signature				<u> </u>	

116	MIZED INDEPENDENT EXPEND	NIURES				PAGE 174 OF 207 FOR LINE 24 OF FORM 3X
	ME OF COMMITTEE (In Full)				FEC I	IDENTIFICATION NUMBER V
F	REEDOMWORKS FOR AME	ERICA			С	C00499020
Ch	eck if 24-hour report 48-hour	report New repo	ort Amends repo	ort filed on	M	
	Full Name of Payee			D	ate of Publ	lic Distribution/Dissemination
	Freedomworks, Inc.				^M 05	/ D D / Y Y Y Y 20 2014
	Mailing Address 400 N Capitol St., NW			Δ	mount	
	Suite 735				incurr	
	City	State	Zip Code	- 1 L	,	-708.62
	Washington	DC	20001			D : SE.35557 Dursement or Obligation
	Purpose of Expenditure IE-Smith-Travel credits		Category/ Type 002		^M 05	/ D D / Y Y Y Y 31 2014
	Name of Federal Candidate		Support	Office So	ouaht:	X House District: 02
	BRYAN SMITH		Oppose		esident	Senate State: ID
	Calendar Year-To-Date				ment For:	X Primary General
	Per Election for Office Sought		37121.63	2014	Other (s	specify) ►
	Full Name of Payee			D	ate of Pub	lic Distribution/Dissemination
	Freedomworks, Inc.				^M 05	/ D D / Y Y Y Y 20 2014
	Mailing Address 400 N Capitol St., NW			А	mount	
	Suite 735					
	City	State DC	Zip Code	Tr	neaction	-170.10 ID : SE.35559
	Washington	DC	20001			bursement or Obligation
	Purpose of Expenditure IE-McConnell-Travel Credit		Category/ Type 002		05	/ D D / Y Y Y Y 31 / 2014
	Name of Federal Candidate		Support	Office S	ought:	House District: 00
	MITCH MCCONNELL		X Oppose	Pr	esident	Senate State: KY
	Calendar Year-To-Date		005000 70		ement For:	X Primary General
	Per Election for Office Sought		285200.79	2014	Other (s	specify) ►
	(a) SUBTOTAL of Itemized Independent	Expenditures				-878.72
	(b) SUBTOTAL of Unitemized Independe	nt Expenditures				
				- 7		
	(c) TOTAL Independent Expenditures			►		
	Under penalty of perjury I certify that the with, or at the request or suggestion of, a party committee) any political party comm	any candidate or authorized				
	R. Russ Walker	[Electron	ically Filed] Date	06	/ D [20	2014
	Signature				i lasta	

ITEMIZED INDEPENDENT EXPENDITUR	RES				PAGE 175 OF 207 FOR LINE 24 OF FORM 3
NAME OF COMMITTEE (In Full)				FEC II	DENTIFICATION NUMBER
FREEDOMWORKS FOR AMERIC	CA			С	C00499020
				U	
Check if 24-hour report 48-hour report	New re	port Amends repo		I	
Full Name of Payee			Date	of Publi	ic Distribution/Dissemination
Freedomworks, Inc.			1	05	/ D D / Y Y Y Y 31 2014
Mailing Address 400 N Capitol St., NW			Amou	int	
Suite 735					
City	State	Zip Code	يال ا		-871.87
Washington	DC	20001			D: SE.35560 ursement or Obligation
Purpose of Expenditure IE-McDaniel-Travel Credit		Category/ Type 002		05	¹ 31 ² 2014
Name of Federal Candidate		Support	Office Sough	nt:	House District: 00
CHRISTOPHER BRIAN MCDANIEL		Oppose	Presid	ent	Senate State: <u>MS</u>
Calendar Year-To-Date		207200 40	Disbursemer	nt For:	Primary Genera
Per Election for Office Sought		327308.16	2014 C	ther (sp	pecify) ►
Full Name of Payee Freedomworks, Inc.			Date	of Publ	ic Distribution/Dissemination
				05	/ D D / Y Y Y 06 2014
Mailing Address 400 N Capitol St., NW			Amou	unt	
Suite 735					
City Washington	State DC	Zip Code 20001	Transa	action I	-78.18 D : SE.35563
Purpose of Expenditure					oursement or Obligation
IE-Brannon-Travel Credit		Category/ Type 002		05	/ D D / Y Y Y 31 2014
Name of Federal Candidate		X Support	Office Sougl	nt:	House District: 00
GREGORY JOSEPH BRANNON		Oppose	Presid	ent	X Senate State: NC
Calendar Year-To-Date		149262.16	Disbursemer 2014	nt For:	X Primary Gener
Per Election for Office Sought				Other (s	pecify) ►
			_		
(a) SUBTOTAL of Itemized Independent Expen	ditures		•••	-7-	-950.05
(b) SUBTOTAL of Unitemized Independent Exp	penditures				
				-7	
(c) TOTAL Independent Expenditures			•		
				-7-	
Under penalty of perjury I certify that the indep with, or at the request or suggestion of, any ca party committee) any political party committee of	ndidate or authorize				
R. Russ Walker	[Electro	nically Filed] Date	e 06 /	20	/ Y Y Y Y 2014
Signature				<u> </u>	

116	MIZED INDEPENDENT EXPENDI	URES				PAGE 176 OF 207 FOR LINE 24 OF FORM 3X
	ME OF COMMITTEE (In Full)				FEC I	DENTIFICATION NUMBER V
F	REEDOMWORKS FOR AME	RICA			С	C00499020
Ch	eck if 24-hour report 48-hour rep	port New repo	ort Amends repo	ort filed or		
	Full Name of Payee French Fryz			C	Date of Publi	ic Distribution/Dissemination
	-				05	/ D D / Y Y Y Y 03 2014
	Mailing Address 2109 Hendrsonville Rd.			A	Amount	
	City	State	Zip Code			86.03
	Skyland	NC	28776			D : SE.26996 ursement or Obligation
	Purpose of Expenditure IE-Brannon-Food/Beverage		Category/ Type 002		05	/ 03 / 2014
	Name of Federal Candidate		Support	Office S	ought:	House District: 00
	GREGORY JOSEPH BRANNON		Oppose	Pi	resident	Senate State: <u>NC</u>
	Calendar Year-To-Date		142950.58	Disburse	ement For:	Primary General
	Per Election for Office Sought		142950.56	2014	Other (sp	pecify) ►
	Full Name of Payee Chris Gallaher				Date of Publ	ic Distribution/Dissemination
					05	/ D D / Y Y Y Y 01 2014
	Mailing Address 118 Butleight Ct.			A	Amount	
	City	State	Zip Code	— I		5000.00
	Goodlettsville	TN	87072			D : SE.26897 oursement or Obligation
	Purpose of Expenditure		Category/		M M	/ D D / Y Y Y Y
	IE-Bevin-Strategic Consulting		Type 001		05	01 2014
	Name of Federal Candidate		X Support	Office S	ought:	House District: 00
	MATTHEW GRISWOLD BEVIN		Oppose	P	resident	Senate State: <u>KY</u>
	Calendar Year-To-Date Per Election for Office Sought		270544.78	Disburse 2014	ement For:	X Primary General
		/J)/J)/J).			Other (s	pecify) ►
	(a) SUBTOTAL of Itemized Independent Ex	rpenditures		Γ		5086.03
		,p =			-7-	
	(b) SUBTOTAL of Unitemized Independent	Expenditures		• •		
	(c) TOTAL Independent Expenditures					
				•	-7	
	Under penalty of perjury I certify that the ir with, or at the request or suggestion of, any party committee) any political party committe	y candidate or authorized				
	R. Russ Walker	[Electron	ically Filed] Date	06	/ D D 20	/ Y Y Y Y 2014
	Signature				-	

116	MIZED INDEPENDENT EXPENDITORES			PAGE 17	7 OF 207 24 OF FORM 3X
NA	ME OF COMMITTEE (In Full)				
F	REEDOMWORKS FOR AMERICA			C C00499020	
				0 000433020	
Ch	eck if 24-hour report 48-hour report New re	eport Amends repo		/ D = D /	Y = Y = Y = Y
	Full Name of Payee		Date	of Public Distribution	n/Dissemination
	Google, Inc.		n.	04 / D D /	2014 Y
	Mailing Address Department No. 33564		Amou	Int	
	P.O. Box 39000		_		1700 70
	City State San Francisco CA	Zip Code 94139	Tranca	ction ID : SE.26929	1703.70
		94139		of Disbursement or	
	Purpose of Expenditure IE-Joyce-Online Ads	Category/ Type 004		05 / 01	2014
	Name of Federal Candidate	Support	Office Sough	nt: 🗙 House	District: 14
	DAVID P JOYCE	X Oppose	Presid	ent Senate	State: OH
	Calendar Year-To-Date	74824.62	Disbursemer	nt For: 🗙 Primar	y General
	Per Election for Office Sought	74024.02		Other (specify) ►	
	Full Name of Payee		Date	of Public Distributio	n/Dissemination
	Google, Inc.			05 / D D	2014 Y
	Mailing Address Department No. 33564		Amou	unt	
	P.O. Box 39000				
	City State	Zip Code	Transa	action ID : SE.26930	3407.41
	San Francisco CA	94139		of Disbursement or	
	Purpose of Expenditure IE-Lynch-Online Ads	Category/ Type 004		05 / 01	/ Y Y Y Y 2014
	Name of Federal Candidate	Support	Office Sough	nt: 🗙 House	District: 14
	MATT LYNCH	Oppose	Presid	lent Senate	State: OH
	Calendar Year-To-Date	70000.00	Disbursemer	nt For: 🗙 Prima	ry General
	Per Election for Office Sought	78232.03	2014	Other (specify) ►	
	(a) SUBTOTAL of Itemized Independent Expenditures		•	· · · · · ·	5111.11
	(b) SUBTOTAL of Unitemized Independent Expenditures		•		
	(c) TOTAL Independent Expenditures				
,	Under penalty of perjury I certify that the independent expenditure with, or at the request or suggestion of, any candidate or authorize party committee) any political party committee or its agent.				
	R. Russ Walker [Electro	onically Filed] Date	M M /		14
	Signature				

ITEMIZED INDEPENDENT EXPENDITURES		PAGE 178 OF 207 FOR LINE 24 OF FORM 3X
		FEC IDENTIFICATION NUMBER V
FREEDOMWORKS FOR AMERICA		C C00499020
Check if 24-hour report 48-hour report New report	Amends report filed on	
Full Name of Payee	Da	te of Public Distribution/Dissemination
Google, Inc.		05 07 Y Y Y Y 05 07 2014
Mailing Address Department No. 33564		
P.O. Box 39000	An	nount
City State Zi	p Code	5412.64
San Francisco CA 94		te of Disbursement or Obligation
Purpose of Expenditure IE-Sasse-Online Ads	Category/ Type 004	M = M / D = D / Y = Y = Y 05 / 07 / 2014
Name of Federal Candidate	X Support Office Sou	ught: House District: 00
BENJAMIN E SASSE		sident X Senate State: NE
Calendar Year-To-Date	65819.50 Disbursen 2014	nent For: X Primary General
Per Election for Office Sought	2014	Other (specify) ►
Full Name of Payee Google, Inc.	Da	te of Public Distribution/Dissemination
		M M / D D / Y Y Y Y 05 08 2014
Mailing Address Department No. 33564	Δn	nount
P.O. Box 39000		iount
	p Code	2499.90
		nsaction ID : SE.27136 tte of Disbursement or Obligation
Purpose of Expenditure IE-McDaniel-Online Ads	Category/ Type 004	05 / 08 / 2014
Name of Federal Candidate	Support Office So	ught: House District: 00
CHRISTOPHER BRIAN MCDANIEL	Oppose Pre	sident X Senate State: MS
Calendar Year-To-Date	217369.36 Disbursen 2014	nent For: X Primary General
Per Election for Office Sought		Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	····· •	7912.54
(b) SUBTOTAL of Unitemized Independent Expenditures		· · · · · · · · · · · ·
(c) TOTAL Independent Expenditures		
Under penalty of perjury I certify that the independent expenditures re with, or at the request or suggestion of, any candidate or authorized co party committee) any political party committee or its agent.		
R. Russ Walker [Electronica	lly Filed]	/ D D / Y Y Y Y Y Y Y Y Y Z0 / 2014
Signature	Date 06	

TEMIZED INDEPENDENT EXPENDITURE	.S				PAGE 179 OF 207 FOR LINE 24 OF FORM 3X
				FEC I	DENTIFICATION NUMBER V
FREEDOMWORKS FOR AMERICA	ſ			С	C00499020
Check if 24-hour report 48-hour report	New re	port Amends repo		M	/ D D / Y Y Y Y Y
Full Name of Payee			Date	of Publ	ic Distribution/Dissemination
Google, Inc.			1	^M 05	/ D D / Y Y Y Y 08 2014
Mailing Address Department No. 33564				_	
P.O. Box 39000			Amo	um	
City	State	Zip Code			2499.90
San Francisco	CA	94139			D: SE.27137 pursement or Obligation
Purpose of Expenditure IE-Cochran-Online Ads		Category/ Type 004		^M 05	/ D D / Y Y Y Y 08 / 2014
Name of Federal Candidate		Support	Office Soug	ht:	House District: 00
THAD COCHRAN		X Oppose	Presio	L	Senate State: MS
Calendar Year-To-Date Per Election for Office Sought		219869.26	Disburseme		Primary General
Full Name of Payee				-	lic Distribution/Dissemination
Google, Inc.			Date	M M	/ D D / Y Y Y
Mailing Address			I	05	08 2014
P.O. Box 39000			Amo	unt	
City	State	Zip Code			6105.10
San Francisco	CA	94139			D: SE.27142 bursement or Obligation
Purpose of Expenditure IE-McDaniel-Online Ads		Category/ Type 004		05	/ D D / Y Y Y Y 08 / 2014
Name of Federal Candidate		Support	Office Souc	ht:	House District: 00
CHRISTOPHER BRIAN MCDANIEL		Oppose	Presi		X Senate State: MS
Calendar Year-To-Date Per Election for Office Sought		241974.36	Disburseme 2014		Primary General
(a) SUBTOTAL of Itemized Independent Expendit	ures				8605.00
(b) SUBTOTAL of Uniternized Independent Expen	ditures		• •	-	
(c) TOTAL Independent Expenditures			••	-7	
Under penalty of perjury I certify that the indeper with, or at the request or suggestion of, any cand party committee) any political party committee or i	idate or authorize				
R. Russ Walker	[Electro	nically Filed] Date	- 06 /	20	2014
Signature					

116	MIZED INDEPENDENT EXPENDITORES				PAGE 180 OF 207 FOR LINE 24 OF FORM 3X	
	ME OF COMMITTEE (In Full)			FEC II	DENTIFICATION NUMBER V	
F	REEDOMWORKS FOR AMERICA			С	C00499020	
Ch	eck if 24-hour report 48-hour report New re	eport Amends repo	ort filed on	M = M		
	Full Name of Payee		Da	te of Publi	c Distribution/Dissemination	
	Google, Inc.			^M 05	/ D D / Y Y Y Y 08 2014	
	Mailing Address Department No. 33564		An	nount		
	P.O. Box 39000		- I -			
	City State	Zip Code			6105.10	
	San Francisco CA	94139			D : SE.27143 ursement or Obligation	
	Purpose of Expenditure IE-Cochran-Online Ads	Category/ Type 004		05	/ D D / Y Y Y Y 08 / 2014	
	Name of Federal Candidate	Support	Office So	ught:	House District: 00	
	THAD COCHRAN	X Oppose			Senate State: MS	
	Calendar Year-To-Date	248079.46	Disburser	nent For:	Primary General	
	Per Election for Office Sought	240079.40	2014	Other (s	pecify) ►	
	Full Name of Payee Google, Inc.		Da	ate of Publ	ic Distribution/Dissemination	
				05 ^M	/ D D / Y Y Y Y 09 2014	
	Mailing Address Department No. 33564		Ar	nount		
	P.O. Box 39000		r		0000.00	
	City State San Francisco CA	Zip Code 94139	Tra	nsaction I	8000.00 D : SE.27166	
	Purpose of Expenditure		Da		ursement or Obligation	
	IE-Birman-Online Ads	Category/ Type 004		05	/ 09 / 2014	
	Name of Federal Candidate	X Support	Office So	ught:	House District: 07	
	IGOR A BIRMAN	Oppose	Pre	sident	Senate State: CA	
	Calendar Year-To-Date	28299.87	Disburser 2014	ment For:	Primary General	
	Per Election for Office Sought	20200.01		Other (s	pecify) ►	
	(a) SUBTOTAL of Itemized Independent Expenditures				14105.10	
	(b) SUBTOTAL of Unitemized Independent Expenditures		··· ▶			
	(c) TOTAL Independent Expenditures					
١	Under penalty of perjury I certify that the independent expenditure with, or at the request or suggestion of, any candidate or authorize party committee) any political party committee or its agent.					
	R. Russ Walker [Electro	onically Filed] Date	e 06	/ 20	2014	
	Signature					
TEMIZED INDEPENDENT EXPENDITUR	ES				PAGE 181 FOR LINE 2	OF 207 24 OF FORM 3X
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	٨			FEC	IDENTIFICATI	ON NUMBER V
FREEDOMWORKS FOR AMERIC	A			С	C00499020	
Check if 24-hour report 48-hour report	New r	eport Amends rep		M	/ D D /	Y = Y = Y = Y
Full Name of Payee			Date	of Pub	lic Distribution	/Dissemination
Google, Inc.			- I I	05	/ D D / 09	2014
Mailing Address Department No. 33564				_		
P.O. Box 39000			Amou	unt		
City	State	Zip Code				8000.00
San Francisco	CA	94139			D:SE.27171	Obligation
Purpose of Expenditure IE-Loudermilk-Online Ads		Category/ Type 004		05 ^M		2014
Name of Federal Candidate		Support	Office Soug	ht:	X House	District: 11
BARRY LOUDERMILK		Oppose	Presic		Senate	State: GA
Calendar Year-To-Date		40200.04	Disburseme	nt For:	Rrimary	y General
Per Election for Office Sought		10300.94	2014	Other (s	specify) 🕨	
Full Name of Payee			Date	of Pub	lic Distributior	n/Dissemination
Google, Inc.			- I I	^M 05	/ D D / 10	2014
Mailing Address Department No. 33564						2011
P.O. Box 39000			Amo	unt		
City	State	Zip Code				900.00
San Francisco	CA	94139			ID : SE.27203 oursement or	
Purpose of Expenditure		Category/		M M	/ D D /	Y Y Y Y
IE-Dinsdale-Online Ads		Type 004	L	05	10	2014
Name of Federal Candidate		Support	Office Soug	ht:	House	District: 00
SID DINSDALE		X Oppose	Presid	dent	X Senate	State: <u>NE</u>
Calendar Year-To-Date			Disburseme	nt For:	X Primar	y General
Per Election for Office Sought		73992.90	2014	Other (s	specify) 🕨	
(a) SUBTOTAL of Itemized Independent Expendent	litures					8900.00
				-7	-7-	
(b) SUBTOTAL of Unitemized Independent Expe	enditures		• •			
(c) TOTAL Independent Expenditures			••••	7	7-	
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any can party committee) any political party committee or	didate or authoriz					
R. Russ Walker	[E]	onically Filed	M /			Y Y
Signature	[Electr	onically Filed] Date	e 06	20	202	14
5						

ITEMIZED INDEPENDENT EXPEN	DITURES				FOR LINE 2	OF 207 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC I		ON NUMBER 🔻
FREEDOMWORKS FOR AM	ERICA			С	C00499020	
Check if 24-hour report 48-hour	report New re	eport Amends repo		M	/ D D /	YYYYY
Full Name of Payee			Date	of Publ	lic Distribution	/Dissemination
Google, Inc.				05	/ 13 /	Y Y Y Y 2014
Mailing Address Department No. 33564	1		Amou	unt		
P.O. Box 39000			Amot	<i></i>		
City	State	Zip Code		7	nn	87.83
San Francisco	CA	94139			D: SE.35452 oursement or (Obligation
Purpose of Expenditure IE-Dinsdale-Online Ads		Category/ Type 004		^M 05	/ D D / 13	Y Y Y Y 2014
Name of Federal Candidate		Support	Office Sougl	ht:	House	District: 00
SID DINSDALE		X Oppose	Presid	L	X Senate	State: NE
Calendar Year-To-Date			Disburseme	L	Rimary	/ General
Per Election for Office Sought		74595.42	2014	Other (s	specify) 🕨	
Full Name of Payee			Date	of Publ	lic Distribution	/Dissemination
Google, Inc.			- I F	05	/ D D / 16	2014
Mailing Address Department No. 33564	ļ.					
P.O. Box 39000			Amo	unt		
City	State	Zip Code			, , , ,	10500.00
San Francisco	CA	94139			D: SE.27243	Obligation
Purpose of Expenditure IE-Mathis-Online Ads		Category/ 004		05	/ D D /	YYYYY
		Type 004		05	10	2014
Name of Federal Candidate		X Support	Office Soug	ht:	X House	District: 06
CHAD DR MATHIS		Oppose	Presid	lent	Senate	State: <u>AL</u>
Calendar Year-To-Date		20022.13	Disburseme 2014	nt For:	X Primary	y General
Per Election for Office Sought		20022.13		Other (s	specify) 🕨	
			_			
(a) SUBTOTAL of Itemized Independent	Expenditures		·· •	-7		10587.83
			_			
(b) SUBTOTAL of Unitemized Independent	ent Expenditures		••	-7		
(c) TOTAL Independent Expenditures						
				7		
Under penalty of perjury I certify that th with, or at the request or suggestion of, party committee) any political party comm	any candidate or authoriz					
R. Russ Walker	(177) ·	onigally Filedi	M /			YY
Signature	[Electro	Date	9 06	20	201	14
-						

ITEMIZED INDEPENDENT EXPENDITURES		PAGE 183 OF 207 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
FREEDOMWORKS FOR AMERICA		C C00499020
Check if 24-hour report 48-hour report New repo	rt Amends report f	led on
Full Name of Payee Google, Inc.		Date of Public Distribution/Dissemination
		05 / D D / Y Y Y Y 16 2014
Mailing Address Department No. 33564		Amount
P.O. Box 39000		
	Zip Code	8000.00
San Francisco CA	94139	Transaction ID : SE.27256 Date of Disbursement or Obligation
Purpose of Expenditure IE-Schultz-Online Ads	Category/ Type 004	M + M / D + D / Y + Y + Y + Y 05 16 2014
Name of Federal Candidate	X Support O	ffice Sought: X House District: 03
MATTHEW DAVID SCHULTZ	Oppose	President Senate State: IA
Calendar Year-To-Date		sbursement For: X Primary General
Per Election for Office Sought	10517.80 20	Other (specify)
Full Name of Payee		Date of Public Distribution/Dissemination
Google, Inc.		05 / D D / Y Y Y Y 05 29 2014
Mailing Address Department No. 33564		
P.O. Box 39000		Amount
	Zip Code	9449.50
San Francisco CA	94139	Transaction ID : SE.35521 Date of Disbursement or Obligation
Purpose of Expenditure IE-McDaniel-Online Ads	Category/ Type 004	05 / Y Y Y Y Y 05 29 2014
Name of Federal Candidate	X Support O	ffice Sought: House District: 00
CHRISTOPHER BRIAN MCDANIEL	Oppose	President X Senate State: MS
Calendar Year-To-Date		isbursement For: X Primary General
Per Election for Office Sought		Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures		17449.50
(-,	•	7 7 7
(b) SUBTOTAL of Unitemized Independent Expenditures	••••••	
(c) TOTAL Independent Expenditures	•	
Under penalty of perjury I certify that the independent expenditures with, or at the request or suggestion of, any candidate or authorized party committee) any political party committee or its agent.		
R. Russ Walker	cally Filed]	
Signature	Date	06 20 2014

ITEMIZED INDEPENDENT EXPENDITUR	RES				PAGE 184 OF 207 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FFC I	DENTIFICATION NUMBER V
FREEDOMWORKS FOR AMERIC	A			С	C00499020
					00499020
Check if24-hour report48-hour report	New re	eport Amends repo		/I = M	/ D = D / Y = Y = Y = Y
Full Name of Payee			Date	of Publ	ic Distribution/Dissemination
Google, Inc.			- E	05	/ D D / Y Y Y Y 29 2014
Mailing Address Department No. 33564			Amo	unt	
P.O. Box 39000					
City	State	Zip Code			9449.50
San Francisco	CA	94139			D: SE.35522 ursement or Obligation
Purpose of Expenditure IE-Cochran-Online Ads		Category/ Type 004		05 ^M	/ D D / Y Y Y Y 29 / 2014
Name of Federal Candidate		Support	Office Soug	nt:	House District: 00
THAD COCHRAN		X Oppose	Presic	ent	Senate State: <u>MS</u>
Calendar Year-To-Date		294225-21	Disburseme	nt For:	Primary General
Per Election for Office Sought		284335.21		Other (s	pecify) ►
Full Name of Payee			Date	of Publ	ic Distribution/Dissemination
Google, Inc.				05	/ D D / Y Y Y Y 29 2014
Mailing Address Department No. 33564			Amo	Int	
P.O. Box 39000					
City	State	Zip Code		;	6425.50
San Francisco	CA	94139			D : SE.35527 pursement or Obligation
Purpose of Expenditure IE-McDaniel-Online Ads		Category/ Type 004		05	/ D D / Y Y Y Y 29 / 2014
Name of Federal Candidate		X Support	Office Soug	ht:	House District: 00
CHRISTOPHER BRIAN MCDANIEL		Oppose	Presid	lent [Senate State: <u>MS</u>
Calendar Year-To-Date Per Election for Office Sought		305760.71	Disburseme 2014		Primary General
				Other (s	pecify) ►
(a) SUBTOTAL of Itemized Independent Expen	ditures				15875.00
				-7-	
(b) SUBTOTAL of Unitemized Independent Exp	enditures		• •		
				-7	
(c) TOTAL Independent Expenditures			·· •		
Under penalty of perjury I certify that the indep with, or at the request or suggestion of, any ca party committee) any political party committee of	ndidate or authorize				
R. Russ Walker					
	[Electro	Date [Date]	e 06 /	20	2014
Signature				_	

116	MIZED INDEPENDENT EXPENDIT	JRES				FOR LINE 2	OF 207 24 OF FORM 3X
	ME OF COMMITTEE (In Full)				FEC		ON NUMBER V
F	REEDOMWORKS FOR AMERI	CA			С	C00499020	
Ch	eck if 24-hour report 48-hour repo	ort New rep	oort Amends repo	ort filed on	M = M	/ D D /	Y Y Y Y Y
	Full Name of Payee			Dat	e of Pub	lic Distribution	Dissemination
	Google, Inc.				^M 05	/ D_D / 29	2014 Y
	Mailing Address Department No. 33564			Am	ount		
	P.O. Box 39000	Charles	Zin Oada				6425 50
	City San Francisco	State CA	Zip Code 94139	Tran	saction	ID : SE.35528	6425.50
						oursement or (Obligation
	Purpose of Expenditure IE-Cochran-Online Ads		Category/ Type 004		05 ^M	/ D_D / 29	2014
	Name of Federal Candidate		Support	Office Sou	ght:	House	District: 00
	THAD COCHRAN		X Oppose	Pres	ident	X Senate	State: MS
	Calendar Year-To-Date		312186.21	Disbursem 2014	ent For:	X Primary	General
	Per Election for Office Sought		312180.21	2014	Other (s	specify) 🕨	
	Full Name of Payee			Dat	e of Pub	lic Distribution	/Dissemination
	Google, Inc.				05 ^M	/ D D / 29	2014
	Mailing Address Department No. 33564			A.m.	aunt		
	P.O. Box 39000			Am	ount		
	City	State	Zip Code			, , ,	6500.00
	San Francisco	CA	94139			ID:SE.35540	Obligation
	Purpose of Expenditure IE-Mathis-Online Ads		Category/ 004		M M	/ D D / 29	YYYYY
			Type 004		05	29	2014
	Name of Federal Candidate		X Support	Office Sou	ight:	X House	District: 06
	CHAD DR MATHIS		Oppose	Pres	sident	Senate	State: AL
	Calendar Year-To-Date		00000 40	Disbursem	ent For:	X Primary	/ General
	Per Election for Office Sought		30383.43	2014	Other (s	specify) 🕨	
	(a) SUBTOTAL of Itemized Independent Expe	enditures					12925.50
	(b) SUBTOTAL of Unitemized Independent E	xpenditures		•• •			
	(c) TOTAL Independent Expenditures						
					-7	7-	
,	Under penalty of perjury I certify that the ind with, or at the request or suggestion of, any o party committee) any political party committee	candidate or authorized	•				
	R. Russ Walker	[Electron	ically Filed] Date		/ 20	D / Y Y 201	4 Y
	Signature						

116	MIZED INDEPENDENT EXPENDITORES				PAGE 186 OF 207 FOR LINE 24 OF FORM 3X
	ME OF COMMITTEE (In Full)			FEC I	DENTIFICATION NUMBER V
F	REEDOMWORKS FOR AMERICA			С	C00499020
Ch	eck if 24-hour report 48-hour report New rep	ort Amends repo		M = M	
	Full Name of Payee		Date	of Publ	ic Distribution/Dissemination
	Google, Inc.			05	/ D D / Y Y Y Y 31 2014
	Mailing Address Department No. 33564		Amo	unt	
	P.O. Box 39000				
	City State San Francisco CA	Zip Code	Trance	j Sotion II	1000.00
		94139			D: SE.32541 ursement or Obligation
	Purpose of Expenditure IE-McDaniel-Online Ads	Category/ Type 004		05	/ D D / Y Y Y Y Y 31 2014
	Name of Federal Candidate	Support	Office Soug	ht:	House District: 00
	CHRISTOPHER BRIAN MCDANIEL	Oppose	Presid	lent	Senate State: <u>MS</u>
	Calendar Year-To-Date	227070 20	Disburseme	nt For:	Primary General
	Per Election for Office Sought	327078.28		Other (s	pecify) ►
	Full Name of Payee Google, Inc.		Date	of Publ	lic Distribution/Dissemination
				05	/ D D / Y Y Y Y 31 2014
	Mailing Address Department No. 33564		Amo	unt	
	P.O. Box 39000				(000.00)
	City State San Francisco CA	Zip Code 94139			1000.00 D : SE.32542
	Purpose of Expenditure	Cotogon/		of Disb	oursement or Obligation
	IE-Cochran-Online Ads	Category/ Type 004		05	31 2014
	Name of Federal Candidate	Support	Office Soug	ht: [House District: 00
	THAD COCHRAN	X Oppose	Presid	lent	X Senate State: MS
	Calendar Year-To-Date Per Election for Office Sought	328078.28	Disburseme 2014	nt For:	Primary General
				Other (s	pecify) ►
	(-) CURTOTAL of Invisional Independent Fundation				2000.00
	(a) SUBTOTAL of Itemized Independent Expenditures			-7	2000.00
	(b) SUBTOTAL of Unitemized Independent Expenditures		• •		
				-7	
	(c) TOTAL Independent Expenditures		•		
,	Under penalty of perjury I certify that the independent expenditures with, or at the request or suggestion of, any candidate or authorized party committee) any political party committee or its agent.				
	R. Russ Walker [Electron	ically Filed] Date	M M /	20	2014
	Signature			<u> </u>	

ITEMIZED INDEPENDENT EXPENDITURES		PAGE 187 OF 207 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER
FREEDOMWORKS FOR AMERICA		C C00499020
Check if 24-hour report 48-hour report New report	ort Amends report	filed on
Full Name of Payee Gorden Bierch-NC		Date of Public Distribution/Dissemination
		05 / D D / Y Y Y Y 05 02 2014
Mailing Address		Amount
City State	Zip Code	51.28
		Transaction ID : SE.26964
Purpose of Expenditure	Category/	Date of Disbursement or Obligation
IE-Brannon-Food/Beverage	Type 002	05 02 2014
Name of Federal Candidate	Support	Office Sought: House District: 00
GREGORY JOSEPH BRANNON	Oppose	President X Senate State: NC
Calendar Year-To-Date		Disbursement For: X Primary General
Per Election for Office Sought	139152.42	Other (specify)
Full Name of Payee Hampton Inn & Suites-NC		Date of Public Distribution/Dissemination
		05 / D D / Y Y Y Y 02 2014
Mailing Address 2731 Little Rock Rd.		Amount
City State Charlotte NC	Zip Code 28214	1097.16 Transaction ID : SE.26962
Purpose of Expenditure		Date of Disbursement or Obligation
IE-Brannn-Travel	Category/ Type 002	05 / 02 / <u>2014</u>
Name of Federal Candidate	X Support	Office Sought: House District: 00
GREGORY JOSEPH BRANNON	Oppose	President X Senate State: NC
Calendar Year-To-Date	139101.14	Disbursement For: X Primary General
Per Election for Office Sought	139101.14	Other (specify) ►
(a) SUBTOTAL of Itemized Independent Expenditures		► <u>1148.44</u>
(b) SUBTOTAL of Uniternized Independent Expenditures		
(c) TOTAL Independent Expenditures		•
Under penalty of perjury I certify that the independent expenditures with, or at the request or suggestion of, any candidate or authorized party committee) any political party committee or its agent.		
R. Russ Walker		
[Electron	<i>ically Filed]</i> Date	06 20 2014
Signature		

116	EMIZED INDEPENDENT EXPENDITORES		PAGE 188 OF 207 FOR LINE 24 OF FORM 3X
	ME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER V
Г	REEDOMINORRS FOR AMERICA		C C00499020
Ch	eck if 24-hour report 48-hour report New rep	port Amends repo	rt filed on
	Full Name of Payee		Date of Public Distribution/Dissemination
	Hampton Inn & Suites-NC		05 / D D / Y Y Y Y
	Mailing Address 2731 Little Rock Rd.		Amount
	City State	Zip Code	161.97
	Charlotte NC	28214	Transaction ID : SE.27061 Date of Disbursement or Obligation
	Purpose of Expenditure IE-Brannon-Travel	Category/ Type 002	05 / D / Y Y Y Y 2014
	Name of Federal Candidate	Support	Office Sought: House District: 00
	GREGORY JOSEPH BRANNON	Oppose	President X Senate State: NC
	Calendar Year-To-Date Per Election for Office Sought	144078.96	Disbursement For: X Primary General 2014 Other (specify) ▶
	Full Name of Payee		Date of Public Distribution/Dissemination
	Hampton Inn & Suites-NC		05 / D D / Y Y Y Y 05 06 2014
	Mailing Address 2731 Little Rock Rd.		Amount
	City State	Zip Code	6.04
	Charlotte NC	28214	Transaction ID : SE.35442 Date of Disbursement or Obligation
	Purpose of Expenditure IE-Brannon-Travel	Category/ Type 002	
	Name of Federal Candidate	Support	Office Sought: House District: 00
	GREGORY JOSEPH BRANNON	Oppose	President X Senate State: NC
	Calendar Year-To-Date Per Election for Office Sought	148761.31	Disbursement For: X Primary General 2014 Other (specify) ►
	(a) SUBTOTAL of Itemized Independent Expenditures		. • 168.01
	(b) SUBTOTAL of Unitemized Independent Expenditures		•
	(c) TOTAL Independent Expenditures		
	Under penalty of perjury I certify that the independent expenditures with, or at the request or suggestion of, any candidate or authorize party committee) any political party committee or its agent.		
	R. Russ Walker [Electron	nically Filed] Date	06 20 <u>2014</u>
	Signature		

ITEMIZED INDEPENDENT EXPENDITURES		PAGE 189 OF 207 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER
FREEDOMWORKS FOR AMERICA		C C00499020
Check if 24-hour report 48-hour report New report	ort Amends repor	filed on
Full Name of Payee Harris Teeter		Date of Public Distribution/Dissemination
		05 / D D / Y Y Y Y 05 / 03 / 2014
Mailing Address 7852 Rea Rd.		Amount
City State	Zip Code	40.26
Charlotte NC	82877	Transaction ID : SE.26990 Date of Disbursement or Obligation
Purpose of Expenditure IE-Brannon-Food/Beverage	Category/ Type 002	
Name of Federal Candidate	Support	Office Sought: House District: 00
GREGORY JOSEPH BRANNON	Oppose	President X Senate State: <u>NC</u>
Calendar Year-To-Date		Disbursement For: X Primary General
Per Election for Office Sought	142342.09	Other (specify)
Full Name of Payee Hotels.com		Date of Public Distribution/Dissemination
		05 05 2014
Mailing Address 5400 LBJ Freeway		Amount
Ste. 500		
City State Dallas TX	Zip Code 75240	161.97 Transaction ID : SE.27058
Purpose of Expenditure	Category/	Date of Disbursement or Obligation
IE-Brannon-Travel	Type 002	05 05 2014
Name of Federal Candidate	X Support	Office Sought: House District: 00
GREGORY JOSEPH BRANNON	Oppose	President X Senate State: NC
Calendar Year-To-Date	143584.02	Disbursement For: X Primary General
Per Election for Office Sought		Other (specify) ►
(a) SUBTOTAL of Itemized Independent Expenditures		► <u>202.23</u>
(b) SUBTOTAL of Unitemized Independent Expenditures		
(c) TOTAL Independent Expenditures		
Under penalty of perjury I certify that the independent expenditures with, or at the request or suggestion of, any candidate or authorized party committee) any political party committee or its agent.		
R. Russ Walker	iaglly Filed	M M / D D / Y Y Y Y
Signature	<i>ically Filed]</i> Date	06 20 2014

ITEMIZED INDEPENDENT EXPENDITURES		PAGE 190 OF 207 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
FREEDOMWORKS FOR AMERICA		C C00499020
Check if 24-hour report 48-hour report New report	ort Amends repor	t filed on
Full Name of Payee Hotels.com		Date of Public Distribution/Dissemination
		05 / D D / Y Y Y Y 05 2014
Mailing Address 5400 LBJ Freeway		Amount
Ste. 500		
-	Zip Code	161.97
	75240	Transaction ID : SE.27060 Date of Disbursement or Obligation
Purpose of Expenditure IE-Brannon-Travel	Category/ Type 005	M 05 / D D / Y Y Y Y 2014
Name of Federal Candidate	X Support	Office Sought: House District: 00
GREGORY JOSEPH BRANNON	Oppose	President X Senate State: <u>NC</u>
Calendar Year-To-Date	143916.99	Disbursement For: X Primary General
Per Election for Office Sought	143910.39	Other (specify) ►
Full Name of Payee Kangaroo Express-NC		Date of Public Distribution/Dissemination
		05 05 2014
Mailing Address 935 Charlottetown		Amount
City State	Zip Code	62.76
Charlotte NC	Zip Gode	Transaction ID : SE.27076
Purpose of Expenditure	Category/	Date of Disbursement or Obligation
IE-Brannon-Travel	Type 002	05 05 2014
Name of Federal Candidate	X Support	Office Sought: House District: 00
GREGORY JOSEPH BRANNON	Oppose	President X Senate State: NC
Calendar Year-To-Date	144238.84	Disbursement For: Primary General
Per Election for Office Sought	144230.04	Other (specify) ►
(a) SUBTOTAL of Itemized Independent Expenditures		• 224.73
(b) SUBTOTAL of Unitemized Independent Expenditures		
(c) TOTAL Independent Expenditures		•
Under penalty of perjury I certify that the independent expenditures with, or at the request or suggestion of, any candidate or authorized party committee) any political party committee or its agent.		
R. Russ Walker		
[Electroni	cally Filed] Date	06 / ^D 20 / ^Y Y Y Y Y Y Y
Signature		

ITEMIZED INDEPENDENT EXPENI	DITURES				PAGE 191 OF 207 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC I	DENTIFICATION NUMBER ▼
FREEDOMWORKS FOR AM	ERICA			С	C00499020
				- M	
Check if 24-hour report 48-hour	report New rep	oort Amends repo			
Full Name of Payee Robert Malt			Date	of Publ	lic Distribution/Dissemination
				05	05 2014
Mailing Address 2161 Hendersonville R	d.		Amou	int	
City	State	Zip Code			70.81
Arden	NC	28704			D: SE.27090 pursement or Obligation
Purpose of Expenditure IE-Brannon-Travel		Category/ Type 002		05	/ 05 / Y Y Y Y 2014
Name of Federal Candidate		Support	Office Sough	nt:	House District: 00
GREGORY JOSEPH BRANNON		Oppose	Presid	L	Senate State: <u>NC</u>
Calendar Year-To-Date		146287.44	Disbursemer 2014	nt For:	Primary General
Per Election for Office Sought		140287.44		Other (s	specify) ►
Full Name of Payee Maria-s Mexican					lic Distribution/Dissemination
				05	05 2014
Mailing Address 5234 South Blvd			Amou	unt	
City	State	Zip Code			96.29
Charlotte	NC	28217			D : SE.27088
Purpose of Expenditure		Category/		M M	oursement or Obligation
IE-Brannon-Travel		Type 002	L	05	05 2014
Name of Federal Candidate		X Support	Office Soug	nt:	House District: 00
GREGORY JOSEPH BRANNON		Oppose	Presid	ent	Senate State: <u>NC</u>
Calendar Year-To-Date		146216.63	Disbursemer 2014	nt For:	Primary General
Per Election for Office Sought				Other (s	specify) ►
(a) SUBTOTAL of Itomized Independent	Funandituraa				407.40
(a) SUBTOTAL of Itemized Independent	Expenditures			-7	167.10
(b) SUBTOTAL of Unitemized Independe	ent Expenditures				
				-7	
(c) TOTAL Independent Expenditures			"▶	-7	
Under penalty of perjury I certify that the with, or at the request or suggestion of, party committee) any political party comm	any candidate or authorize				
R. Russ Walker	[T] active	nigally Filed	M_M /		
Signature		<i>nically Filed]</i> Date	9 06	20	2014

TEMIZED INDEPENDENT EXPENDITURES					PAGE 192 OF 207 FOR LINE 24 OF FORM 3X
				FEC I	DENTIFICATION NUMBER V
FREEDOMWORKS FOR AMERICA				С	C00499020
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M	
Full Name of Payee			Da	te of Publ	ic Distribution/Dissemination
Mungo, LLC				05	/ D D / Y Y Y Y 06 2014
Mailing Address 625 Clay St E			An	nount	
City S	State	Zip Code			1950.00
Monmouth	OR	97361			D: SE.27115 ursement or Obligation
Purpose of Expenditure IE-Smith-Yard Signs		Category/ Type 004		05	/ 06 / Y Y Y Y 2014
Name of Federal Candidate		Support	Office So	ught:	X House District:02
BRYAN SMITH		Oppose		sident	Senate State: ID
Calendar Year-To-Date Per Election for Office Sought		30496.94	Disbursen 2014	1	Primary General pecify) ▶
Full Name of Payee			Da	te of Publ	lic Distribution/Dissemination
Mungo, LLC				05	/ D D / Y Y Y Y 06 2014
Mailing Address 625 Clay St E			An	nount	
City	State	Zip Code	— Г		3252.00
·	OR	97361			D : SE.27129 pursement or Obligation
Purpose of Expenditure IE-McDaniel-Door Hangers/Bumper Stickers		Category/ Type 004		05	/ 06 / Y Y Y Y 2014
Name of Federal Candidate		Support	Office So	ught:	House District: 00
CHRISTOPHER BRIAN MCDANIEL		Oppose	Pre	sident	Senate State: MS
Calendar Year-To-Date Per Election for Office Sought		196508.28	Disburser 2014	Г	Primary General
(a) SUBTOTAL of Itemized Independent Expenditures(b) SUBTOTAL of Unitemized Independent Expenditure					5202.00
(c) TOTAL Independent Expenditures			•		
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candidate party committee) any political party committee or its age	or authorized				
R. Russ Walker	[Electron	ically Filed] Date	06	/ 20	/ Y Y Y Y Y 2014
Signature					

116	MIZED INDEPENDENT EXPENDITORES					FOR LINE	OF 207 24 OF FORM 3X
NA	ME OF COMMITTEE (In Full)				FEC II		ON NUMBER V
F	REEDOMWORKS FOR AMERICA					C00499020	
					C	00499020	
Ch	eck if 24-hour report 48-hour report	New repo	ort Amends repo		M M /		Y Y Y Y Y
	Full Name of Payee			Date	of Public	c Distribution	/Dissemination
	News Distribution Network			- E	05	/ D D / 05	2014
	Mailing Address 3280 Peachtree Rd. NE			Amou	unt		
	Suite 2000						
	-		Zip Code 30305	Trana	Jation IF) : SE.27053	6300.00
		A	30305			ursement or (Obligation
	Purpose of Expenditure IE-Sasse-Online Ads		Category/ Type 004		05	05	Y Y Y Y 2014
	Name of Federal Candidate		Support	Office Soug	nt:	House	District: 00
	BENJAMIN E SASSE		Oppose	Presic		K Senate	State: NE
	Calendar Year-To-Date		50656.86	Disbursemer 2014	nt For:	X Primary	/ General
	Per Election for Office Sought		30030.00		Other (sp	oecify) ►	
	Full Name of Payee News Distribution Network			Date	of Publi	c Distributior	/Dissemination
	News Distribution Network			- I I	^M 05	/ D D / 09	Y Y Y Y 2014
	Mailing Address 3280 Peachtree Rd. NE			A a			
	Suite 2000			Amo	unt		
	City Sta	ate	Zip Code				4645.00
	Atlanta G	6A	30305			D : SE.27222 ursement or	Obligation
	Purpose of Expenditure		Category/		M M	/ D D /	YYYYY
	IE-McDaniel-Online Ads		Type 004		05	09	2014
	Name of Federal Candidate		X Support	Office Soug	ht:	House	District: 00
	CHRISTOPHER BRIAN MCDANIEL		Oppose	Presid	lent	X Senate	State: <u>MS</u>
	Calendar Year-To-Date Per Election for Office Sought		252928.39	Disburseme 2014 —	nt For:	X Primar	y General
					Other (sp	pecify) ►	
	(a) SUBTOTAL of Itemized Independent Expenditures			•	-7-	-7-	10945.00
	(b) SUBTOTAL of Unitemized Independent Expenditures						
	(c) TOTAL Independent Expenditures						
					-7-	-7-	
	Under penalty of perjury I certify that the independent e with, or at the request or suggestion of, any candidate o party committee) any political party committee or its ager	r authorized					
	R. Russ Walker	Floctroni	cally Filed]		20		Y Y
	Signature	[Biccironi	Date	06	20	207	14

115	EMIZED INDEPENDENT EXPENDITURES		PAGE 194 OF 207 FOR LINE 24 OF FORM 3X
			FEC IDENTIFICATION NUMBER ▼
	REEDOMWORKS FOR AMERICA		C C00499020
Ch	neck if 24-hour report 48-hour report New r	report Amends repor	t filed on
	Full Name of Payee News Distribution Network		Date of Public Distribution/Dissemination
			05 / 09 / Y Y Y Y 05 09 2014
	Mailing Address 3280 Peachtree Rd. NE		Amount
	Suite 2000 City State	Zip Code	4645.00
	Atlanta GA	30305	Transaction ID : SE.27223
	Purpose of Expenditure		Date of Disbursement or Obligation
	IE-Cochran-Online Ads	Category/ Type 004	05 / 09 / 2014
	Name of Federal Candidate	Support	Office Sought: House District: 00
	THAD COCHRAN	X Oppose	President X Senate State: MS
	Calendar Year-To-Date Per Election for Office Sought	257573.39	Disbursement For: Primary General
	Full Name of Payee	,	Other (specify) ►
	Odd Lamps, LLC		M = M / D = D / Y = Y = Y
	Mailing Address 12076 92nd Ave N		05 01 2014
	12076 92nd Ave N		Amount
	City State	Zip Code	2500.00
	Maple Grove MN	55369	Transaction ID : SE.26922 Date of Disbursement or Obligation
	Purpose of Expenditure IE-Sasse-Onlined Ads	Category/ Type 004	05 / 01 / Y Y Y Y 01 2014
	Name of Federal Candidate	X Support	Office Sought: House District: 00
	BENJAMIN E SASSE	Oppose	President X Senate State: <u>NE</u>
	Calendar Year-To-Date	14409.06	Disbursement For: X Primary General
	Per Election for Office Sought	,	Other (specify) ►
	(a) SUBTOTAL of Itemized Independent Expenditures		7145.00
	(b) SUBTOTAL of Unitemized Independent Expenditures		
	(c) TOTAL Independent Expenditures		•
	Under penalty of perjury I certify that the independent expenditur with, or at the request or suggestion of, any candidate or authoriz party committee) any political party committee or its agent.		
	R. Russ Walker	ronically Filed]	06 20 2014
	Signature	Date	

116	MIZED INDEPENDENT EXPENDITURES			PAGE 195 OF 207 FOR LINE 24 OF FORM 3X
	ME OF COMMITTEE (In Full)		FEC ID	ENTIFICATION NUMBER V
F	REEDOMWORKS FOR AMERICA		C	200499020
Ch	eck if 24-hour report 48-hour report New re	port Amends repo	rt filed on	
	Full Name of Payee Odd Lamps, LLC		Date of Public	Distribution/Dissemination
	• •		05	08 / Y Y Y Y 08 2014
	Mailing Address 12076 92nd Ave N		Amount	
	City State	Zip Code		2500.00
	Maple Grove MN	55369	Transaction ID	: SE.27133 rsement or Obligation
	Purpose of Expenditure IE-McDaniel-Online Ads	Category/ Type 004	05	D D / Y Y Y Y 08 / 2014
	Name of Federal Candidate	Support	Office Sought:	House District: 00
	CHRISTOPHER BRIAN MCDANIEL	Oppose	President	Senate State: <u>MS</u>
	Calendar Year-To-Date	100960.46	Disbursement For: 2014	Primary General
	Per Election for Office Sought	199869.46	Other (sp	ecify) ►
	Full Name of Payee Odd Lamps, LLC			Distribution/Dissemination
			05	D D / Y Y Y Y 08 2014
	Mailing Address 12076 92nd Ave N		Amount	
	City State	Zip Code		1750.00
	Maple Grove MN	55369	Transaction ID	: SE.35426
	Purpose of Expenditure	Category/	Date of Disbu	rsement or Obligation
	IE-Mathis-Online Ads	Type 004	05	08 2014
	Name of Federal Candidate	Support	Office Sought:	K House District: 06
	CHAD DR MATHIS	Oppose	President	Senate State: <u>AL</u>
	Calendar Year-To-Date	1849.87	Disbursement For:	X Primary General
	Per Election for Office Sought	1043.07	Other (sp	ecify) ►
				10100.00
	(a) SUBTOTAL of Itemized Independent Expenditures		• •	4250.00
	(b) SUBTOTAL of Unitemized Independent Expenditures		•	
	(c) TOTAL Independent Expenditures			
				-7
	Under penalty of perjury I certify that the independent expenditure with, or at the request or suggestion of, any candidate or authorize party committee) any political party committee or its agent.			
	R. Russ Walker [Electro	nically Filed] Date	06 / D D	/ Y Y Y Y Y 2014
	Signature			

ITEMIZED INDEPENDENT EXPENDITURES					PAGE 196 OF 207 FOR LINE 24 OF FORM 3X
				FEC ID	DENTIFICATION NUMBER V
FREEDOMWORKS FOR AMERICA				С	C00499020
Check if 24-hour report 48-hour report	New repo	ort Amends repo		M /	
Full Name of Payee Odd Lamps, LLC			М	M /	C Distribution/Dissemination
Mailing Address 12076 92nd Ave N			Amour	05 nt	09 2014
City	State	Zip Code			1750.00
Maple Grove	MN	55369			D: SE.27192 Irsement or Obligation
Purpose of Expenditure IE-Disdale-Online Ads		Category/ Type 004	М	05	09 / 2014
Name of Federal Candidate		Support	Office Sought	t:	House District: 00
SID DINSDALE		X Oppose	Preside	ent 🔰	Senate State: <u>NE</u>
Calendar Year-To-Date Per Election for Office Sought	,	67992.90	Disbursement 2014		Primary General
Full Name of Payee Allen Page			Date of	of Publi	c Distribution/Dissemination
			M	05	/ D D / Y Y Y Y 19 / 2014
Mailing Address 400 N. Capitol St., NW			Amou	nt	
Ste. 765	State	Zip Code			35.55
Washington	DC	20001			D : SE.32508 ursement or Obligation
Purpose of Expenditure IE-McDaniel-Mileage		Category/ Type 002		05	/ D D / Y Y Y Y 19 / 2014
Name of Federal Candidate		Support	Office Sough	t:	House District: 00
CHRISTOPHER BRIAN MCDANIEL		Oppose	Preside	ent 🔰	Senate State: <u>MS</u>
Calendar Year-To-Date Per Election for Office Sought		258889.14	Disbursemen 2014		X Primary General Decify) ►
(a) SUBTOTAL of Itemized Independent Expenditures.					1785.55
				-7-	
(b) SUBTOTAL of Unitemized Independent Expenditure	es		• •		
(c) TOTAL Independent Expenditures					
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candidate party committee) any political party committee or its ag	or authorized				
R. Russ Walker	[Electroni	cally Filed] Date	06 /	20	/ Y Y Y Y Y 2014
Signature					

116	MIZED INDEPENDENT EXPEND	JITURES				FOR LINE 2	OF 207 24 OF FORM 3X
	ME OF COMMITTEE (In Full)				FEC		ON NUMBER 🔻
F	REEDOMWORKS FOR AME	ERICA			С	C00499020	
Che	eck if 24-hour report 48-hour	report New re	port Amends repo	ort filed or	M = M		Y Y Y Y Y
	Full Name of Payee			C	ate of Pub	lic Distribution	Dissemination
	Michelle Ray				^M 05	/ D D / 01	2014 Y
	Mailing Address 8404 Cedar Grove			Δ	mount		
	City	State	Zip Code				4000.00
	Shephersville	KY	40165			ID:SE.26900 bursement or (Obligation
	Purpose of Expenditure IE-Bevin-Strategic Consulting		Category/ Type 001		05		2014
	Name of Federal Candidate		Support	Office S	ought:	House	District: 00
	MATTHEW GRISWOLD BEVIN		Oppose	Pi	resident	X Senate	State: KY
	Calendar Year-To-Date		07054470		ement For:	Rrimary	General
	Per Election for Office Sought	, , ,	278544.78	2014	Other (s	specify) 🕨	
	Full Name of Payee Red Top Cab			C	Date of Pub	olic Distribution	/Dissemination
					05	/ D D / 02	2014
	Mailing Address 3251 Washington Blvd.			A	mount		
	City	State	Zip Code	— I			22.62
	Arlington	VA	22201			ID : SE.26966 bursement or (
	Purpose of Expenditure		Category/		M M	/ D D /	YYYYY
	IE-Brannon-Travel		Type 002		05	02	2014
	Name of Federal Candidate		X Support	Office S	ought:	House	District: 00
	GREGORY JOSEPH BRANNON		Oppose	P	resident	X Senate	State: NC
	Calendar Year-To-Date Per Election for Office Sought		139175.04	Disburse 2014	ement For:	✓ Primary specify) ►	/ General
				_			
	(a) SUBTOTAL of Itemized Independent	Expenditures				7-	4022.62
	(b) SUBTOTAL of Unitemized Independe	nt Expenditures		•••	7		
	(c) TOTAL Independent Expenditures			. . [
						-7-	
١	Under penalty of perjury I certify that the with, or at the request or suggestion of, a party committee) any political party comm	any candidate or authorize					
	R. Russ Walker	[F]octro	nically Filed]	M	/ 20		YY
	Signature		Date	e 06	20	201	

116	MIZED INDEPENDENT EXPENDITURES					FOR LINE 2	OF 207 24 OF FORM 3X
	ME OF COMMITTEE (In Full)				FEC	IDENTIFICATI	ON NUMBER 🔻
F	REEDOMWORKS FOR AMERICA				С	C00499020	
Ch	eck if 24-hour report 48-hour report	New repo	ort Amends rep	ort filed	on		YYYYY
	Full Name of Payee				Date of Pub	lic Distribution	/Dissemination
	Rusty Rudder				05	/ D D / 04	2014 Y
	Mailing Address 20210 Henderson Rd.				Amount		
	City Sta	te	Zip Code				91.60
	Cornelius NC	;	28031	1		ID: SE.27064 oursement or (Obligation
	Purpose of Expenditure IE-Brannon-Travel		Category/ Type 002		05		2014
	Name of Federal Candidate		Support	Office	Sought:	House	District: 00
	GREGORY JOSEPH BRANNON		Oppose		•	X Senate	State: NC
	Calendar Year-To-Date		143048.60	Disbui 2014	sement For:	X Primary	General
	Per Election for Office Sought		143048.60	2014	Other (s	specify) 🕨	
	Full Name of Payee Shell-NC				Date of Pub	olic Distribution	/Dissemination
					05	/ D D /	2014
	Mailing Address 2825 Little Rock Rd.				Amount		
	City Sta	to	Zip Code		· · · ·		43.79
	Charlotte No		28214			ID : SE.27082	1 1 /0 1
	Purpose of Expenditure		Category/			bursement or	
	IE-Brannon-Travel		Type 002		05	05	2014
	Name of Federal Candidate		Support	Office	Sought:	House	District: 00
	GREGORY JOSEPH BRANNON		Oppose		President	X Senate	State: NC
	Calendar Year-To-Date Per Election for Office Sought		146075.46	Disbu 2014	rsement For:	X Primary	y General
┛					Other (specify) 🕨	
	(a) SUBTOTAL of Itemized Independent Expenditures				· · · · ·		125.20
				🕨			135.39
	(b) SUBTOTAL of Unitemized Independent Expenditures.			🕨	· · · · ·		
	(c) TOTAL Independent Expenditures			… ▶			
,	Under penalty of perjury I certify that the independent ex with, or at the request or suggestion of, any candidate or party committee) any political party committee or its agen	authorized					
	R. Russ Walker	Flootno	ically Filed!	M	M / D		YY
	Signature	LERCHON	<i>[cally Filed]</i> Date	e 06	5 20	201	4

ITEMIZED INDEPENDENT EXPENDITURES		PAGE 199 OF 207 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
FREEDOMWORKS FOR AMERICA		C C00499020
Check if 24-hour report 48-hour report New report	ort Amends repo	rt filed on
Full Name of Payee SLC Airport		Date of Public Distribution/Dissemination
		05 06 Y Y Y Y Y Y Y
Mailing Address		Amount
City State	Zip Code	45.00
NC		Transaction ID : SE.35436 Date of Disbursement or Obligation
Purpose of Expenditure IE-Brannon-Travel	Category/ Type 002	$\begin{array}{c c} & & & \\ & & & & \\ & & & & \\ & & & \\ & & & & \\ & & & & \\ & & & & \\ & & & & \\ & & & & \\ & & & & \\ & & & & \\ & & & & \\ & & & & \\ & & & & \\ & & & & \\ & & & & \\ & & & & \\$
Name of Federal Candidate	Support	Office Sought: House District: 00
GREGORY JOSEPH BRANNON	Oppose	President X Senate State: NC
Calendar Year-To-Date Per Election for Office Sought	149160.26	Disbursement For: 2014 General Other (specify) ▶
Full Name of Payee		Date of Public Distribution/Dissemination
Starbucks-NC		05 / <u>Y Y Y Y</u> 05 05 2014
Mailing Address 545 Providence Rd.		Amount
City State	Zip Code	10.45
Charlotte NC	28214	Transaction ID : SE.27084 Date of Disbursement or Obligation
Purpose of Expenditure IE-Brannon-Travel	Category/ Type 002	05 / 05 / 2014
Name of Federal Candidate	Support	Office Sought: House District: 00
GREGORY JOSEPH BRANNON	Oppose	President X Senate State: NC
Calendar Year-To-Date Per Election for Office Sought	146085.91	Disbursement For:
(a) SUBTOTAL of Itemized Independent Expenditures		55.45
(b) SUBTOTAL of Unitemized Independent Expenditures		•
(c) TOTAL Independent Expenditures		
Under penalty of perjury I certify that the independent expenditures with, or at the request or suggestion of, any candidate or authorized party committee) any political party committee or its agent.		
R. Russ Walker	ically Filed]	M = M / D = D / Y = Y = Y = Y 06 20 2014
Signature	Date	

115	MIZED INDEPENDENT EXPEND	MURES				PAGE 200 C	DF 207 F FORM 3X
					FEC I	DENTIFICATION N	
	REEDOMWORKS FOR AME	-RICA			С	C00499020	
Ch	eck if 24-hour report 48-hour	report New repo	ort Amends repo		M = M		Y Y Y
	Full Name of Payee Starbucks-NC			Date	of Publi	ic Distribution/Diss	emination
				[05	/ D D / Y 06	2014
	Mailing Address 545 Providence Rd.			Amo	unt		
	City	State	Zip Code				13.53
	Charlotte	NC	28214			D:SE.35429 ursement or Obliga	ation
	Purpose of Expenditure IE-Brannon-Travel		Category/ Type 002		05 ^M		2014
	Name of Federal Candidate		Support	Office Soug	ht:	House Distr	ict: 00
	GREGORY JOSEPH BRANNON		Oppose	Presid	lent	X Senate Sta	ate: NC
	Calendar Year-To-Date		4 40 2 0 7 0 2	Disburseme	nt For:	X Primary	General
	Per Election for Office Sought		148367.63		Other (s	pecify) ►	
	Full Name of Payee Starbucks-NC					ic Distribution/Diss	
					05	/ D D / Y	2014
	Mailing Address 545 Providence Rd.			Amo	unt		
	City	State	Zip Code				6.73
	Charlotte	NC	28214			D : SE.35434	
	Purpose of Expenditure		Category/			ursement or Oblig	ation
	IE-Brannon-Travel		Type 002	_ L	05	06	2014
	Name of Federal Candidate		X Support	Office Soug	ht:	House Dist	rict: 00
	GREGORY JOSEPH BRANNON		Oppose	Presid	dent	X Senate Sta	ate: <u>NC</u>
	Calendar Year-To-Date		148446.98	Disburseme	nt For:	X Primary	General
	Per Election for Office Sought		110110.30		Other (s	pecify) 🕨	
	(a) SUBTOTAL of Itemized Independent	Expenditures					20.26
					-7-	-7-	
	(b) SUBTOTAL of Unitemized Independe	nt Expenditures		·· •			
	(c) TOTAL Independent Expenditures						
					7	-7-	
	Under penalty of perjury I certify that the with, or at the request or suggestion of, a party committee) any political party comm	any candidate or authorized					
	R. Russ Walker	[Electron:	ically Filed] Date	M M /	20	/ 2014	Y
	Signature				<u> </u>		

116	MIZED INDEPENDENT EXPENDI	IURES				PAGE 201 OF 207 FOR LINE 24 OF FORM 3X
					FEC II	DENTIFICATION NUMBER V
⊢	REEDOMWORKS FOR AME	RICA			С	C00499020
Ch	eck if 24-hour report 48-hour re	port New repo	ort Amends repo		M	
	Full Name of Payee Sushi Blues Cafe			Date	of Publi	c Distribution/Dissemination
					05	06 2014
	Mailing Address 301 Glenwoord Ave.			Amou	nt	
	City	State	Zip Code			58.67
	Raleigh	NC	27603			D: SE.35431 ursement or Obligation
	Purpose of Expenditure IE-Brannon-Travel		Category/ Type 002		05	/ D D / Y Y Y Y 06 / 2014
	Name of Federal Candidate		Support	Office Sough	nt:	House District: 00
	GREGORY JOSEPH BRANNON		Oppose	Presid	ent	Senate State: <u>NC</u>
	Calendar Year-To-Date		440440.05	Disbursemer	t For:	Primary General
	Per Election for Office Sought		148440.25		ther (sp	pecify) ►
	Full Name of Payee Topple Strategies			Date	of Publ	ic Distribution/Dissemination
					05	/ D D / Y Y Y Y 04 2014
	Mailing Address 189 N. Hwy 89 Ste. C 130	C		Amou	Int	
	City	State	Zip Code			18003.00
	North Salt Lake	UT	84054			D : SE.27010
	Purpose of Expenditure		Category/		of Disb	ursement or Obligation
	IE-Birman-Phone Calling		Type 004		05	04 2014
	Name of Federal Candidate		X Support	Office Sougl	nt:	K House District: 07
	IGOR A BIRMAN		Oppose	Presid	ent	Senate State: CA
	Calendar Year-To-Date		18299.87	Disbursemer 2014	nt For:	Primary General
	Per Election for Office Sought		10233.07		Other (s	pecify) ►
	(a) SUBTOTAL of Itemized Independent E	xpenditures				18061.67
					-7-	-7-
	(b) SUBTOTAL of Unitemized Independent	Expenditures		• •	-7	
	(c) TOTAL Independent Expenditures					
					-7	
	Under penalty of perjury I certify that the in with, or at the request or suggestion of, any party committee) any political party committ	y candidate or authorized				
	R. Russ Walker	[Electron	ically Filed]	M M /	20	2014
	Signature		_ Date		20	

TIEMIZED INDEPENDENT EXPEND	JII URES				PAGE 202 OF 207 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)	_			FEC I	DENTIFICATION NUMBER V
FREEDOMWORKS FOR AME	ERICA			С	C00499020
				M	/ D D / Y Y Y Y
Check if 24-hour report 48-hour	report New re	eport Amends repo			
Full Name of Payee Topple Strategies			Date	of Publ	ic Distribution/Dissemination
			N	05	/ D D / Y Y Y Y 04 2014
Mailing Address 189 N. Hwy 89 Ste. C 1	30		Amou	nt	
City	State	Zip Code			24004.00
North Salt Lake	UT	84054			D: SE.27030 pursement or Obligation
Purpose of Expenditure IE-Sasse-Phone Calling		Category/ Type 004		05	/ D D / Y Y Y Y 04 / 2014
Name of Federal Candidate		Support	Office Sough	it:	House District: 00
BENJAMIN E SASSE		Oppose	Preside	L	Senate State: <u>NE</u>
Calendar Year-To-Date		44356.86	Disbursemen 2014	t For:	Primary General
Per Election for Office Sought		44330.80		ther (s	pecify) ►
Full Name of Payee			Date	of Publ	lic Distribution/Dissemination
Topple Strategies			Π	05	/ D D / Y Y Y Y 04 2014
Mailing Address 189 N. Hwy 89 Ste. C 1	30		Amou	Int	
		7:- 0			30005.00
City North Salt Lake	State UT	Zip Code 84054	Transa	ction I	D : SE.27040
Purpose of Expenditure					oursement or Obligation
IE-McDaniel-Phone Calling		Category/ Type 004		05	04 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate		X Support	Office Sough	nt:	House District: 00
CHRISTOPHER BRIAN MCDANIEL		Oppose	Presid	ent	Senate State: <u>MS</u>
Calendar Year-To-Date		188110.47	Disbursemer 2014	it For:	X Primary General
Per Election for Office Sought				ther (s	specify) 🕨
(a) SUBTOTAL of Itemized Independent	Expenditures		• •	-7	54009.00
(b) SUBTOTAL of Unitemized Independe	nt Expenditures				
(1)				-7	
(c) TOTAL Independent Expenditures			••		
Under penalty of perjury I certify that the with, or at the request or suggestion of, a party committee) any political party comm	any candidate or authoriz				
R. Russ Walker				DD	
Signature	[Electro	onically Filed] Date	06	20	2014
Signature					

ITEMIZED INDEPENDENT EXPENDIT	URES				PAGE 203 OF 207 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC I	DENTIFICATION NUMBER V
FREEDOMWORKS FOR AMER	ICA			С	C00499020
			- N	M	/ D D / Y Y Y Y
Check if 24-hour report 48-hour report	ort New rep	ort Amends repo			
Full Name of Payee US Air			Date	of Publi	ic Distribution/Dissemination
			N	05	/ D D / Y Y Y Y 02 2014
Mailing Address 400 East Sky Harbor Blvd.			Amou	nt	
City	State	Zip Code			529.00
Phoenix	AZ	85034			D : SE.26960 ursement or Obligation
Purpose of Expenditure IE-Brannon-Travel		Category/ Type 002		05	/ 02 / Y Y Y Y 2014
Name of Federal Candidate		Support	Office Sough	nt:	House District: 00
GREGORY JOSEPH BRANNON		Oppose	Presid	ent	Senate State: <u>NC</u>
Calendar Year-To-Date		138003.98	Disbursemer	t For:	Primary General
Per Election for Office Sought	, , ,	100000.00		ther (s	pecify) ►
Full Name of Payee US Air				of Publ	ic Distribution/Dissemination
Mailing Address			Ľ	05	06 2014
400 East Sky Harbor Blvd.			Amou	Int	
City	State	Zip Code			25.00
Phoenix	AZ	85034			D: SE.35443 pursement or Obligation
Purpose of Expenditure IE-Brannon-Travel		Category/ Type 002		05	/ Dob / Y Y Y Y 2014
Name of Federal Candidate		Support	Office Sough	nt:	House District: 00
GREGORY JOSEPH BRANNON		Oppose	Presid	ent	Senate State: <u>NC</u>
Calendar Year-To-Date Per Election for Office Sought		148786.31	Disbursemer 2014		Primary General
(a) SUBTOTAL of Itemized Independent Exp	enditures		• •	-7-	554.00
(b) SUBTOTAL of Unitemized Independent E	Expenditures				
				-7	
(c) TOTAL Independent Expenditures					
Under penalty of perjury I certify that the ind with, or at the request or suggestion of, any party committee) any political party committee	candidate or authorized				
R. Russ Walker	[Electron	ically Filed] Date	M M /	20	/ Y Y Y Y Y Y 2014
Signature					

116	MIZED INDEPENDENT EXPEND	MIURES				FOR LINE 2	OF 207 24 OF FORM 3X
	ME OF COMMITTEE (In Full)				FEC		ON NUMBER 🔻
F	REEDOMWORKS FOR AME	ERICA			С	C00499020	
Ch	eck if 24-hour report 48-hour	report New rep	ort Amends repo	ort filed on	M = M		Y Y Y Y Y
	Full Name of Payee			Dat	e of Pub	lic Distribution	Dissemination
	Walgreens				05	/ D D / 04	2014 Y
	Mailing Address 1327 Meadowlark Dr.			Am	ount		
	City	State	Zip Code				9.07
	Winston-Salem	NC	27106			ID:SE.27070	Obligation
	Purpose of Expenditure IE-Brannon-Travel		Category/ Type 002		05		2014
	Name of Federal Candidate		Support	Office Sou	ight:	House	District: 00
	GREGORY JOSEPH BRANNON		Oppose		-	X Senate	State: NC
	Calendar Year-To-Date		440044-00	Disbursem	ent For:	Rrimary	General
	Per Election for Office Sought		143211.29	2014	Other (s	specify) 🕨	
	Full Name of Payee R. Russ Walker			Da	te of Pub	lic Distribution	/Dissemination
					05	/ D D / 02	2014
	Mailing Address 400 N. Capitol St., NW			Am	ount		
	Suite 765	01-1-	Zie Osida	— Г			27.00
	City Washington	State DC	Zip Code 20001			ID : SE.26971 bursement or	27.00 Obligation
	Purpose of Expenditure IE-Brannon-Mileage		Category/ Type 002		05	/ 02 /	2014
	Name of Federal Candidate		Support	Office Sou	ught:	House	District: 00
	GREGORY JOSEPH BRANNON		Oppose	Pres	sident	X Senate	State: NC
	Calendar Year-To-Date Per Election for Office Sought		141091.95	Disbursen 2014		✓ Primary specify) ►	/ General
Γ				_			
	(a) SUBTOTAL of Itemized Independent	Expenditures		• •	-7		36.07
	(b) SUBTOTAL of Uniternized Independe	nt Expenditures					
	(c) TOTAL Independent Expenditures			·· ▶	7		
,	Under penalty of perjury I certify that the with, or at the request or suggestion of, a party committee) any political party comm	any candidate or authorized					
	R. Russ Walker	[Electron	ically Filed] Date	e 06	/ 20	D / Y Y 201	4 Y
	Signature						

		TURES				PAGE 205	OF 207 24 OF FORM 3X
NA	ME OF COMMITTEE (In Full)				FEC		
	REEDOMWORKS FOR AME	RICA				IDENTIFICATI	
					С	C00499020	
Ch	eck if 24-hour report 48-hour re	eport New re	port Amends repo	ort filed o	n	/ D D /	YYYYY
	Full Name of Payee			[Date of Pub	lic Distribution	/Dissemination
	Heather Williamson				05	/ D D / 02	2014
	Mailing Address 1086 Topaz Dr						
					Amount		
	City	State	Zip Code			9	19.06
	Saratoga Springs	UT	84045			D: SE.26969 oursement or (Obligation
	Purpose of Expenditure IE-Brannon-Travel		Category/ Type 002		05	/ 02 /	2014
	Name of Federal Candidate		Support	Office S	Sought:	House	District: 00
	GREGORY JOSEPH BRANNON		Oppose		-	X Senate	State: NC
	Calendar Year-To-Date		141064.95	Disburs 2014	ement For:	X Primary	General
	Per Election for Office Sought				Other (s	specify) 🕨	
	Full Name of Payee Heather Williamson				Date of Pub	lic Distribution	/Dissemination
	Mailing Address				05	03	2014
	1086 Topaz Dr				Amount		
	City	State	Zip Code				49.23
	Saratoga Springs	UT	84045			ID: SE.26995 bursement or	Obligation
	Purpose of Expenditure		Category/		M M	/ D D /	Y Y Y Y
	IE-Brannon-Travel		Type 002		05	03	2014
	Name of Federal Candidate		X Support	Office S	Sought:	House	District: 00
	GREGORY JOSEPH BRANNON		Oppose	F	President	X Senate	State: NC
	Calendar Year-To-Date		142864.55	Disburs 2014	ement For:	X Primary	y General
┛	Per Election for Office Sought				Other (specify) 🕨	
	(a) SUBTOTAL of Itemized Independent E	.xpenditures		••••			68.29
	(b) SUBTOTAL of Unitemized Independen	t Expenditures					
		·					
	(c) TOTAL Independent Expenditures			▶			
١	Under penalty of perjury I certify that the with, or at the request or suggestion of, ar party committee) any political party commit	ny candidate or authorize					
	R. Russ Walker	[Floatro	nically Filed]				Y Y
	Signature		Date	e 06	20	201	+

ITEMIZED INDEPENDENT EXPEND	TURES				PAGE 206 FOR LINE 24 C	OF 207 DF FORM 3X
NAME OF COMMITTEE (In Full)				FEC I		NUMBER 🔻
FREEDOMWORKS FOR AME	IRICA			С	C00499020	
				M M	/ D D / Y	Y Y Y Y
Check if 24-hour report 48-hour	report New re	eport Amends repo	ort filed on			
Full Name of Payee Heather Williamson			Date	of Publ	ic Distribution/Diss	semination
				05	/ D D / Y	2014 Y
Mailing Address 1086 Topaz Dr			Amo	unt		
City	State	Zip Code				1.70
Saratoga Springs	UT	84045			D : SE.27079 oursement or Oblig	ation
Purpose of Expenditure IE-Brannon-Travel		Category/ Type 002		05 ^M	/ D D / Y	2014
Name of Federal Candidate		Support	Office Soug	ht:	House Dist	trict: 00
GREGORY JOSEPH BRANNON		Oppose	Presic	L	X Senate St	tate: <u>NC</u>
Calendar Year-To-Date Per Election for Office Sought		144391.63	Disburseme		Primary	General
Full Name of Payee					pecify) ►	
Heather Williamson			_	01 Pub	lic Distribution/Dist	2014
Mailing Address 1086 Topaz Dr			Amo			2014
			Anio	uni		
City	State	Zip Code				425.07
Saratoga Springs	UT	84045			D:SE.27210	gation
Purpose of Expenditure IE-Smith-Travel		Category/ Type 002] [05 ^M	/ D D / Y	2014 Y
Name of Federal Candidate		Support	Office Soug	ht:	X House Dist	trict: 02
BRYAN SMITH		Oppose	Presid	dent	Senate St	tate: <u>ID</u>
Calendar Year-To-Date Per Election for Office Sought		31164.45	Disburseme 2014		Primary	General
(a) SUBTOTAL of Itemized Independent I	Expenditures		• •			426.77
(b) SUBTOTAL of Unitemized Independer	at Expanditures					
(b) SOBTOTAL OF OFficentized independent				-7		1
(c) TOTAL Independent Expenditures			•	-1	-7-	
Under penalty of perjury I certify that the with, or at the request or suggestion of, a party committee) any political party comm	ny candidate or authorize					
R. Russ Walker	[Electro	onically Filed]	/	20	/ Y Y Y 2014	Y
Signature		Date		20	2014	

116	EMIZED INDEPENDENT EXPENDITORES			FOR LINE	24 OF 207			
NA	ME OF COMMITTEE (In Full)		FEC					
F	REEDOMWORKS FOR AMERICA		C C00499020					
				00499020				
Ch	eck if 24-hour report 48-hour report New report Amends repo	ort filed o	on	/ D D				
	Full Name of Payee Heather Williamson		Date of Pu	Iblic Distributio	n/Dissemination			
	Heather Williamson		05 / 16 / 2014 Amount					
	Mailing Address 1086 Topaz Dr							
	City State Zip Code				6.07			
	Saratoga Springs UT 84045			ID:SE.2728 sbursement or				
	Purpose of Expenditure IE-Smith-Travel Category/ Type 002		^M 05	/ D D D 16	2014			
	Name of Federal Candidate Support	Office	Sought:	X House	District: 02			
	BRYAN SMITH Oppose		President	Senate	State:ID			
	Calendar Year-To-Date Per Election for Office Sought	Disburs 2014	sement For	:: X Prima (specify) ▶	ry General			
	Full Name of Payee		Date of Pu	ublic Distributio	on/Dissemination			
	Mailing Address							
			Amount					
	City State Zip Code		· · · ·					
	Purpose of Expenditure Category/		Date of Di	sbursement or	Obligation			
	Type							
	Name of Federal Candidate Support	Office	Sought:	House	District:			
	Oppose		President	Senate	State:			
	Calendar Year-To-Date	Disbur	sement For	r: 🗌 Prima	ry General			
	Per Election for Office Sought		Other	(specify) ►				
	(a) SUBTOTAL of Itemized Independent Expenditures	• •		7 7	6.07			
(b) SUBTOTAL of Unitemized Independent Expenditures								
	(c) TOTAL Independent Expenditures	· ►			372564.28			
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.								
	R. Russ Walker	M	M / D		Y Y			
	[Electronically Filed] Date	06	2	20	014			