

# FEC FORM 3X

## REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

FREEDOMWORKS FOR AMERICA

ADDRESS (number and street)

400 N CAPITOL STREET NW SUITE 765

☐ Check if different than previously reported. (ACC)

WASHINGTON

DC

20001

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

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 Report (Q1)☐ July 15 Quarterly Report (Q2)☐ October 15 Quarterly Report (Q3)☐ January 31 Year-End Report (YE)☐ July 31 Mid-Year Report (Non-election Year Only) (MY)☐ Termination Report (TER)

(b) Monthly Report Due On:

☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11) (Non-Election Year Only)☐ Mar 20 (M3)☒ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12) (Non-Election Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y Y

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer R. Russ Walker

Signature of Treasurer

R. Russ Walker

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y Y

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office  
Use  
Only

### FEC FORM 3X

Rev. 12/2004

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

FREEDOMWORKS FOR AMERICA

Report Covering the Period: From: M M / D D / Y Y Y Y Y 05 / 01 / 2014 To: M M / D D / Y Y Y Y Y 05 / 31 / 2014

|                                                                                                                  | COLUMN A<br>This Period                                               | COLUMN B<br>Calendar Year-to-Date                                      |
|------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------|------------------------------------------------------------------------|
| 6. (a) Cash on Hand<br>January 1, <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y</span> 2014     |                                                                       | <span style="border: 1px solid black; padding: 2px;">595214.29</span>  |
| (b) Cash on Hand at<br>Beginning of Reporting Period.....                                                        | <span style="border: 1px solid black; padding: 2px;">528741.14</span> |                                                                        |
| (c) Total Receipts (from Line 19) .....                                                                          | <span style="border: 1px solid black; padding: 2px;">369757.37</span> | <span style="border: 1px solid black; padding: 2px;">1735678.47</span> |
| (d) Subtotal (add Lines 6(b) and<br>6(c) for Column A and Lines<br>6(a) and 6(c) for Column B).....              | <span style="border: 1px solid black; padding: 2px;">898498.51</span> | <span style="border: 1px solid black; padding: 2px;">2330892.76</span> |
| 7. Total Disbursements (from Line 31) .....                                                                      | <span style="border: 1px solid black; padding: 2px;">505991.01</span> | <span style="border: 1px solid black; padding: 2px;">1938385.26</span> |
| 8. Cash on Hand at Close of<br>Reporting Period<br>(subtract Line 7 from Line 6(d)) .....                        | <span style="border: 1px solid black; padding: 2px;">392507.50</span> | <span style="border: 1px solid black; padding: 2px;">392507.50</span>  |
| 9. Debts and Obligations Owed <b>TO</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D) .....  | <span style="border: 1px solid black; padding: 2px;">0.00</span>      |                                                                        |
| 10. Debts and Obligations Owed <b>BY</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D) ..... | <span style="border: 1px solid black; padding: 2px;">0.00</span>      |                                                                        |



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

## For further information contact:

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

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

# DETAILED SUMMARY PAGE

## of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

FREEDOMWORKS FOR AMERICA

Report Covering the Period:

From:

M M / D D / Y Y Y Y  
05 01 2014

To:

M M / D D / Y Y Y Y  
05 31 2014
**I. Receipts**
**COLUMN A**  
**Total This Period**
**COLUMN B**  
**Calendar Year-to-Date**

## 11. Contributions (other than loans) From:

## (a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

215352.35

968473.00

(ii) Unitemized .....

57704.08

632704.53

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ►

273056.43

1601177.53

(b) Political Party Committees .....

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

0.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) ..... ►

273056.43

1601177.53

## 12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

## 13. All Loans Received .....

0.00

0.00

## 14. Loan Repayments Received.....

0.00

0.00

## 15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

96700.94

134500.94

## 16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

## 17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

0.00

## 18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3).....

0.00

0.00

(b) Levin Funds (from Schedule H5) .....

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),  
12, 13, 14, 15, 16, 17, and 18(c))..... ►

369757.37

1735678.47

## 20. Total Federal Receipts

(subtract Line 18(c) from Line 19) ..... ►

369757.37

1735678.47

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

| II. Disbursements                                                                              | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|------------------------------------------------------------------------------------------------|-------------------------------|-----------------------------------|
| 21. Operating Expenditures:                                                                    |                               |                                   |
| (a) Allocated Federal/Non-Federal Activity (from Schedule H4)                                  |                               |                                   |
| (i) Federal Share .....                                                                        | 0.00                          | 0.00                              |
| (ii) Non-Federal Share.....                                                                    | 0.00                          | 0.00                              |
| (b) Other Federal Operating Expenditures .....                                                 | 133391.73                     | 869584.20                         |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....                        | 133391.73                     | 869584.20                         |
| 22. Transfers to Affiliated/Other Party Committees.....                                        | 0.00                          | 0.00                              |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees.....         | 0.00                          | 0.00                              |
| 24. Independent Expenditures (use Schedule E) .....                                            | 372564.28                     | 1065728.80                        |
| 25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....                   | 0.00                          | 0.00                              |
| 26. Loan Repayments Made.....                                                                  | 0.00                          | 0.00                              |
| 27. Loans Made.....                                                                            | 0.00                          | 0.00                              |
| 28. Refunds of Contributions To:                                                               |                               |                                   |
| (a) Individuals/Persons Other Than Political Committees .....                                  | 35.00                         | 135.00                            |
| (b) Political Party Committees .....                                                           | 0.00                          | 0.00                              |
| (c) Other Political Committees (such as PACs).....                                             | 0.00                          | 0.00                              |
| (d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....                            | 35.00                         | 135.00                            |
| 29. Other Disbursements .....                                                                  | 0.00                          | 2937.26                           |
| 30. Federal Election Activity (2 U.S.C. §431(20))                                              |                               |                                   |
| (a) Allocated Federal Election Activity (from Schedule H6)                                     |                               |                                   |
| (i) Federal Share .....                                                                        | 0.00                          | 0.00                              |
| (ii) "Levin" Share.....                                                                        | 0.00                          | 0.00                              |
| (b) Federal Election Activity Paid Entirely With Federal Funds .....                           | 0.00                          | 0.00                              |
| (c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....           | 0.00                          | 0.00                              |
| 31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..      | 505991.01                     | 1938385.26                        |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 505991.01                     | 1938385.26                        |

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

| III. Net Contributions/Operating Expenditures                                          | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|----------------------------------------------------------------------------------------|-------------------------------|-----------------------------------|
| 33. Total Contributions (other than loans)<br>(from Line 11(d), page 3) .....          | 273056.43                     | 1601177.53                        |
| 34. Total Contribution Refunds<br>(from Line 28(d)) .....                              | 35.00                         | 135.00                            |
| 35. Net Contributions (other than loans)<br>(subtract Line 34 from Line 33) .....      | 273021.43                     | 1601042.53                        |
| 36. Total Federal Operating Expenditures<br>(add Line 21(a)(i) and Line 21(b)) ..... ► | 133391.73                     | 869584.20                         |
| 37. Offsets to Operating Expenditures<br>(from Line 15, page 3).....                   | 96700.94                      | 134500.94                         |
| 38. Net Operating Expenditures<br>(subtract Line 37 from Line 36) ..... ►              | 36690.79                      | 735083.26                         |

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 6 OF 207

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 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)

## **A. Florian Aberle**

Mailing Address 1832 Bonn Blvd

City

Bismarck

State

ND

Zip Code

58502

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Advanced Cutting

Occupation

Cutter

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 14 / 2014

Transaction ID : SA11AI.32633

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

## **B. Sharon D Adams**

Mailing Address 124 Broadmore St

City

Plentywood

State

MT

Zip Code

59254

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 01 / 2014

Transaction ID : SA11AI.32641

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

## **C. Mrs. Sharon Anderson**

Mailing Address P. O. Box 429

City

Alton

State

NH

Zip Code

03809

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Kw

Occupation

Real Estate Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 08 / 2014

Transaction ID : SA11AI.35342

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

150.00

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

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NAME OF COMMITTEE (In Full)

**FREEDOMWORKS FOR AMERICA**

Full Name (Last, First, Middle Initial)

**A. Mr. David Baldwin**

Mailing Address 205 Lake Court Dr

City

Lynchburg

State

TN

Zip Code

37352

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Info Requested

Occupation

Info Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 08 / 2014

**Transaction ID : SA11AI.32729**

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**B. Scott Banister**

Mailing Address Po Box 997

City

Half Moon Bay

State

CA

Zip Code

94019

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Scott Banister

Occupation

Angel Investor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

9500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 02 / 2014

**Transaction ID : SA11AI.32735**

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. Samuel Barker**

Mailing Address 6203 Alden Bridge Drive

City

Woodlands

State

TX

Zip Code

77382

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 06 / 2014

**Transaction ID : SA11AI.32742**

Amount of Each Receipt this Period

300.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

1800.00

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**FREEDOMWORKS FOR AMERICA**

Full Name (Last, First, Middle Initial)

**A. Paul Benedict**

Mailing Address P.o. Box 1654 Quail Trail 1708

City

Forest Lakes

State

AZ

Zip Code

85931

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Ge Lufkin

Occupation

Optimization Specialist (energy)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

05 / 05 / 2014

Transaction ID : SA11AI.32792

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**B. Ms. Julie Bingham**

Mailing Address 38 Tedrick St

City

Pittston

State

PA

Zip Code

18640

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Info Requested

Occupation

Info Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

05 / 28 / 2014

Transaction ID : SA11AI.32834

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

**C. Mr. Joel Bomgaars**

Mailing Address 5624 Brentwood Dr

City

Jackson

State

MS

Zip Code

39211

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Bomgaar Corporation

Occupation

Founder & Chairman

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

05 / 21 / 2014

Transaction ID : SA11AI.32875

Amount of Each Receipt this Period

5000.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

5250.00



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

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**FREEDOMWORKS FOR AMERICA**

Full Name (Last, First, Middle Initial)

**A. Kenneth Boothe**

Mailing Address 1001 East Fm 700

City

Big Spring

State

TX

Zip Code

79720

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Info Requested

Occupation

Info Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 06 / 2014

Transaction ID : SA11AI.32887

Amount of Each Receipt this Period

75.00

Full Name (Last, First, Middle Initial)

**B. Mr. Carl Brady**

Mailing Address 1320 Rose St.

City

Centralia

State

WA

Zip Code

98531

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Disabled

Occupation

Disabled

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 04 / 2014

Transaction ID : SA11AI.32903

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**C. Michael Brashear**

Mailing Address 7233 W 15th Ave

City

Kennewick

State

WA

Zip Code

99338

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Ben Franklin Transit

Occupation

Coach Operator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 05 / 2014

Transaction ID : SA11AI.32912

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

175.00

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

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FOR LINE NUMBER:  
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NAME OF COMMITTEE (In Full)

**FREEDOMWORKS FOR AMERICA**

Full Name (Last, First, Middle Initial)

## **A. Michael Brashear**

Mailing Address 7233 W 15th Ave

City

Kennewick

State

WA

Zip Code

99338

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Ben Franklin Transit

Occupation

Coach Operator

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

05 / 14 / 2014

Transaction ID : SA11AI.32913

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

## **B. Mr. Scott Bueling**

Mailing Address 10604 Deerberry Dr

City

Land O Lakes

State

FL

Zip Code

34638

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Scott Bueling

Occupation

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

05 / 18 / 2014

Transaction ID : SA11AI.32972

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

## **C. Mr. Scott Bueling**

Mailing Address 10604 Deerberry Dr

City

Land O Lakes

State

FL

Zip Code

34638

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Scott Bueling

Occupation

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

05 / 18 / 2014

Transaction ID : SA11AI.32973

Amount of Each Receipt this Period

25.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

100.00

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**FREEDOMWORKS FOR AMERICA**

Full Name (Last, First, Middle Initial)

## **A. Mr. Scott Bueling**

Mailing Address 10604 Deerberry Dr

City

Land O Lakes

State

FL

Zip Code

34638

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Scott Bueling

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

05 / 18 / 2014

Transaction ID : SA11AI.32974

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

## **B. Mr. Scott Bueling**

Mailing Address 10604 Deerberry Dr

City

Land O Lakes

State

FL

Zip Code

34638

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Scott Bueling

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

05 / 18 / 2014

Transaction ID : SA11AI.32975

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

## **C. Kim Burnett**

Mailing Address 731 Kennesaw Due West Rd

City

Kennesaw

State

GA

Zip Code

30152

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Info Requested

Occupation

Info Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

05 / 05 / 2014

Transaction ID : SA11AI.32985

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

150.00

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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**FREEDOMWORKS FOR AMERICA**

Full Name (Last, First, Middle Initial)

**A. Barbara Cameron**

Mailing Address 4268 Pacifico Ln

City

Las Vegas

State

NV

Zip Code

89135

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

4000.00

Date of Receipt

05 / 14 / 2014

Transaction ID : SA11AI.33010

Amount of Each Receipt this Period

-500.00

Full Name (Last, First, Middle Initial)

**B. Barbara Cameron**

Mailing Address 4268 Pacifico Ln

City

Las Vegas

State

NV

Zip Code

89135

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

3500.00

Date of Receipt

05 / 14 / 2014

Transaction ID : SA11AI.33011

Amount of Each Receipt this Period

-500.00

Full Name (Last, First, Middle Initial)

**C. Barbara Cameron**

Mailing Address 4268 Pacifico Ln

City

Las Vegas

State

NV

Zip Code

89135

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

05 / 14 / 2014

Transaction ID : SA11AI.33012

Amount of Each Receipt this Period

-500.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

-1500.00

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

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NAME OF COMMITTEE (In Full)

**FREEDOMWORKS FOR AMERICA**

Full Name (Last, First, Middle Initial)

**A. Barbara Cameron**

Mailing Address 4268 Pacifico Ln

City

Las Vegas

State

NV

Zip Code

89135

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

05 / 14 / 2014

Transaction ID : SA11AI.33013

Amount of Each Receipt this Period

-500.00

Full Name (Last, First, Middle Initial)

**B. Barbara Cameron**

Mailing Address 4268 Pacifico Ln

City

Las Vegas

State

NV

Zip Code

89135

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

05 / 14 / 2014

Transaction ID : SA11AI.33014

Amount of Each Receipt this Period

-500.00

Full Name (Last, First, Middle Initial)

**C. Barbara Cameron**

Mailing Address 4268 Pacifico Ln

City

Las Vegas

State

NV

Zip Code

89135

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

05 / 14 / 2014

Transaction ID : SA11AI.33015

Amount of Each Receipt this Period

-500.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

-1500.00

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

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NAME OF COMMITTEE (In Full)

**FREEDOMWORKS FOR AMERICA**

Full Name (Last, First, Middle Initial)

**A. Barbara Cameron**

Mailing Address 4268 Pacifico Ln

City

Las Vegas

State

NV

Zip Code

89135

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

05 / 14 / 2014

Transaction ID : SA11AI.33016

Amount of Each Receipt this Period

-500.00

Full Name (Last, First, Middle Initial)

**B. Barbara Cameron**

Mailing Address 4268 Pacifico Ln

City

Las Vegas

State

NV

Zip Code

89135

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / 14 / 2014

Transaction ID : SA11AI.33017

Amount of Each Receipt this Period

-500.00

Full Name (Last, First, Middle Initial)

**C. Mr. Con Campbell**

Mailing Address 502n. Fifth St. PO Box 337

City

Ashkum

State

IL

Zip Code

60911

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

05 / 05 / 2014

Transaction ID : SA11AI.33021

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

0.00

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

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

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NAME OF COMMITTEE (In Full)

**FREEDOMWORKS FOR AMERICA**

Full Name (Last, First, Middle Initial)

**A. Mr. Giuseppe Cecchi**

Mailing Address 1700 N Moore St

City

Arlington

State

VA

Zip Code

22209

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Info Requested

Occupation

Info Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

05 / 06 / 2014

Transaction ID : SA11AI.33052

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. Ms. Madeline Chao**

Mailing Address 41 Fawnridge Pl

City

Aliso Viejo

State

CA

Zip Code

92656

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Occupation

Retired

Aggregate Year-to-Date ▼

300.00

Date of Receipt

05 / 24 / 2014

Transaction ID : SA11AI.33066

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C. Ms. Deborah Christian**

Mailing Address 1790 Sidney Ave 2-106

City

Port Orchard

State

WA

Zip Code

98366

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Lowes

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Occupation

Customer Service Associate

Aggregate Year-to-Date ▼

225.00

Date of Receipt

05 / 16 / 2014

Transaction ID : SA11AI.33094

Amount of Each Receipt this Period

25.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

1125.00

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

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NAME OF COMMITTEE (In Full)

**FREEDOMWORKS FOR AMERICA**

Full Name (Last, First, Middle Initial)

**A. Ms. Deborah Christian**

Mailing Address 1790 Sidney Ave 2-106

City

State

Zip Code

Port Orchard

WA

98366

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Lowe's

Customer Service Associate

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

05 / 16 / 2014

Transaction ID : SA11AI.33095

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**B. Ms. Deborah Christian**

Mailing Address 1790 Sidney Ave 2-106

City

State

Zip Code

Port Orchard

WA

98366

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Lowe's

Customer Service Associate

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

05 / 16 / 2014

Transaction ID : SA11AI.33096

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**C. Richard Crandall**

Mailing Address 601 E Hopkins Ave Ste 202

City

State

Zip Code

Aspen

CO

81611

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Info Requested

Info Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / 20 / 2014

Transaction ID : SA11AI.33172

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

550.00



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

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NAME OF COMMITTEE (In Full)

**FREEDOMWORKS FOR AMERICA**

Full Name (Last, First, Middle Initial)

**A. Mr. Wayne Crandall**

Mailing Address 511 Henley Drive

City

Naples

State

FL

Zip Code

34104

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

05 / 17 / 2014

**Transaction ID : SA11AI.33176**

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B. Mr. Wayne Crandall**

Mailing Address 511 Henley Drive

City

Naples

State

FL

Zip Code

34104

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

400.00

Date of Receipt

05 / 17 / 2014

**Transaction ID : SA11AI.33177**

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C. John Crawford**

Mailing Address 2434 Culleywood Rd

City

Jackson

State

MS

Zip Code

39211

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

05 / 01 / 2014

**Transaction ID : SA11AI.33179**

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

450.00

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

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NAME OF COMMITTEE (In Full)

**FREEDOMWORKS FOR AMERICA**

Full Name (Last, First, Middle Initial)

**A. Mr. James Darr Jr.**

Mailing Address 2727 De Anza Rd. Spc. Sd57

City State Zip Code  
San Diego CA 92109

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Info Requested

Info Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 08 / 2014

Transaction ID : SA11AI.33217

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

**B. Diversified Resources, Inc.**

Mailing Address 29425 Chagrin Blvd Ste 300

City State Zip Code  
Beachwood OH 44122

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Info Requested

Info Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

30000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 02 / 2014

Transaction ID : SA11AI.33293

Amount of Each Receipt this Period

30000.00

Full Name (Last, First, Middle Initial)

**C. Mr. Ronald Dondanville**

Mailing Address 420 Andrew Avenue

City State Zip Code  
Encinitas CA 92024

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Unemployed

Service Tech

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.75

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 13 / 2014

Transaction ID : SA11AI.33308

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

30550.00

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

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NAME OF COMMITTEE (In Full)

**FREEDOMWORKS FOR AMERICA**

Full Name (Last, First, Middle Initial)

**A. Mr. Richard Donnelly**

Mailing Address 970 Lone Pine Rd

City

Bloomfield Hills

State

MI

Zip Code

48302

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Oshkosh Corp

Occupation

Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / 07 / 2014

Transaction ID : SA11AI.33310

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**B. Lori Dunham**

Mailing Address 13103 Coastal Circle

City

Palm Beach Gardens

State

FL

Zip Code

33410

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

05 / 14 / 2014

Transaction ID : SA11AI.33332

Amount of Each Receipt this Period

180.00

Full Name (Last, First, Middle Initial)

**C. James Eller**

Mailing Address 3587 Conrad Ave.

City

San Diego

State

CA

Zip Code

92117

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

05 / 06 / 2014

Transaction ID : SA11AI.33360

Amount of Each Receipt this Period

200.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

880.00

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

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)

**FREEDOMWORKS FOR AMERICA**

Full Name (Last, First, Middle Initial)

## **A. Mr. Martin Ennis**

Mailing Address 515 Willowhurst Place

City State Zip Code  
Louisville KY 40223

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 08 / 2014

**Transaction ID : SA11AI.33378**

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

## **B. Charles Eubank**

Mailing Address 2009 Norwich Cr

City State Zip Code  
Yukon OK 73099

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Rush

Occupation

Sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 01 / 2014

**Transaction ID : SA11AI.33391**

Amount of Each Receipt this Period

350.00

Full Name (Last, First, Middle Initial)

## **C. Nora Felton**

Mailing Address 33079 County 24 Blvd

City State Zip Code  
Cannon Falls MN 55009

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Nora Felton

Occupation

Farmer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 06 / 2014

**Transaction ID : SA11AI.33406**

Amount of Each Receipt this Period

300.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

700.00

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

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NAME OF COMMITTEE (In Full)

**FREEDOMWORKS FOR AMERICA**

Full Name (Last, First, Middle Initial)

## **A. Donald Fowler**

Mailing Address 3575 Wilder Ridge Rd.

City State Zip Code  
Garberville CA 95542

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

850.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 05 / 2014

Transaction ID : SA11AI.33441

Amount of Each Receipt this Period

350.00

Full Name (Last, First, Middle Initial)

## **B. Mr. Channing Frederick**

Mailing Address 2485 Highway 460 E

City State Zip Code  
West Liberty KY 41472

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Foothills Contracting, LLC

Occupation

Business Owner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 10 / 2014

Transaction ID : SA11AI.33459

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

## **C. Freedomworks, Inc.**

Mailing Address 400 N Capitol St., NW  
Suite 735

City State Zip Code  
Washington DC 20001

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220464.02

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 30 / 2014

Transaction ID : SA11AI.35352

Amount of Each Receipt this Period

319.80

In-kind - Travel

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

919.80

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

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NAME OF COMMITTEE (In Full)

**FREEDOMWORKS FOR AMERICA**

Full Name (Last, First, Middle Initial)

## **A. Freedomworks, Inc.**

Mailing Address 400 N Capitol St., NW  
Suite 735

City State Zip Code  
Washington DC 20001

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234287.57

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 30 / 2014

Transaction ID : SA11AI.35517

Amount of Each Receipt this Period

13823.55

In-kind - Travel

Full Name (Last, First, Middle Initial)

## **B. Freedomworks, Inc.**

Mailing Address 400 N Capitol St., NW  
Suite 735

City State Zip Code  
Washington DC 20001

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235537.57

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 31 / 2014

Transaction ID : SA11AI.35353

Amount of Each Receipt this Period

1250.00

In-kind - Equipment Usage

Full Name (Last, First, Middle Initial)

## **C. Mary Futchik**

Mailing Address 8665 Bay Colony Drive #1703

City State Zip Code  
Naples FL 34108

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 16 / 2014

Transaction ID : SA11AI.33477

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

15323.55

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

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NAME OF COMMITTEE (In Full)

**FREEDOMWORKS FOR AMERICA**

Full Name (Last, First, Middle Initial)

**A. Mr. Bruce Garland**

Mailing Address 932 Sconnelltown Rd

City

West Chester

State

PA

Zip Code

19382

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Info Requested

Occupation

Info Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

05 / 22 / 2014

Transaction ID : SA11AI.33488

Amount of Each Receipt this Period

2000.00

Full Name (Last, First, Middle Initial)

**B. Mrs. Bonnie Garner**

Mailing Address 326 West 3rd South

City

Rexburg

State

ID

Zip Code

83440

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Arc Power, Inc

Occupation

MacHinest Mechanic

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

05 / 14 / 2014

Transaction ID : SA11AI.33489

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**C. Connie Garrett**

Mailing Address 14505 Valley View Drive

City

Skiatook

State

OK

Zip Code

74070

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Wsa Sales Company, Inc.

Occupation

General Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

05 / 08 / 2014

Transaction ID : SA11AI.33492

Amount of Each Receipt this Period

15.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

2515.00

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

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NAME OF COMMITTEE (In Full)

FREEDOMWORKS FOR AMERICA

Full Name (Last, First, Middle Initial)

**A. Daramana Gata**

Mailing Address 2400 Westridge Dr

City State Zip Code  
 Plano TX 75075

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation  
 Unemployed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 05 / 03 / 2014

Transaction ID : SA11AI.33495

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B. Carolyn Gerwin**

Mailing Address 705 S Locust St

City State Zip Code  
 Pontiac IL 61764

FEC ID number of contributing federal political committee.

C

Name of Employer

Carolyn K. Gerwin Attorney at Law

Occupation  
 Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 05 / 02 / 2014

Transaction ID : SA11AI.33506

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**C. Earl Gilmartin**

Mailing Address 357 W 200 N

City State Zip Code  
 Jerome ID 83338

FEC ID number of contributing federal political committee.

C

Name of Employer

Commercial Creamery

Occupation  
 Engineer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2695.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 05 / 01 / 2014

Transaction ID : SA11AI.33525

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)..... ►

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

650.00



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

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NAME OF COMMITTEE (In Full)

**FREEDOMWORKS FOR AMERICA**

Full Name (Last, First, Middle Initial)

**A. Earl Gilmartin**

Mailing Address 357 W 200 N

City

Jerome

State

ID

Zip Code

83338

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Commercial Creamery

Occupation

Engineer

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

2720.00

Date of Receipt

05 / 29 / 2014

Transaction ID : SA11AI.33526

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**B. Ms. Lise Goga**

Mailing Address 95-1089 Paemoku Pl

City

Mililani

State

HI

Zip Code

96789

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / 12 / 2014

Transaction ID : SA11AI.33540

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

**C. Mrs. Marilyn Hayden**

Mailing Address 10306 E Calle De Las Brisas

City

Scottsdale

State

AZ

Zip Code

85255

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

50000.00

Date of Receipt

05 / 05 / 2014

Transaction ID : SA11AI.33659

Amount of Each Receipt this Period

50000.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

50325.00

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

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NAME OF COMMITTEE (In Full)

**FREEDOMWORKS FOR AMERICA**

Full Name (Last, First, Middle Initial)

**A. Mr. Ron Hill**

Mailing Address 16520 Ellen Court

City

Hagerstown

State

IN

Zip Code

47346

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

05 / 16 / 2014

Transaction ID : SA11AI.33706

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B. Mr. Conway Ivy**

Mailing Address PO Box 1408

City

Beaufort

State

SC

Zip Code

29901

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Conway Ivy

Occupation

Investor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

05 / 30 / 2014

Transaction ID : SA11AI.33803

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. Mr. Kenneth Jackson**

Mailing Address 2555 Mercedes Dr

City

Fort Lauderdale

State

FL

Zip Code

33316

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Jackson Land Development

Occupation

Construction

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / 23 / 2014

Transaction ID : SA11AI.33813

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

1600.00

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

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NAME OF COMMITTEE (In Full)

**FREEDOMWORKS FOR AMERICA**

Full Name (Last, First, Middle Initial)

**A. Mr. William Jellison**

Mailing Address 531 Ne 49th St

City

Oakland Park

State

FL

Zip Code

33334

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

05 / 01 / 2014

Transaction ID : SA11AI.33832

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B. Mr. Rob Johnson**

Mailing Address 7936 Tiger Lily Dr

City

Naples

State

FL

Zip Code

34113

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Rob Johnson

Occupation

Finance

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

05 / 02 / 2014

Transaction ID : SA11AI.33853

Amount of Each Receipt this Period

2000.00

Full Name (Last, First, Middle Initial)

**C. Diane Kampe**

Mailing Address PO Box 3453

City

Half Moon Bay

State

CA

Zip Code

94019

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Info Requested

Occupation

Info Requested

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

700.00

Date of Receipt

05 / 06 / 2014

Transaction ID : SA11AI.33887

Amount of Each Receipt this Period

700.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

2800.00

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

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NAME OF COMMITTEE (In Full)

**FREEDOMWORKS FOR AMERICA**

Full Name (Last, First, Middle Initial)

**A. Mr. Douglas Kasai**

Mailing Address 2943 Silva Street

City State Zip Code  
Lakewood CA 90712

FEC ID number of contributing  
federal political committee.

C

Name of Employer

L.a.u.s.d.

Occupation

Special Education Teacher

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 26 / 2014

Transaction ID : SA11AI.33891

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B. Cary Katz**

Mailing Address 9021 Grove Crest Ln

City State Zip Code  
Las Vegas NV 89134

FEC ID number of contributing  
federal political committee.

C

Name of Employer

College Loan Corporation

Occupation

Board Member

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

100000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 23 / 2014

Transaction ID : SA11AI.33896

Amount of Each Receipt this Period

50000.00

Full Name (Last, First, Middle Initial)

**C. Dr. Ray Kirk**

Mailing Address 3756 Westerman St.

City State Zip Code  
Houston TX 77005

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Houston Radiology Associates

Occupation

Staff Radiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 02 / 2014

Transaction ID : SA11AI.33930

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

50600.00

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

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NAME OF COMMITTEE (In Full)

**FREEDOMWORKS FOR AMERICA**

Full Name (Last, First, Middle Initial)

**A. Barbara Kleimola**

Mailing Address 1149 Golf Club Lane

City State Zip Code  
 Crossville TN 38571

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 05 / 16 / 2014

Transaction ID : SA11AI.33938

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**B. Mr. John Klepper**

Mailing Address 923 Hampton Road

City State Zip Code  
 Hayward CA 94541

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 05 / 01 / 2014

Transaction ID : SA11AI.33940

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**C. Ms. Ethel Kurtz**

Mailing Address 11106 Oakmont Ct

City State Zip Code  
 Fort Myers FL 33908

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 05 / 02 / 2014

Transaction ID : SA11AI.33990

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

650.00

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

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NAME OF COMMITTEE (In Full)

**FREEDOMWORKS FOR AMERICA**

Full Name (Last, First, Middle Initial)

**A. Mr. David L. Light**

Mailing Address 301 Mayerling Dr

City

Houston

State

TX

Zip Code

77024

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

05 / 02 / 2014

Transaction ID : SA11AI.34090

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. Fern Love**

Mailing Address 793 Fm 2161

City

Panhandle

State

TX

Zip Code

79068

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Homemaker

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

05 / 16 / 2014

Transaction ID : SA11AI.34126

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C. Fern Love**

Mailing Address 793 Fm 2161

City

Panhandle

State

TX

Zip Code

79068

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Homemaker

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

400.00

Date of Receipt

05 / 21 / 2014

Transaction ID : SA11AI.34127

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

1200.00

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

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NAME OF COMMITTEE (In Full)

**FREEDOMWORKS FOR AMERICA**

Full Name (Last, First, Middle Initial)

**A. Fern Love**

Mailing Address 793 Fm 2161

City

Panhandle

State

TX

Zip Code

79068

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Homemaker

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

425.00

Date of Receipt

05 / 29 / 2014

Transaction ID : SA11AI.34125

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**B. Fern Love**

Mailing Address 793 Fm 2161

City

Panhandle

State

TX

Zip Code

79068

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Homemaker

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

475.00

Date of Receipt

05 / 29 / 2014

Transaction ID : SA11AI.34128

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**C. Fern Love**

Mailing Address 793 Fm 2161

City

Panhandle

State

TX

Zip Code

79068

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Homemaker

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / 29 / 2014

Transaction ID : SA11AI.34129

Amount of Each Receipt this Period

25.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

100.00

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

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NAME OF COMMITTEE (In Full)

**FREEDOMWORKS FOR AMERICA**

Full Name (Last, First, Middle Initial)

**A. Mrs. Ann Lucke**

Mailing Address 4570 Coz-smith Rd

City State Zip Code  
Mason OH 45040

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Info Requested

Info Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 08 / 2014

Transaction ID : SA11AI.34134

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**B. Mr. Henry Luebke**

Mailing Address 28828 481st Ave

City State Zip Code  
Canton SD 57013

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Info Requested

Info Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 27 / 2014

Transaction ID : SA11AI.34136

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**C. Mr. Joseph Magoun**

Mailing Address 124 Lake Park Dr

City State Zip Code  
Hendersonville TN 37075

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Woebegone

Physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 06 / 2014

Transaction ID : SA11AI.34150

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

400.00



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

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NAME OF COMMITTEE (In Full)

**FREEDOMWORKS FOR AMERICA**

Full Name (Last, First, Middle Initial)

**A. Paula Marrie**

Mailing Address 4639 Shull Rd

City

Gahanna

State

OH

Zip Code

43230

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Gahanna Animal Hospital

Occupation

Veterinarian

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

275.00

Date of Receipt

05 / 16 / 2014

Transaction ID : SA11AI.34167

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B. Paula Marrie**

Mailing Address 4639 Shull Rd

City

Gahanna

State

OH

Zip Code

43230

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Gahanna Animal Hospital

Occupation

Veterinarian

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

05 / 16 / 2014

Transaction ID : SA11AI.34168

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**C. Mr. Herman McBride**

Mailing Address Po Box 491

14600 St. Rt. 65

City

Jackson Center

State

OH

Zip Code

45334

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Rising Sun Express

Occupation

Owner

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1450.00

Date of Receipt

05 / 02 / 2014

Transaction ID : SA11AI.34215

Amount of Each Receipt this Period

200.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

325.00

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

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NAME OF COMMITTEE (In Full)

**FREEDOMWORKS FOR AMERICA**

Full Name (Last, First, Middle Initial)

**A. Mr. Herman McBride**

Mailing Address Po Box 491

14600 St. Rt. 65

City

Jackson Center

State

OH

Zip Code

45334

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Rising Sun Express

Occupation

Owner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1700.00

Date of Receipt

05 / 28 / 2014

Transaction ID : SA11AI.34216

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**B. David McCarthy**

Mailing Address 9118 Oak Hills Ave.

City

Bakersfield

State

CA

Zip Code

93312

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Kern Co. Fire Dept.

Occupation

Firefighter (retired)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

05 / 15 / 2014

Transaction ID : SA11AI.34220

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**C. Lee McDaris**

Mailing Address 1108 Appalachee Dr.

City

Huntsville

State

AL

Zip Code

35801

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Crown Headache

Occupation

Physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / 02 / 2014

Transaction ID : SA11AI.34231

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

1000.00

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

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

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NAME OF COMMITTEE (In Full)

**FREEDOMWORKS FOR AMERICA**

Full Name (Last, First, Middle Initial)

**A. Lee McDaris**

Mailing Address 1108 Appalachee Dr.

City State Zip Code  
Huntsville AL 35801

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Crown Headache

Occupation

Physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

05 / 02 / 2014

**Transaction ID : SA11AI.34232**

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**B. Mrs. Marina McGee**

Mailing Address 4720 E. Melinda Lane

City State Zip Code  
Phoenix AZ 85050

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

05 / 05 / 2014

**Transaction ID : SA11AI.34235**

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**C. Mr. Gregory McNece**

Mailing Address PO Box 1830

City State Zip Code  
Davis CA 95617

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Davisville Properties, Inc.

Occupation

Vp

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

05 / 16 / 2014

**Transaction ID : SA11AI.34252**

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

800.00

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

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NAME OF COMMITTEE (In Full)

FREEDOMWORKS FOR AMERICA

Full Name (Last, First, Middle Initial)

A. Mr. Gregory McNece

Mailing Address PO Box 1830

City State Zip Code  
 Davis CA 95617

FEC ID number of contributing federal political committee.

C

Name of Employer  
 Davisville Properties, Inc.

Occupation  
 Vp

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 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 State Zip Code  
 Gulf Breeze FL 32563

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation  
 Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 05 05 2014

Transaction ID : SA11AI.34273

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

C. Mr. Loren J. Miller

Mailing Address 1952 Scenic Gulf Dr Unit 205

City State Zip Code  
 Miramar Beach FL 32550

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation  
 Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2750.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 05 09 2014

Transaction ID : SA11AI.34300

Amount of Each Receipt this Period

750.00

SUBTOTAL of Receipts This Page (optional)..... ►

5950.00

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

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

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NAME OF COMMITTEE (In Full)

**FREEDOMWORKS FOR AMERICA**

Full Name (Last, First, Middle Initial)

**A. Nancy Miller**

Mailing Address 132 Hyland Road

City

Monticello

State

AR

Zip Code

71655

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

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

Monticello

State

AR

Zip Code

71655

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

05 / 08 / 2014

Transaction ID : SA11AI.34305

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**C. Nancy Miller**

Mailing Address 132 Hyland Road

City

Monticello

State

AR

Zip Code

71655

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

350.00

Date of Receipt

05 / 08 / 2014

Transaction ID : SA11AI.34306

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

200.00

**SCHEDULE A (FEC Form 3X)****ITEMIZED RECEIPTS**Use separate schedule(s)  
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|                                         |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| <input type="checkbox"/> 13             | <input type="checkbox"/> 14  | <input type="checkbox"/> 15  | <input type="checkbox"/> 16 |
| <input type="checkbox"/> 17             |                              |                              |                             |

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NAME OF COMMITTEE (In Full)

**FREEDOMWORKS FOR AMERICA**

Full Name (Last, First, Middle Initial)

**A. Nancy Miller**

Mailing Address 132 Hyland Road

City

Monticello

State

AR

Zip Code

71655

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

400.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05    | / | 17    | / | 2014        |

Transaction ID : SA11AI.34303

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**B. Martha Montez**

Mailing Address 84134 Tera Vista

City

Coachella

State

CA

Zip Code

92236

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Fersinius

Janitor

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

240.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05    | / | 03    | / | 2014        |

Transaction ID : SA11AI.34324

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

**C. Vicki Montgomery**

Mailing Address 801 Old River Rd

City

Naches

State

WA

Zip Code

98937

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

225.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05    | / | 10    | / | 2014        |

Transaction ID : SA11AI.34330

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)..... ►

115.00

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

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

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NAME OF COMMITTEE (In Full)

**FREEDOMWORKS FOR AMERICA**

Full Name (Last, First, Middle Initial)

## **A. Vicki Montgomery**

Mailing Address 801 Old River Rd

City State Zip Code  
Naches WA 98937

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 10 / 2014

Transaction ID : SA11AI.34331

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

## **B. Vicki Montgomery**

Mailing Address 801 Old River Rd

City State Zip Code  
Naches WA 98937

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 10 / 2014

Transaction ID : SA11AI.34332

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

## **C. Vicki Montgomery**

Mailing Address 801 Old River Rd

City State Zip Code  
Naches WA 98937

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 10 / 2014

Transaction ID : SA11AI.34333

Amount of Each Receipt this Period

25.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

75.00

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

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NAME OF COMMITTEE (In Full)

**FREEDOMWORKS FOR AMERICA**

Full Name (Last, First, Middle Initial)

## **A. Vicki Montgomery**

Mailing Address 801 Old River Rd

City

Naches

State

WA

Zip Code

98937

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

325.00

Date of Receipt

05 / 10 / 2014

Transaction ID : SA11AI.34334

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

## **B. Richard Mudge**

Mailing Address 1291 Beaupre Ave.

City

Madison Hts

State

MI

Zip Code

48071

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

05 / 14 / 2014

Transaction ID : SA11AI.34367

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

## **C. Mr. Gary Mueller**

Mailing Address 304 Salem Rd

City

Victoria

State

TX

Zip Code

77904

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Info Requested

Info Requested

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

400.00

Date of Receipt

05 / 14 / 2014

Transaction ID : SA11AI.34368

Amount of Each Receipt this Period

200.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

475.00



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

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NAME OF COMMITTEE (In Full)

FREEDOMWORKS FOR AMERICA

Full Name (Last, First, Middle Initial)

A. Mrs. Elana Muir

Mailing Address 167 French Broad Rd

City State Zip Code  
 Hertford NC 27944

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Info Requested

Info Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 05 05 2014

Transaction ID : SA11AI.34370

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

B. Mr. Terence Murphree

Mailing Address 1330 Enclave Pkwy

City State Zip Code  
 Houston TX 77077

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

United Steel Structures

Construction Exec.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

25000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 05 02 2014

Transaction ID : SA11AI.34380

Amount of Each Receipt this Period

25000.00

Full Name (Last, First, Middle Initial)

C. Mr. John Murray

Mailing Address 3560 Bloomfield Club Dr

City State Zip Code  
 Bloomfield Hills MI 48301

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 05 02 2014

Transaction ID : SA11AI.34382

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)..... ►

25800.00

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

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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**FREEDOMWORKS FOR AMERICA**

Full Name (Last, First, Middle Initial)

## **A. Dave Napier**

Mailing Address 1012 W Bella Casa Dr

City State Zip Code  
Pueblo West CO 81007

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Dave Napier

Occupation

Restaurant.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 31 / 2014

Transaction ID : SA11AI.34386

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

## **B. Odd Lamps, LLC**

Mailing Address 12076 92nd Ave N

City State Zip Code  
Maple Grove MN 55369

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 09 / 2014

Transaction ID : SA11AI.27197

Amount of Each Receipt this Period

1750.00

In-kind - Online Ads-IE-Dinsdale

Full Name (Last, First, Middle Initial)

## **C. Marlene Olsen**

Mailing Address 1050 Fleetwood Drive

City State Zip Code  
San Jose CA 95120

FEC ID number of contributing  
federal political committee.

C

Name of Employer

N/A

Occupation

Disabled

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 16 / 2014

Transaction ID : SA11AI.34451

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

1900.00

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

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NAME OF COMMITTEE (In Full)

**FREEDOMWORKS FOR AMERICA**

Full Name (Last, First, Middle Initial)

## **A. David Peterick**

Mailing Address 422 Ne Camelot Dr.

City State Zip Code  
 Port St. Lucie FL 34983

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 05 / 01 / 2014

**Transaction ID : SA11AI.34533**

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

## **B. Ms. Joann Peterson**

Mailing Address PO Box 1392

City State Zip Code  
 East Dennis MA 02641

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Joann Peterson

Occupation  
Homemaker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 05 / 02 / 2014

**Transaction ID : SA11AI.34537**

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

## **C. Donald Randolph**

Mailing Address 236 S Santa Cruz Ave. Ste D

City State Zip Code  
 Modesto CA 95354

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Donald Randolph

Occupation  
Owner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 05 / 14 / 2014

**Transaction ID : SA11AI.34617**

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

550.00

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

Use separate schedule(s)  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

FREEDOMWORKS FOR AMERICA

Full Name (Last, First, Middle Initial)

A. Dr. Thomas Rathmann

Mailing Address 339 E Greens Dr

City State Zip Code  
 Baton Rouge LA 70810

FEC ID number of contributing federal political committee.

C

Name of Employer

Thomas Rathmann

Occupation

Chiropractor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 05 / 13 / 2014

Transaction ID : SA11AI.34621

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. Tom Remmey

Mailing Address 970 Cove Point Ln.

City State Zip Code  
 Tega Cay SC 29708

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 05 / 16 / 2014

Transaction ID : SA11AI.34640

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

C. Tom Remmey

Mailing Address 970 Cove Point Ln.

City State Zip Code  
 Tega Cay SC 29708

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

345.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 05 / 28 / 2014

Transaction ID : SA11AI.34639

Amount of Each Receipt this Period

35.00

SUBTOTAL of Receipts This Page (optional)..... ►

235.00

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

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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**FREEDOMWORKS FOR AMERICA**

Full Name (Last, First, Middle Initial)

## **A. Patricia Rodman**

Mailing Address 5379 East Lake Road

City State Zip Code  
 Conesus NY 14435

FEC ID number of contributing  
federal political committee.

C

Name of Employer Occupation  
 Diocese of Rochester Director of Religious Education

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 05 / 07 / 2014

Transaction ID : SA11AI.34697

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

## **B. Stephen Ronan**

Mailing Address 1178 W. Purchase Rd

City State Zip Code  
 Southbury CT 06488

FEC ID number of contributing  
federal political committee.

C

Name of Employer Occupation  
 Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 05 / 16 / 2014

Transaction ID : SA11AI.34704

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

## **C. Mr. David Rupp**

Mailing Address 10193 Sage Creek Dr

City State Zip Code  
 Galena OH 43021

FEC ID number of contributing  
federal political committee.

C

Name of Employer Occupation  
 David Rupp Cpa

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 05 / 04 / 2014

Transaction ID : SA11AI.34737

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

1075.00

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

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NAME OF COMMITTEE (In Full)

**FREEDOMWORKS FOR AMERICA**

Full Name (Last, First, Middle Initial)

**A. Mr. John Santner**

Mailing Address 5399 Playa Vista Dr E307

City State Zip Code  
Playa Vista CA 90094

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Retired

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

05 / 19 / 2014

Transaction ID : SA11AI.34767

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**B. Ms. Lorene Saruwatari**

Mailing Address 512 Launa Ln

City State Zip Code  
Arroyo Grande CA 93420

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Coastal Phoenix Inc

Bookkeeper

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

9300.00

Date of Receipt

05 / 06 / 2014

Transaction ID : SA11AI.34772

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C. Ms. Lorene Saruwatari**

Mailing Address 512 Launa Ln

City State Zip Code  
Arroyo Grande CA 93420

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Coastal Phoenix Inc

Bookkeeper

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

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)..... ►

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

Use separate schedule(s)  
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|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

FREEDOMWORKS FOR AMERICA

Full Name (Last, First, Middle Initial)

**A. Ms. Lorene Saruwatari**

Mailing Address 512 Launa Ln

|               |       |          |
|---------------|-------|----------|
| City          | State | Zip Code |
| Arroyo Grande | CA    | 93420    |

FEC ID number of contributing federal political committee.

C

Name of Employer

Coastal Phoenix Inc

Occupation

Bookkeeper

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

9600.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05    | / | 06    | / | 2014        |

Transaction ID : SA11AI.34774

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

**B. Ms. Lorene Saruwatari**

Mailing Address 512 Launa Ln

|               |       |          |
|---------------|-------|----------|
| City          | State | Zip Code |
| Arroyo Grande | CA    | 93420    |

FEC ID number of contributing federal political committee.

C

Name of Employer

Coastal Phoenix Inc

Occupation

Bookkeeper

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10100.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05    | / | 06    | / | 2014        |

Transaction ID : SA11AI.34775

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**C. Ms. Lorene Saruwatari**

Mailing Address 512 Launa Ln

|               |       |          |
|---------------|-------|----------|
| City          | State | Zip Code |
| Arroyo Grande | CA    | 93420    |

FEC ID number of contributing federal political committee.

C

Name of Employer

Coastal Phoenix Inc

Occupation

Bookkeeper

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10220.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05    | / | 06    | / | 2014        |

Transaction ID : SA11AI.34776

Amount of Each Receipt this Period

120.00

SUBTOTAL of Receipts This Page (optional)..... ►

820.00

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

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

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NAME OF COMMITTEE (In Full)

**FREEDOMWORKS FOR AMERICA**

Full Name (Last, First, Middle Initial)

## **A. Steven Schumacher**

Mailing Address 522 County Road 600n

City

Neoga

State

IL

Zip Code

62447

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Effingham Taxi

Occupation

Business Owner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 15 / 2014

**Transaction ID : SA11AI.34817**

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

## **B. Robert Serritella**

Mailing Address 5 Campden Lane

City

Commack

State

NY

Zip Code

11725

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Info Requested

Occupation

Info Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 19 / 2014

**Transaction ID : SA11AI.34839**

Amount of Each Receipt this Period

75.00

Full Name (Last, First, Middle Initial)

## **C. Ms. Katherine Siller**

Mailing Address 3010 River Forest Dr

City

Richmond

State

TX

Zip Code

77406

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Homemaker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 02 / 2014

**Transaction ID : SA11AI.34866**

Amount of Each Receipt this Period

200.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

325.00



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

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NAME OF COMMITTEE (In Full)

**FREEDOMWORKS FOR AMERICA**

Full Name (Last, First, Middle Initial)

**A. Frank Slavik**

Mailing Address 6232 Durban Dr

City

Galloway

State

OH

Zip Code

43119

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Frank Slavik

Occupation

Restaurateur

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

05 / 04 / 2014

Transaction ID : SA11AI.34883

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**B. Frank Slavik**

Mailing Address 6232 Durban Dr

City

Galloway

State

OH

Zip Code

43119

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Frank Slavik

Occupation

Restaurateur

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

05 / 16 / 2014

Transaction ID : SA11AI.34882

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**C. Mrs. Margaret K. Smith**

Mailing Address 9732 Lindsey Blake Ln

City

Great Falls

State

VA

Zip Code

22066

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

350.00

Date of Receipt

05 / 29 / 2014

Transaction ID : SA11AI.34894

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

200.00

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

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NAME OF COMMITTEE (In Full)

**FREEDOMWORKS FOR AMERICA**

Full Name (Last, First, Middle Initial)

## **A. Mrs. Wendy Snell**

Mailing Address 2 Thornblade Court

City State Zip Code  
Durham NC 27712

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 07 / 2014

**Transaction ID : SA11AI.34908**

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

## **B. Karen Stokes**

Mailing Address 117 Osteen Hill Rd

City State Zip Code  
Pelzer SC 29669

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Karen Stokes

Occupation

Realtor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 30 / 2014

**Transaction ID : SA11AI.34981**

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

## **C. Ms. Patty Stover**

Mailing Address 159 Denny Way Apt 509

City State Zip Code  
Seattle WA 98109

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Gladys Rubinstein

Occupation

Bookkeeper

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

209.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 05 / 2014

**Transaction ID : SA11AI.34984**

Amount of Each Receipt this Period

109.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

1209.00

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

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NAME OF COMMITTEE (In Full)

FREEDOMWORKS FOR AMERICA

Full Name (Last, First, Middle Initial)

A. Mr. Frederick Strehler

Mailing Address PO Box 658

City

Naalehu

State

HI

Zip Code

96772

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Info Requested

Info Requested

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 09 / 2014

Transaction ID : SA11AI.34991

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Cary Strickland

Mailing Address 2700 Shady Hill Ct

City

Grapevine

State

TX

Zip Code

76051

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Southwest Airlines

Pilot

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 16 / 2014

Transaction ID : SA11AI.34992

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. Lynne Swaine

Mailing Address 10475 Manitou Beach Dr Ne

City

Bainbridge Island

State

WA

Zip Code

98110

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 05 / 2014

Transaction ID : SA11AI.35009

Amount of Each Receipt this Period

75.00

SUBTOTAL of Receipts This Page (optional)..... ►

825.00

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

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

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NAME OF COMMITTEE (In Full)

FREEDOMWORKS FOR AMERICA

Full Name (Last, First, Middle Initial)

**A. Ms. Irene Talley**

Mailing Address 11357 Rick Circle

City State Zip Code  
South Jordan UT 84095

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 01 / 2014

Transaction ID : SA11AI.35024

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

**B. Sean Thomas**

Mailing Address 101 Whitney Ct

City State Zip Code  
Aledo TX 76008

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Owner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 16 / 2014

Transaction ID : SA11AI.35055

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C. Sean Thomas**

Mailing Address 101 Whitney Ct

City State Zip Code  
Aledo TX 76008

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Owner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 16 / 2014

Transaction ID : SA11AI.35056

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)..... ►

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

500.00

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

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NAME OF COMMITTEE (In Full)

**FREEDOMWORKS FOR AMERICA**

Full Name (Last, First, Middle Initial)

**A. Ralph Tucker**

Mailing Address 2539 Seven Pines Road

City State Zip Code  
Greenville NC 27834

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Ralph Tucker

Occupation

Farmer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 06 / 2014

**Transaction ID : SA11AI.35102**

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**B. Mr. John Vaughn**

Mailing Address 170 Silver Fox

City State Zip Code  
Marshall TX 75670

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Info Requested

Occupation

Info Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 04 / 2014

**Transaction ID : SA11AI.35127**

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**C. Patricia Verderese**

Mailing Address 14 Westchester Drive

City State Zip Code  
Auburn MA 01501

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 01 / 2014

**Transaction ID : SA11AI.35137**

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

350.00

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

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|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

FREEDOMWORKS FOR AMERICA

Full Name (Last, First, Middle Initial)

**A. Patricia Verderese**

Mailing Address 14 Westchester Drive

|        |       |          |
|--------|-------|----------|
| City   | State | Zip Code |
| Auburn | MA    | 01501    |

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05    | / | 01    | / | 2014        |

Transaction ID : SA11AI.35138

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**B. Mrs. Linda Verhey**

Mailing Address 4170 N Marine Dr

|         |       |          |
|---------|-------|----------|
| City    | State | Zip Code |
| Chicago | IL    | 60613    |

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Info Requested

Info Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05    | / | 09    | / | 2014        |

Transaction ID : SA11AI.35139

Amount of Each Receipt this Period

35.00

Full Name (Last, First, Middle Initial)

**C. Theresa Vinas**

Mailing Address 50 Harbour Drive South

|             |       |          |
|-------------|-------|----------|
| City        | State | Zip Code |
| Ocean Ridge | FL    | 33435    |

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Rn

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05    | / | 07    | / | 2014        |

Transaction ID : SA11AI.35149

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)..... ►

335.00

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 55 OF 207

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**FREEDOMWORKS FOR AMERICA**

Full Name (Last, First, Middle Initial)

## **A. Mr. Larry Walsh**

Mailing Address 2321 Saint Anthonys Pl

City State Zip Code  
 Sioux City IA 51108

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Info Requested

Info Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 05 / 05 / 2014

**Transaction ID : SA11AI.35181**

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

## **B. Mr. Ed Whitesides**

Mailing Address 7719 Barkers Bend Drive

City State Zip Code  
 Murrayville GA 30564

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 05 / 19 / 2014

**Transaction ID : SA11AI.35234**

Amount of Each Receipt this Period

150.00

Full Name (Last, First, Middle Initial)

## **C. Mr. Scott Wilcox**

Mailing Address 3618 Rampart St

City State Zip Code  
 Bakersfield CA 93306

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Heather Wilcox

Personal Caregiver

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 05 / 05 / 2014

**Transaction ID : SA11AI.35240**

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

500.00

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 56 OF 207

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**FREEDOMWORKS FOR AMERICA**

Full Name (Last, First, Middle Initial)

**A. Mr. Scott Wilcox**

Mailing Address 3618 Rampart St

City State Zip Code  
Bakersfield CA 93306

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Heather Wilcox

Occupation

Personal Caregiver

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 15 / 2014

**Transaction ID : SA11AI.35241**

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**B. Ms. Joan Winchell**

Mailing Address 8978 Spanish Ridge Avenue Suite 10

City State Zip Code  
Las Vegas NV 89148

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 01 / 2014

**Transaction ID : SA11AI.35268**

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

**C. Mr. Earle Wymer**

Mailing Address 3531 Hanover Ave

City State Zip Code  
Richmond VA 23221

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 14 / 2014

**Transaction ID : SA11AI.35306**

Amount of Each Receipt this Period

300.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

5350.00



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

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

FOR LINE NUMBER:  
(check only one)

PAGE 57 OF 207

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**FREEDOMWORKS FOR AMERICA**

Full Name (Last, First, Middle Initial)

**A. Laura Zulueta**

Mailing Address 2008 Greyhawk Place

City State Zip Code  
 Apex NC 27539

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
Homemaker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 05 17 2014

**Transaction ID : SA11AI.35335**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City State Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

250.00

215352.35

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

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

FOR LINE NUMBER: PAGE 58 OF 207

(check only one)

|                              |                              |                                        |                             |
|------------------------------|------------------------------|----------------------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c           | <input type="checkbox"/> 12 |
| <input type="checkbox"/> 13  | <input type="checkbox"/> 14  | <input checked="" type="checkbox"/> 15 | <input type="checkbox"/> 16 |
|                              |                              |                                        | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)

FREEDOMWORKS FOR AMERICA

Full Name (Last, First, Middle Initial)

**A. Freedomworks, Inc.**

Mailing Address 400 N Capitol St., NW  
Suite 735

City Washington State DC Zip Code 20001

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220144.22

Date of Receipt

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

**B.**

Mailing Address

City State Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)..... ►

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

96700.94

96700.94

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 59 OF 207

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

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NAME OF COMMITTEE (In Full)

**FREEDOMWORKS FOR AMERICA**

Full Name (Last, First, Middle Initial)

**A. Acxiom**

Date of Disbursement

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 05    |   | 30    |   | 2014      |

Mailing Address 4057 Collections Center Dr.

|         |       |          |
|---------|-------|----------|
| City    | State | Zip Code |
| Chicago | IL    | 60693    |

Purpose of Disbursement  
PAC List Rental

003

Candidate Name

Category/  
Type**Transaction ID : SB21B.35356**

Amount of Each Disbursement this Period

|         |
|---------|
| 7696.47 |
|---------|

|                |                                                                                                         |
|----------------|---------------------------------------------------------------------------------------------------------|
| Office Sought: | <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |
| State:         | District:                                                                                               |

|                   |                                                                   |
|-------------------|-------------------------------------------------------------------|
| Disbursement For: | <input type="checkbox"/> Primary <input type="checkbox"/> General |
|                   | <input type="checkbox"/> Other (specify) ▼                        |

Full Name (Last, First, Middle Initial)

**B. Acxiom**

Date of Disbursement

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 05    |   | 30    |   | 2014      |

Mailing Address 4057 Collections Center Dr.

|         |       |          |
|---------|-------|----------|
| City    | State | Zip Code |
| Chicago | IL    | 60693    |

Purpose of Disbursement  
PAC List Rental

003

Candidate Name

Category/  
Type**Transaction ID : SB21B.35359**

Amount of Each Disbursement this Period

|         |
|---------|
| 2605.29 |
|---------|

|                |                                                                                                         |
|----------------|---------------------------------------------------------------------------------------------------------|
| Office Sought: | <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |
| State:         | District:                                                                                               |

|                   |                                                                   |
|-------------------|-------------------------------------------------------------------|
| Disbursement For: | <input type="checkbox"/> Primary <input type="checkbox"/> General |
|                   | <input type="checkbox"/> Other (specify) ▼                        |

Full Name (Last, First, Middle Initial)

**C. Acxiom**

Date of Disbursement

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 05    |   | 30    |   | 2014      |

Mailing Address 4057 Collections Center Dr.

|         |       |          |
|---------|-------|----------|
| City    | State | Zip Code |
| Chicago | IL    | 60693    |

Purpose of Disbursement  
PAC List Rental

003

Candidate Name

Category/  
Type**Transaction ID : SB21B.35361**

Amount of Each Disbursement this Period

|          |
|----------|
| 13529.09 |
|----------|

|                |                                                                                                         |
|----------------|---------------------------------------------------------------------------------------------------------|
| Office Sought: | <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |
| State:         | District:                                                                                               |

|                   |                                                                   |
|-------------------|-------------------------------------------------------------------|
| Disbursement For: | <input type="checkbox"/> Primary <input type="checkbox"/> General |
|                   | <input type="checkbox"/> Other (specify) ▼                        |

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

|          |
|----------|
| 23830.85 |
|----------|

|  |
|--|
|  |
|--|

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

FREEDOMWORKS FOR AMERICA

00:

40.64

00

MM / DD / YYYY

323.00

00'

05 / 16 / 2014

| Age Group | Number of people |
|-----------|------------------|
| 13-17     | 10               |
| 18-24     | 20               |
| 25-34     | 30               |
| 35-44     | 40               |
| 45-54     | 50               |
| 55-64     | 60               |
| 65-74     | 70               |
| 75-84     | 80               |
| 85-94     | 90               |
| 95-104    | 100              |

475.64

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 61 OF 207

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

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NAME OF COMMITTEE (In Full)

**FREEDOMWORKS FOR AMERICA**

Full Name (Last, First, Middle Initial)

**A. Color Craft**

Date of Disbursement

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 05    |   | 09    |   | 2014      |

Mailing Address 22645 Sally Ride Drive

**Transaction ID : SB21B.35371**

|          |       |          |
|----------|-------|----------|
| City     | State | Zip Code |
| Sterling | VA    | 20164    |

Amount of Each Disbursement this Period

Purpose of Disbursement  
PAC Direct Mail Fundraising

003

|          |
|----------|
| 18897.01 |
|----------|

Candidate Name

Category/  
Type

|                |                                    |
|----------------|------------------------------------|
| Office Sought: | <input type="checkbox"/> House     |
|                | <input type="checkbox"/> Senate    |
|                | <input type="checkbox"/> President |

|                   |                                            |                                  |
|-------------------|--------------------------------------------|----------------------------------|
| Disbursement For: | <input type="checkbox"/> Primary           | <input type="checkbox"/> General |
|                   | <input type="checkbox"/> Other (specify) ▼ |                                  |

State: District:

Full Name (Last, First, Middle Initial)

**B. Direct Mail Marketing Group**

Date of Disbursement

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 05    |   | 23    |   | 2014      |

Mailing Address 22780 Indian Creek Dr., Ste. 100

**Transaction ID : SB21B.35373**

|        |       |          |
|--------|-------|----------|
| City   | State | Zip Code |
| Dulles | VA    | 20166    |

Amount of Each Disbursement this Period

Purpose of Disbursement  
Printing/Postage

003

|         |
|---------|
| 2162.37 |
|---------|

Candidate Name

Category/  
Type

|                |                                    |
|----------------|------------------------------------|
| Office Sought: | <input type="checkbox"/> House     |
|                | <input type="checkbox"/> Senate    |
|                | <input type="checkbox"/> President |

|                   |                                            |                                  |
|-------------------|--------------------------------------------|----------------------------------|
| Disbursement For: | <input type="checkbox"/> Primary           | <input type="checkbox"/> General |
|                   | <input type="checkbox"/> Other (specify) ▼ |                                  |

State: District:

Full Name (Last, First, Middle Initial)

**C. Direct Mail Processors, Inc.**

Date of Disbursement

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 05    |   | 16    |   | 2014      |

Mailing Address 1150 Conrad Ct.

**Transaction ID : SB21B.35375**

|            |       |          |
|------------|-------|----------|
| City       | State | Zip Code |
| Hagerstown | MD    | 21740    |

Amount of Each Disbursement this Period

Purpose of Disbursement  
Caging

001

|        |
|--------|
| 935.11 |
|--------|

Candidate Name

Category/  
Type

|                |                                    |
|----------------|------------------------------------|
| Office Sought: | <input type="checkbox"/> House     |
|                | <input type="checkbox"/> Senate    |
|                | <input type="checkbox"/> President |

|                   |                                            |                                  |
|-------------------|--------------------------------------------|----------------------------------|
| Disbursement For: | <input type="checkbox"/> Primary           | <input type="checkbox"/> General |
|                   | <input type="checkbox"/> Other (specify) ▼ |                                  |

State: District:

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

21994.49



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

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

FOR LINE NUMBER:  
(check only one)

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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

**FREEDOMWORKS FOR AMERICA**

Full Name (Last, First, Middle Initial)

## **A. Freedomworks, Inc.**

Mailing Address 400 N Capitol St., NW  
Suite 735

City Washington State DC Zip Code 20001

Purpose of Disbursement  
In-kind - Travel

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

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

Date of Disbursement

M M / D D / Y Y Y Y Y  
05 / 30 / 2014

**Transaction ID : SB21B.35355**

Amount of Each Disbursement this Period

319.80

Full Name (Last, First, Middle Initial)

## **B. Freedomworks, Inc.**

Mailing Address 400 N Capitol St., NW  
Suite 735

City Washington State DC Zip Code 20001

Purpose of Disbursement  
In-kind - Travel

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

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

Date of Disbursement

M M / D D / Y Y Y Y Y  
05 / 30 / 2014

**Transaction ID : SB21B.35518**

Amount of Each Disbursement this Period

13823.55

Full Name (Last, First, Middle Initial)

## **C. Freedomworks, Inc.**

Mailing Address 400 N Capitol St., NW  
Suite 735

City Washington State DC Zip Code 20001

Purpose of Disbursement  
Adust for In Kinds for IE's

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

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

Date of Disbursement

M M / D D / Y Y Y Y Y  
05 / 30 / 2014

**Transaction ID : SB21B.35519**

Amount of Each Disbursement this Period

-13823.55

**SUBTOTAL** of Disbursements This Page (optional)..... ►

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

319.80

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 64 OF 207

☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**FREEDOMWORKS FOR AMERICA**

Full Name (Last, First, Middle Initial)

**A. Freedomworks, Inc.**

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |   |   |
| 0 | 5 |   |   |   | 3 | 1 |   |   |   |   |   | 2 | 0 | 1 | 4 |

Mailing Address 400 N Capitol St., NW  
Suite 735

City Washington State DC Zip Code 20001

Purpose of Disbursement  
In-kind - Equipment Usage

Candidate Name

Category/  
Type**Transaction ID : SB21B.35354**

Amount of Each Disbursement this Period

1250.00

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**B. Freedomworks, Inc.**

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |   |   |
| 0 | 5 |   |   |   | 3 | 1 |   |   |   |   |   | 2 | 0 | 1 | 4 |

Mailing Address 400 N Capitol St., NW  
Suite 735

City Washington State DC Zip Code 20001

Purpose of Disbursement  
Email/Social Media/Printing

Candidate Name

001  
Category/  
Type**Transaction ID : SB21B.35385**

Amount of Each Disbursement this Period

19199.57

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**C. Freedomworks, Inc.**

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |   |   |
| 0 | 5 |   |   |   | 3 | 1 |   |   |   |   |   | 2 | 0 | 1 | 4 |

Mailing Address 400 N Capitol St., NW  
Suite 735

City Washington State DC Zip Code 20001

Purpose of Disbursement  
Email/Social Media/Printing

Candidate Name

001  
Category/  
Type**Transaction ID : SB21B.35387**

Amount of Each Disbursement this Period

7958.46

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

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

28408.03



**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 65 OF 207

☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**FREEDOMWORKS FOR AMERICA**

Full Name (Last, First, Middle Initial)

**A. FTI Consulting Technology LLC**

Mailing Address 909 Commerce Road

City Annapolis State MD Zip Code 21401

Purpose of Disbursement  
Data Storage

001

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y  
05 02 2014**Transaction ID : SB21B.35383**

Amount of Each Disbursement this Period

2115.00

Full Name (Last, First, Middle Initial)

**B. Global Pay**

Mailing Address 10 Glenlake Pkwy, NE

City Atlanta State GA Zip Code 30328

Purpose of Disbursement  
Merchant Fees

001

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y  
05 31 2014**Transaction ID : SB21B.35389**

Amount of Each Disbursement this Period

180.37

Full Name (Last, First, Middle Initial)

**C. Global Pay**

Mailing Address 10 Glenlake Pkwy, NE

City Atlanta State GA Zip Code 30328

Purpose of Disbursement  
Merchant Fees

001

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y  
05 31 2014**Transaction ID : SB21B.35391**

Amount of Each Disbursement this Period

6.01

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

2301.38

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

FREEDOMWORKS FOR AMERICA

### A. Global Pay

001

Category/  
Type

State:  District:

213.25

**B. JW, LLC**

MM / DD / YYYY

001

Category/  
Type

State:  District:

1843.88

### C. Linemark

05 / 09 / 2014

003

Category/  
Type

State:  District:

3370.61

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

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

5427.74

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 67 OF 207

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

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NAME OF COMMITTEE (In Full)

**FREEDOMWORKS FOR AMERICA**

Full Name (Last, First, Middle Initial)

**A. Linemark**

Mailing Address 501 Prince Georges Blvd

|                |       |          |
|----------------|-------|----------|
| City           | State | Zip Code |
| Upper Marlboro | MD    | 20774    |

Purpose of Disbursement  
Printing

Candidate Name

|                |                                                                                                         |
|----------------|---------------------------------------------------------------------------------------------------------|
| Office Sought: | <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |
| State:         | District:                                                                                               |

|                   |                                                                   |
|-------------------|-------------------------------------------------------------------|
| Disbursement For: | <input type="checkbox"/> Primary <input type="checkbox"/> General |
|                   | <input type="checkbox"/> Other (specify) ▼                        |

Date of Disbursement

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 05    |   | 16    |   | 2014      |

**Transaction ID : SB21B.35399**

Amount of Each Disbursement this Period

|        |
|--------|
| 146.54 |
|--------|

Full Name (Last, First, Middle Initial)

**B. O'Connor Consulting Services**

Mailing Address 4770 Howard Place

|                  |       |          |
|------------------|-------|----------|
| City             | State | Zip Code |
| Chesapeake Beach | MD    | 20732    |

Purpose of Disbursement  
Accounting Services

Candidate Name

|                |                                                                                                         |
|----------------|---------------------------------------------------------------------------------------------------------|
| Office Sought: | <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |
| State:         | District:                                                                                               |

|                   |                                                                   |
|-------------------|-------------------------------------------------------------------|
| Disbursement For: | <input type="checkbox"/> Primary <input type="checkbox"/> General |
|                   | <input type="checkbox"/> Other (specify) ▼                        |

Date of Disbursement

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 05    |   | 02    |   | 2014      |

**Transaction ID : SB21B.35401**

Amount of Each Disbursement this Period

|         |
|---------|
| 7095.00 |
|---------|

Full Name (Last, First, Middle Initial)

**C. O'Connor Consulting Services**

Mailing Address 4770 Howard Place

|                  |       |          |
|------------------|-------|----------|
| City             | State | Zip Code |
| Chesapeake Beach | MD    | 20732    |

Purpose of Disbursement  
Accounting Services

Candidate Name

|                |                                                                                                         |
|----------------|---------------------------------------------------------------------------------------------------------|
| Office Sought: | <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |
| State:         | District:                                                                                               |

|                   |                                                                   |
|-------------------|-------------------------------------------------------------------|
| Disbursement For: | <input type="checkbox"/> Primary <input type="checkbox"/> General |
|                   | <input type="checkbox"/> Other (specify) ▼                        |

Date of Disbursement

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 05    |   | 23    |   | 2014      |

**Transaction ID : SB21B.35403**

Amount of Each Disbursement this Period

|         |
|---------|
| 6418.75 |
|---------|

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

|          |
|----------|
| 13660.29 |
|----------|

|  |
|--|
|  |
|--|

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 68 OF 207

☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**FREEDOMWORKS FOR AMERICA**

Full Name (Last, First, Middle Initial)

**A. Odd Lamps, LLC**

Mailing Address 12076 92nd Ave N

City State Zip Code  
Maple Grove MN 55369
Purpose of Disbursement  
In-kind - Online Ads-IE-Dinsdale

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

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

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y  
05 09 2014
**Transaction ID : SB21B.27198**

Amount of Each Disbursement this Period

1750.00

Full Name (Last, First, Middle Initial)

**B. Odd Lamps, LLC**

Mailing Address 12076 92nd Ave N

City State Zip Code  
Maple Grove MN 55369
Purpose of Disbursement  
To adjust for in kind for IE-Dinsdale

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

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

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y  
05 09 2014
**Transaction ID : SB21B.27199**

Amount of Each Disbursement this Period

-1750.00

Full Name (Last, First, Middle Initial)

**C. Patton Boggs, LLP**

Mailing Address 2550 M Street NW

City State Zip Code  
Washington DC 20037
Purpose of Disbursement  
Legal Fees

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

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

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y  
05 02 2014
**Transaction ID : SB21B.35405**

Amount of Each Disbursement this Period

6421.25

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

6421.25

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

FREEDOMWORKS FOR AMERICA

2325.00

3834.19

1536.20

7695.39

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 70 OF 207

☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**FREEDOMWORKS FOR AMERICA**

Full Name (Last, First, Middle Initial)

**A. Rogers & Company**

Mailing Address

City State Zip Code

Purpose of Disbursement  
Accounting Services

001

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y  
05 05 2014**Transaction ID : SB21B.35413**

Amount of Each Disbursement this Period

4063.00

Full Name (Last, First, Middle Initial)

**B. Rogers & Company**

Mailing Address

City State Zip Code

Purpose of Disbursement  
Accounting Services

001

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y  
05 21 2014**Transaction ID : SB21B.35416**

Amount of Each Disbursement this Period

2341.67

Full Name (Last, First, Middle Initial)

**C. Time Warner Cable**

Mailing Address 13820 Sunrise Valley Dr.

City State Zip Code  
Herndon VA 20171Purpose of Disbursement  
Utilities

001

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y  
05 09 2014**Transaction ID : SB21B.35418**

Amount of Each Disbursement this Period

239.90

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

6644.57

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 71 OF 207

☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**FREEDOMWORKS FOR AMERICA**

Full Name (Last, First, Middle Initial)

**A. Time Warner Cable**

Mailing Address 13820 Sunrise Valley Dr.

City Herndon                      State VA                      Zip Code 20171

Purpose of Disbursement  
Utilities

Candidate Name

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

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

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
05                      30                      2014
**Transaction ID : SB21B.35420**

Amount of Each Disbursement this Period

239.90

**B.**

Full Name (Last, First, Middle Initial)

Mailing Address

City                                      State                                      Zip Code

Purpose of Disbursement

Candidate Name

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

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

Date of Disbursement

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

Amount of Each Disbursement this Period

**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City                                      State                                      Zip Code

Purpose of Disbursement

Candidate Name

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

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

Date of Disbursement

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

Amount of Each Disbursement this Period

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

239.90

133341.73

|                                                         |             |                                                                                |                                                                                                                                                                               |
|---------------------------------------------------------|-------------|--------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Full Name of Payee<br><b>7-Eleven-NC</b>                |             | Date of Public Distribution/Dissemination<br>MM / DD / YYYY<br>05 / 05 / 2014  |                                                                                                                                                                               |
| Mailing Address<br>600 Glenwood Ave                     |             | Amount<br>32.18                                                                |                                                                                                                                                                               |
| City<br>Raleigh                                         | State<br>NC | Zip Code<br>27603                                                              | Transaction ID : <b>SE.27081</b><br>Date of Disbursement or Obligation<br>MM / DD / YYYY<br>05 / 05 / 2014                                                                    |
| Purpose of Expenditure<br>IE-Brannon-Travel             |             | Category/<br>Type<br>002                                                       |                                                                                                                                                                               |
| Name of Federal Candidate<br>GREGORY JOSEPH BRANNON     |             | <input checked="" type="checkbox"/> Support<br><input type="checkbox"/> Oppose | Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate<br><input type="checkbox"/> President <input type="checkbox"/> Other (specify) _____ |
| Calendar Year-To-Date<br>Per Election for Office Sought |             | 146031.67                                                                      | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) _____                              |

|                                                           |  |       |
|-----------------------------------------------------------|--|-------|
| (a) SUBTOTAL of Itemized Independent Expenditures.....    |  | 38.60 |
| (b) SUBTOTAL of Unitemized Independent Expenditures ..... |  |       |
| (c) TOTAL Independent Expenditures.....                   |  |       |

06 / 20 / 2014



**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 73 OF 207  
 FOR LINE 24 OF FORM 3X

|                                                                                                                                                                                                                                                                                                                                                                                 |  |                                                                                  |                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                   |                                  |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|----------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------|
| NAME OF COMMITTEE (In Full)<br><b>FREEDOMWORKS FOR AMERICA</b>                                                                                                                                                                                                                                                                                                                  |  |                                                                                  | FEC IDENTIFICATION NUMBER ▼<br><b>C</b> C00499020                                                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                                   |                                  |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">MM</span> / <span style="border: 1px solid black; padding: 2px;">DD</span> / <span style="border: 1px solid black; padding: 2px;">YYYY</span> |  |                                                                                  |                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                   |                                  |
| Full Name of Payee<br><b>Alamo</b>                                                                                                                                                                                                                                                                                                                                              |  |                                                                                  | Date of Public Distribution/Dissemination<br><span style="border: 1px solid black; padding: 2px;">MM</span> / <span style="border: 1px solid black; padding: 2px;">DD</span> / <span style="border: 1px solid black; padding: 2px;">YYYY</span><br><b>05 / 06 / 2014</b>                                                 |                                                                                                                                                                                                                                                                   |                                  |
| Mailing Address<br><b>1008 Rental Car Dr.</b>                                                                                                                                                                                                                                                                                                                                   |  |                                                                                  | Amount<br><span style="border: 1px solid black; padding: 2px;">308.29</span>                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                   |                                  |
| City<br><b>Raleigh Durham</b>                                                                                                                                                                                                                                                                                                                                                   |  | State<br><b>NC</b>                                                               | Zip Code<br><b>27623</b>                                                                                                                                                                                                                                                                                                 |                                                                                                                                                                                                                                                                   | Transaction ID : <b>SE.35440</b> |
| Purpose of Expenditure<br><b>IE-Brannon-Travel</b>                                                                                                                                                                                                                                                                                                                              |  | Category/Type<br><span style="border: 1px solid black; padding: 2px;">002</span> |                                                                                                                                                                                                                                                                                                                          | Date of Disbursement or Obligation<br><span style="border: 1px solid black; padding: 2px;">MM</span> / <span style="border: 1px solid black; padding: 2px;">DD</span> / <span style="border: 1px solid black; padding: 2px;">YYYY</span><br><b>05 / 06 / 2014</b> |                                  |
| Name of Federal Candidate<br><b>GREGORY JOSEPH BRANNON</b>                                                                                                                                                                                                                                                                                                                      |  |                                                                                  | <input checked="" type="checkbox"/> Support<br><input type="checkbox"/> Oppose                                                                                                                                                                                                                                           |                                                                                                                                                                                                                                                                   |                                  |
| Calendar Year-To-Date<br>Per Election for Office Sought<br><span style="border: 1px solid black; padding: 2px;">148755.27</span>                                                                                                                                                                                                                                                |  |                                                                                  | Office Sought: <input type="checkbox"/> House District: <b>00</b><br><input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <b>NC</b><br>Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶ |                                                                                                                                                                                                                                                                   |                                  |
| Full Name of Payee<br><b>AOL Advertising LLC</b>                                                                                                                                                                                                                                                                                                                                |  |                                                                                  | Date of Public Distribution/Dissemination<br><span style="border: 1px solid black; padding: 2px;">MM</span> / <span style="border: 1px solid black; padding: 2px;">DD</span> / <span style="border: 1px solid black; padding: 2px;">YYYY</span><br><b>05 / 05 / 2014</b>                                                 |                                                                                                                                                                                                                                                                   |                                  |
| Mailing Address<br><b>770 Broadway-6th Floor</b>                                                                                                                                                                                                                                                                                                                                |  |                                                                                  | Amount<br><span style="border: 1px solid black; padding: 2px;">9750.00</span>                                                                                                                                                                                                                                            |                                                                                                                                                                                                                                                                   |                                  |
| City<br><b>New York</b>                                                                                                                                                                                                                                                                                                                                                         |  | State<br><b>NY</b>                                                               | Zip Code<br><b>10003</b>                                                                                                                                                                                                                                                                                                 |                                                                                                                                                                                                                                                                   | Transaction ID : <b>SE.27054</b> |
| Purpose of Expenditure<br><b>IE-Sasse-Online Ads</b>                                                                                                                                                                                                                                                                                                                            |  | Category/Type<br><span style="border: 1px solid black; padding: 2px;">004</span> |                                                                                                                                                                                                                                                                                                                          | Date of Disbursement or Obligation<br><span style="border: 1px solid black; padding: 2px;">MM</span> / <span style="border: 1px solid black; padding: 2px;">DD</span> / <span style="border: 1px solid black; padding: 2px;">YYYY</span><br><b>05 / 05 / 2014</b> |                                  |
| Name of Federal Candidate<br><b>BENJAMIN E SASSE</b>                                                                                                                                                                                                                                                                                                                            |  |                                                                                  | <input checked="" type="checkbox"/> Support<br><input type="checkbox"/> Oppose                                                                                                                                                                                                                                           |                                                                                                                                                                                                                                                                   |                                  |
| Calendar Year-To-Date<br>Per Election for Office Sought<br><span style="border: 1px solid black; padding: 2px;">60406.86</span>                                                                                                                                                                                                                                                 |  |                                                                                  | Office Sought: <input type="checkbox"/> House District: <b>00</b><br><input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <b>NE</b><br>Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶ |                                                                                                                                                                                                                                                                   |                                  |
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶                                                                                                                                                                                                                                                                                                                 |  |                                                                                  | <span style="border: 1px solid black; padding: 2px;">10058.29</span>                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                                                   |                                  |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶                                                                                                                                                                                                                                                                                                              |  |                                                                                  | <span style="border: 1px solid black; padding: 2px;"></span>                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                   |                                  |
| (c) <b>TOTAL</b> Independent Expenditures..... ▶                                                                                                                                                                                                                                                                                                                                |  |                                                                                  | <span style="border: 1px solid black; padding: 2px;"></span>                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                   |                                  |
| 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.                     |  |                                                                                  |                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                   |                                  |
| Signature<br><br><i>R. Russ Walker</i>                                                                                                                                                                                                                                                                                                                                          |  |                                                                                  | Date <span style="border: 1px solid black; padding: 2px;">MM</span> / <span style="border: 1px solid black; padding: 2px;">DD</span> / <span style="border: 1px solid black; padding: 2px;">YYYY</span><br><b>06 / 20 / 2014</b>                                                                                         |                                                                                                                                                                                                                                                                   |                                  |

[Electronically Filed]

|                                                                      |             |                                                                                                                                              |                                                                                                                                                       |
|----------------------------------------------------------------------|-------------|----------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------|
| Full Name of Payee<br><b>AOL Advertising LLC</b>                     |             | Date of Public Distribution/Dissemination<br>MM / DD / YYYY<br>05 / 08 / 2014                                                                |                                                                                                                                                       |
| Mailing Address<br>770 Broadway-6th Floor                            |             | Amount<br>7500.00                                                                                                                            |                                                                                                                                                       |
| City<br>New York                                                     | State<br>NY | Zip Code<br>10003                                                                                                                            | Transaction ID : <b>SE.27135</b><br>Date of Disbursement or Obligation<br>MM / DD / YYYY<br>05 / 08 / 2014                                            |
| Purpose of Expenditure<br>IE-Cochran-Online Ads                      |             | Category/<br>Type<br>004                                                                                                                     |                                                                                                                                                       |
| Name of Federal Candidate<br>THAD COCHRAN                            |             | <input type="checkbox"/> Support<br><input checked="" type="checkbox"/> Oppose                                                               | Office Sought: <input type="checkbox"/> House District: 00<br><input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: MS |
| Calendar Year-To-Date<br>Per Election for Office Sought<br>214869.46 |             | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▶ |                                                                                                                                                       |

|                                                                  |   |          |
|------------------------------------------------------------------|---|----------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....    | ▶ | 15000.00 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... | ▶ |          |
| (c) <b>TOTAL</b> Independent Expenditures.....                   | ▶ |          |

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 75 OF 207  
 FOR LINE 24 OF FORM 3X

|                                                                                                                                                                                                                                                                                                                                                                                 |                    |                                                                                  |                                                                                                                                                                                                                                                 |  |  |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------|----------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|
| NAME OF COMMITTEE (In Full)<br><b>FREEDOMWORKS FOR AMERICA</b>                                                                                                                                                                                                                                                                                                                  |                    |                                                                                  | FEC IDENTIFICATION NUMBER ▼<br><b>C</b> C00499020                                                                                                                                                                                               |  |  |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">MM</span> / <span style="border: 1px solid black; padding: 2px;">DD</span> / <span style="border: 1px solid black; padding: 2px;">YYYY</span> |                    |                                                                                  |                                                                                                                                                                                                                                                 |  |  |
| Full Name of Payee<br><b>AOL Advertising LLC</b>                                                                                                                                                                                                                                                                                                                                |                    |                                                                                  | Date of Public Distribution/Dissemination<br><span style="border: 1px solid black; padding: 2px;">05</span> / <span style="border: 1px solid black; padding: 2px;">29</span> / <span style="border: 1px solid black; padding: 2px;">2014</span> |  |  |
| Mailing Address <b>770 Broadway-6th Floor</b>                                                                                                                                                                                                                                                                                                                                   |                    |                                                                                  | Amount<br><span style="border: 1px solid black; padding: 2px;">1625.00</span>                                                                                                                                                                   |  |  |
| City<br><b>New York</b>                                                                                                                                                                                                                                                                                                                                                         | State<br><b>NY</b> | Zip Code<br><b>10003</b>                                                         | Transaction ID : <b>SE.35529</b>                                                                                                                                                                                                                |  |  |
| Purpose of Expenditure<br><b>IE-McDaniel-Online Ads</b>                                                                                                                                                                                                                                                                                                                         |                    | Category/Type<br><span style="border: 1px solid black; padding: 2px;">004</span> | Date of Disbursement or Obligation<br><span style="border: 1px solid black; padding: 2px;">05</span> / <span style="border: 1px solid black; padding: 2px;">29</span> / <span style="border: 1px solid black; padding: 2px;">2014</span>        |  |  |
| Name of Federal Candidate<br><b>CHRISTOPHER BRIAN MCDANIEL</b>                                                                                                                                                                                                                                                                                                                  |                    |                                                                                  | Office Sought: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose<br><input type="checkbox"/> President <input checked="" type="checkbox"/> Senate    State: <b>MS</b>                                                 |  |  |
| Calendar Year-To-Date Per Election for Office Sought<br><span style="border: 1px solid black; padding: 2px;">313811.21</span>                                                                                                                                                                                                                                                   |                    |                                                                                  | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶                                                                                               |  |  |
| Full Name of Payee<br><b>AOL Advertising LLC</b>                                                                                                                                                                                                                                                                                                                                |                    |                                                                                  | Date of Public Distribution/Dissemination<br><span style="border: 1px solid black; padding: 2px;">05</span> / <span style="border: 1px solid black; padding: 2px;">29</span> / <span style="border: 1px solid black; padding: 2px;">2014</span> |  |  |
| Mailing Address <b>770 Broadway-6th Floor</b>                                                                                                                                                                                                                                                                                                                                   |                    |                                                                                  | Amount<br><span style="border: 1px solid black; padding: 2px;">1625.00</span>                                                                                                                                                                   |  |  |
| City<br><b>New York</b>                                                                                                                                                                                                                                                                                                                                                         | State<br><b>NY</b> | Zip Code<br><b>10003</b>                                                         | Transaction ID : <b>SE.35530</b>                                                                                                                                                                                                                |  |  |
| Purpose of Expenditure<br><b>IE-Cochran-Online Ads</b>                                                                                                                                                                                                                                                                                                                          |                    | Category/Type<br><span style="border: 1px solid black; padding: 2px;">004</span> | Date of Disbursement or Obligation<br><span style="border: 1px solid black; padding: 2px;">05</span> / <span style="border: 1px solid black; padding: 2px;">29</span> / <span style="border: 1px solid black; padding: 2px;">2014</span>        |  |  |
| Name of Federal Candidate<br><b>THAD COCHRAN</b>                                                                                                                                                                                                                                                                                                                                |                    |                                                                                  | Office Sought: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose<br><input type="checkbox"/> President <input checked="" type="checkbox"/> Senate    State: <b>MS</b>                                                 |  |  |
| Calendar Year-To-Date Per Election for Office Sought<br><span style="border: 1px solid black; padding: 2px;">315436.21</span>                                                                                                                                                                                                                                                   |                    |                                                                                  | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶                                                                                               |  |  |
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶                                                                                                                                                                                                                                                                                                                 |                    |                                                                                  | <span style="border: 1px solid black; padding: 2px;">3250.00</span>                                                                                                                                                                             |  |  |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶                                                                                                                                                                                                                                                                                                              |                    |                                                                                  | <span style="border: 1px solid black; padding: 2px;"></span>                                                                                                                                                                                    |  |  |
| (c) <b>TOTAL</b> Independent Expenditures..... ▶                                                                                                                                                                                                                                                                                                                                |                    |                                                                                  | <span style="border: 1px solid black; padding: 2px;"></span>                                                                                                                                                                                    |  |  |
| 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.                     |                    |                                                                                  |                                                                                                                                                                                                                                                 |  |  |
| Signature <u>R. Russ Walker</u>                                                                                                                                                                                                                                                                                                                                                 |                    |                                                                                  | Date <span style="border: 1px solid black; padding: 2px;">06</span> / <span style="border: 1px solid black; padding: 2px;">20</span> / <span style="border: 1px solid black; padding: 2px;">2014</span>                                         |  |  |

[Electronically Filed]

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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 FOR LINE 24 OF FORM 3X

|                                                                                                                                                                                                                                                         |                                                                                                                                                   |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------|
| NAME OF COMMITTEE (In Full)<br><b>FREEDOMWORKS FOR AMERICA</b>                                                                                                                                                                                          | <b>FEC IDENTIFICATION NUMBER ▼</b><br><div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00499020       </div> |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> |                                                                                                                                                   |

|                                                                                                                                                    |                    |                                                                                                        |                                                                                                                                                                                                 |  |
|----------------------------------------------------------------------------------------------------------------------------------------------------|--------------------|--------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| Full Name of Payee<br><b>Arrowhead Graphics, Inc.</b>                                                                                              |                    |                                                                                                        | Date of Public Distribution/Dissemination<br><div style="border: 1px solid black; padding: 2px; display: inline-block;"> MM / DD / YYYY<br/> 05 / 01 / 2014 </div>                              |  |
| Mailing Address <b>508 Houston St</b>                                                                                                              |                    |                                                                                                        | Amount<br><div style="border: 1px solid black; padding: 2px; display: inline-block;"> 2311.85 </div>                                                                                            |  |
| City<br><b>Greensboro</b>                                                                                                                          | State<br><b>NC</b> | Zip Code<br><b>27401</b>                                                                               | <b>Transaction ID : SE.26911</b><br>Date of Disbursement or Obligation<br><div style="border: 1px solid black; padding: 2px; display: inline-block;"> MM / DD / YYYY<br/> 05 / 01 / 2014 </div> |  |
| Purpose of Expenditure<br><b>IE-Brannon-Yard signs</b>                                                                                             |                    | Category/<br>Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div> |                                                                                                                                                                                                 |  |
| Name of Federal Candidate<br><b>GREGORY JOSEPH BRANNON</b>                                                                                         |                    |                                                                                                        | <input checked="" type="checkbox"/> Support<br><input type="checkbox"/> Oppose                                                                                                                  |  |
| Calendar Year-To-Date<br>Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">134494.23</div> |                    |                                                                                                        | Office Sought: <input type="checkbox"/> House District: <u>00</u><br><input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>NC</u>                             |  |
|                                                                                                                                                    |                    |                                                                                                        | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶                                               |  |

|                                                                                                                                                    |                    |                                                                                                        |                                                                                                                                                                                                 |  |
|----------------------------------------------------------------------------------------------------------------------------------------------------|--------------------|--------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| Full Name of Payee<br><b>Arrowhead Graphics, Inc.</b>                                                                                              |                    |                                                                                                        | Date of Public Distribution/Dissemination<br><div style="border: 1px solid black; padding: 2px; display: inline-block;"> MM / DD / YYYY<br/> 05 / 01 / 2014 </div>                              |  |
| Mailing Address <b>508 Houston St</b>                                                                                                              |                    |                                                                                                        | Amount<br><div style="border: 1px solid black; padding: 2px; display: inline-block;"> 262.49 </div>                                                                                             |  |
| City<br><b>Greensboro</b>                                                                                                                          | State<br><b>NC</b> | Zip Code<br><b>27401</b>                                                                               | <b>Transaction ID : SE.26912</b><br>Date of Disbursement or Obligation<br><div style="border: 1px solid black; padding: 2px; display: inline-block;"> MM / DD / YYYY<br/> 05 / 01 / 2014 </div> |  |
| Purpose of Expenditure<br><b>IE-Brannon-Stickers</b>                                                                                               |                    | Category/<br>Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div> |                                                                                                                                                                                                 |  |
| Name of Federal Candidate<br><b>GREGORY JOSEPH BRANNON</b>                                                                                         |                    |                                                                                                        | <input checked="" type="checkbox"/> Support<br><input type="checkbox"/> Oppose                                                                                                                  |  |
| Calendar Year-To-Date<br>Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">134756.72</div> |                    |                                                                                                        | Office Sought: <input type="checkbox"/> House District: <u>00</u><br><input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>NC</u>                             |  |
|                                                                                                                                                    |                    |                                                                                                        | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶                                               |  |

|                                                                   |                                                                                          |
|-------------------------------------------------------------------|------------------------------------------------------------------------------------------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....▶    | <div style="border: 1px solid black; padding: 2px; display: inline-block;">2574.34</div> |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....▶ | <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>        |
| (c) <b>TOTAL</b> Independent Expenditures.....▶                   | <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>        |

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*R. Russ Walker*
*[Electronically Filed]*

Date

MM / DD / YYYY  
06 / 20 / 2014

Signature

|                                                                      |             |                                                                                                                                              |                                                                                                                                                       |
|----------------------------------------------------------------------|-------------|----------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------|
| Full Name of Payee<br><b>Arrowhead Graphics, Inc.</b>                |             | Date of Public Distribution/Dissemination<br>MM / DD / YYYY<br>05 / 02 / 2014                                                                |                                                                                                                                                       |
| Mailing Address<br>508 Houston St                                    |             | Amount<br>1223.68                                                                                                                            |                                                                                                                                                       |
| City<br>Greensboro                                                   | State<br>NC | Zip Code<br>27401                                                                                                                            | Transaction ID : <b>SE.27037</b><br>Date of Disbursement or Obligation<br>MM / DD / YYYY<br>05 / 02 / 2014                                            |
| Purpose of Expenditure<br>IE-McDaniel-Yard Signs/Stickers            |             | Category/<br>Type<br>004                                                                                                                     |                                                                                                                                                       |
| Name of Federal Candidate<br>CHRISTOPHER BRIAN MCDANIEL              |             | <input checked="" type="checkbox"/> Support<br><input type="checkbox"/> Oppose                                                               | Office Sought: <input type="checkbox"/> House District: 00<br><input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: MS |
| Calendar Year-To-Date<br>Per Election for Office Sought<br>157999.21 |             | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ► |                                                                                                                                                       |

|                                                                  |   |                    |
|------------------------------------------------------------------|---|--------------------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....    | ▶ | <div>2263.69</div> |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... | ▶ | <div></div>        |
| (c) <b>TOTAL</b> Independent Expenditures.....                   | ▶ | <div></div>        |

Signature

|                                                         |                                                                                |                                                                                      |                                                                                                                                              |
|---------------------------------------------------------|--------------------------------------------------------------------------------|--------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------|
| Full Name of Payee<br><b>Arrowhead Graphics, Inc.</b>   |                                                                                | Date of Public Distribution/Dissemination<br>MM / DD / YYYY<br>05 / 20 / 2014        |                                                                                                                                              |
| Mailing Address<br>508 Houston St                       |                                                                                | Amount<br>3292.14                                                                    |                                                                                                                                              |
| City<br>Greensboro                                      | State<br>NC                                                                    | Zip Code<br>27401                                                                    | Transaction ID : <b>SE.35471</b>                                                                                                             |
| Purpose of Expenditure<br>IE-Graham-Yard Signs          | Category/<br>Type                                                              | 001                                                                                  | Date of Disbursement or Obligation<br>MM / DD / YYYY<br>05 / 20 / 2014                                                                       |
| Name of Federal Candidate<br>LINDSEY OLIN GRAHAM        | <input checked="" type="checkbox"/> Support<br><input type="checkbox"/> Oppose | Office Sought:<br><input type="checkbox"/> President <input type="checkbox"/> Senate | District: 00<br>State: SC                                                                                                                    |
| Calendar Year-To-Date<br>Per Election for Office Sought | 3292.14                                                                        |                                                                                      | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▶ |

|                                                                  |         |
|------------------------------------------------------------------|---------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....    | 7185.07 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... |         |
| (c) <b>TOTAL</b> Independent Expenditures.....                   |         |

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 79 OF 207  
 FOR LINE 24 OF FORM 3X

|                                                                                                                                                                              |  |                                                                                                                                                            |  |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| NAME OF COMMITTEE (In Full)<br><b>FREEDOMWORKS FOR AMERICA</b>                                                                                                               |  | FEC IDENTIFICATION NUMBER ▼<br><b>C</b> C00499020                                                                                                          |  |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on |  | <div style="border: 1px solid black; padding: 2px;">             M M M / D D D / Y Y Y Y Y Y<br/>             . . . / . . . / . . . . . .           </div> |  |

|                                                         |             |                                                                                                       |                                                                                                                                                                                            |  |  |
|---------------------------------------------------------|-------------|-------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|
| Full Name of Payee<br><b>Billy Bob's Silver Diner</b>   |             |                                                                                                       | Date of Public Distribution/Dissemination<br><div style="border: 1px solid black; padding: 2px;">             M M M / D D D / Y Y Y Y Y Y<br/>             05 / 04 / 2014           </div> |  |  |
| Mailing Address 1650 Hanes Mall Blvd.                   |             |                                                                                                       | Amount<br><div style="border: 1px solid black; padding: 2px;">             . . . . . 75.42           </div>                                                                                |  |  |
| City<br>Winston-Salem                                   | State<br>NC | Zip Code<br>27103                                                                                     | Transaction ID : <b>SE.27068</b>                                                                                                                                                           |  |  |
| Purpose of Expenditure<br>IE-Brannon-Travel             |             | Category/<br>Type 002                                                                                 | Date of Disbursement or Obligation<br><div style="border: 1px solid black; padding: 2px;">             M M M / D D D / Y Y Y Y Y Y<br/>             05 / 04 / 2014           </div>        |  |  |
| Name of Federal Candidate<br>GREGORY JOSEPH BRANNON     |             | <input checked="" type="checkbox"/> Support<br><input type="checkbox"/> Oppose                        | Office Sought: <input type="checkbox"/> House District: 00<br><input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NC                                      |  |  |
| Calendar Year-To-Date<br>Per Election for Office Sought |             | <div style="border: 1px solid black; padding: 2px;">             . . . . . 143202.22           </div> | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶                                          |  |  |

|                                                         |             |                                                                                                      |                                                                                                                                                                                            |  |  |
|---------------------------------------------------------|-------------|------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|
| Full Name of Payee<br><b>Bright Roll</b>                |             |                                                                                                      | Date of Public Distribution/Dissemination<br><div style="border: 1px solid black; padding: 2px;">             M M M / D D D / Y Y Y Y Y Y<br/>             05 / 01 / 2014           </div> |  |  |
| Mailing Address 343 Sansome St.<br>Ste. 600             |             |                                                                                                      | Amount<br><div style="border: 1px solid black; padding: 2px;">             . . . . . 6500.00           </div>                                                                              |  |  |
| City<br>San Francisco                                   | State<br>CA | Zip Code<br>94104                                                                                    | Transaction ID : <b>SE.26923</b>                                                                                                                                                           |  |  |
| Purpose of Expenditure<br>IE-Sasse-Online Ads           |             | Category/<br>Type 004                                                                                | Date of Disbursement or Obligation<br><div style="border: 1px solid black; padding: 2px;">             M M M / D D D / Y Y Y Y Y Y<br/>             05 / 01 / 2014           </div>        |  |  |
| Name of Federal Candidate<br>BENJAMIN E SASSE           |             | <input checked="" type="checkbox"/> Support<br><input type="checkbox"/> Oppose                       | Office Sought: <input type="checkbox"/> House District: 00<br><input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NE                                      |  |  |
| Calendar Year-To-Date<br>Per Election for Office Sought |             | <div style="border: 1px solid black; padding: 2px;">             . . . . . 20909.06           </div> | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶                                          |  |  |

|                                                            |                                                                                                     |
|------------------------------------------------------------|-----------------------------------------------------------------------------------------------------|
| (a) SUBTOTAL of Itemized Independent Expenditures.....▶    | <div style="border: 1px solid black; padding: 2px;">             . . . . . 6575.42           </div> |
| (b) SUBTOTAL of Unitemized Independent Expenditures .....▶ | <div style="border: 1px solid black; padding: 2px;">             . . . . .           </div>         |
| (c) TOTAL Independent Expenditures.....▶                   | <div style="border: 1px solid black; padding: 2px;">             . . . . .           </div>         |

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

R. Russ Walker

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y  
 06 / 20 / 2014

Signature

|                                                         |             |                                                                                |                                                                                                                                                             |
|---------------------------------------------------------|-------------|--------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Full Name of Payee<br><b>Bright Roll</b>                |             | Date of Public Distribution/Dissemination<br>MM / DD / YYYY<br>05 / 05 / 2014  |                                                                                                                                                             |
| Mailing Address<br>343 Sansome St.<br>Ste. 600          |             | Amount<br>256.05                                                               |                                                                                                                                                             |
| City<br>San Francisco                                   | State<br>CA | Zip Code<br>94104                                                              | Transaction ID : <b>SE.35465</b><br>Date of Disbursement or Obligation<br>MM / DD / YYYY<br>05 / 05 / 2014                                                  |
| Purpose of Expenditure<br>IE-Joyce-Online Ads           |             | Category/<br>Type<br>004                                                       |                                                                                                                                                             |
| Name of Federal Candidate<br>DAVID P JOYCE              |             | <input type="checkbox"/> Support<br><input checked="" type="checkbox"/> Oppose | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>District: 14<br>State: OH |
| Calendar Year-To-Date<br>Per Election for Office Sought |             | 78890.55                                                                       | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▶                |

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

Signature



**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**PAGE 81 OF 207  
FOR LINE 24 OF FORM 3X

|                                                                                                                                                                                                                                                                                                                                                             |                              |                                                                                                                                                   |                                                                                                                                                                     |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| NAME OF COMMITTEE (In Full)<br><b>FREEDOMWORKS FOR AMERICA</b>                                                                                                                                                                                                                                                                                              |                              | FEC IDENTIFICATION NUMBER ▼<br><b>C</b> C00499020                                                                                                 |                                                                                                                                                                     |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on                                                                                                                                                                                |                              | M M M / D D D / Y Y Y Y Y Y                                                                                                                       |                                                                                                                                                                     |
| Full Name of Payee<br><b>Bright Roll</b>                                                                                                                                                                                                                                                                                                                    |                              | Date of Public Distribution/Dissemination<br>M M M / D D D / Y Y Y Y Y Y<br><b>05 / 15 / 2014</b>                                                 |                                                                                                                                                                     |
| Mailing Address<br>343 Sansome St.<br>Ste. 600                                                                                                                                                                                                                                                                                                              |                              | Amount<br><b>512.12</b>                                                                                                                           |                                                                                                                                                                     |
| City<br>San Francisco                                                                                                                                                                                                                                                                                                                                       | State<br>CA                  | Zip Code<br>94104                                                                                                                                 | Transaction ID : <b>SE.35466</b>                                                                                                                                    |
| Purpose of Expenditure<br>IE-Lynch-online ads                                                                                                                                                                                                                                                                                                               | Category/<br>Type <b>004</b> | Date of Disbursement or Obligation<br>M M M / D D D / Y Y Y Y Y Y<br><b>05 / 05 / 2014</b>                                                        |                                                                                                                                                                     |
| Name of Federal Candidate<br><b>MATT LYNCH</b>                                                                                                                                                                                                                                                                                                              |                              | <input checked="" type="checkbox"/> Support<br><input type="checkbox"/> Oppose                                                                    | Office Sought: <input checked="" type="checkbox"/> House District: <b>14</b><br><input type="checkbox"/> President <input type="checkbox"/> Senate State: <b>OH</b> |
| Calendar Year-To-Date<br>Per Election for Office Sought<br><b>79402.67</b>                                                                                                                                                                                                                                                                                  |                              | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶ |                                                                                                                                                                     |
| Full Name of Payee<br><b>Bright Roll</b>                                                                                                                                                                                                                                                                                                                    |                              | Date of Public Distribution/Dissemination<br>M M M / D D D / Y Y Y Y Y Y<br><b>05 / 05 / 2015</b>                                                 |                                                                                                                                                                     |
| Mailing Address<br>343 Sansome St.<br>Ste. 600                                                                                                                                                                                                                                                                                                              |                              | Amount<br><b>487.78</b>                                                                                                                           |                                                                                                                                                                     |
| City<br>San Francisco                                                                                                                                                                                                                                                                                                                                       | State<br>CA                  | Zip Code<br>94104                                                                                                                                 | Transaction ID : <b>SE.35470</b>                                                                                                                                    |
| Purpose of Expenditure<br>IE-Brannon-Online Ads                                                                                                                                                                                                                                                                                                             | Category/<br>Type <b>004</b> | Date of Disbursement or Obligation<br>M M M / D D D / Y Y Y Y Y Y<br><b>05 / 05 / 2014</b>                                                        |                                                                                                                                                                     |
| Name of Federal Candidate<br><b>GREGORY JOSEPH BRANNON</b>                                                                                                                                                                                                                                                                                                  |                              | <input checked="" type="checkbox"/> Support<br><input type="checkbox"/> Oppose                                                                    | Office Sought: <input type="checkbox"/> House District: <b>00</b><br><input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <b>NC</b> |
| Calendar Year-To-Date<br>Per Election for Office Sought<br><b>146775.22</b>                                                                                                                                                                                                                                                                                 |                              | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶ |                                                                                                                                                                     |
| (a) SUBTOTAL of Itemized Independent Expenditures.....▶                                                                                                                                                                                                                                                                                                     |                              | <b>999.90</b>                                                                                                                                     |                                                                                                                                                                     |
| (b) SUBTOTAL of Unitemized Independent Expenditures .....                                                                                                                                                                                                                                                                                                   |                              |                                                                                                                                                   |                                                                                                                                                                     |
| (c) TOTAL Independent Expenditures.....▶                                                                                                                                                                                                                                                                                                                    |                              |                                                                                                                                                   |                                                                                                                                                                     |
| Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. |                              |                                                                                                                                                   |                                                                                                                                                                     |
| Signature<br><br><i>R. Russ Walker</i>                                                                                                                                                                                                                                                                                                                      |                              | Date<br>M M M / D D D / Y Y Y Y Y Y<br><b>06 / 20 / 2014</b>                                                                                      |                                                                                                                                                                     |
|                                                                                                                                                                                                                                                                                                                                                             |                              | [Electronically Filed]                                                                                                                            |                                                                                                                                                                     |

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**PAGE 82 OF 207  
FOR LINE 24 OF FORM 3X

|                                                                                                                                                                                                                                                                                                                                                             |             |                                                                                |                                                                                                                                                       |                                  |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|--------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------|
| NAME OF COMMITTEE (In Full)<br><b>FREEDOMWORKS FOR AMERICA</b>                                                                                                                                                                                                                                                                                              |             |                                                                                | FEC IDENTIFICATION NUMBER ▼<br><b>C</b> C00499020                                                                                                     |                                  |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on                                                                                                                                                                                |             |                                                                                | MM / DD / YYYY                                                                                                                                        |                                  |
| Full Name of Payee<br><b>Bright Roll</b>                                                                                                                                                                                                                                                                                                                    |             | Date of Public Distribution/Dissemination<br>MM / DD / YYYY<br>05 / 08 / 2014  |                                                                                                                                                       |                                  |
| Mailing Address<br>343 Sansome St.<br>Ste. 600                                                                                                                                                                                                                                                                                                              |             | Amount<br>5000.00                                                              |                                                                                                                                                       |                                  |
| City<br>San Francisco                                                                                                                                                                                                                                                                                                                                       | State<br>CA | Zip Code<br>94104                                                              | Transaction ID : <b>SE.27138</b>                                                                                                                      |                                  |
| Purpose of Expenditure<br>IE-McDaniel-Online Ads                                                                                                                                                                                                                                                                                                            |             | Category/<br>Type<br>004                                                       | Date of Disbursement or Obligation<br>MM / DD / YYYY<br>05 / 08 / 2014                                                                                |                                  |
| Name of Federal Candidate<br>CHRISTOPHER BRIAN MCDANIEL                                                                                                                                                                                                                                                                                                     |             | <input checked="" type="checkbox"/> Support<br><input type="checkbox"/> Oppose | Office Sought: <input type="checkbox"/> House District: 00<br><input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: MS |                                  |
| Calendar Year-To-Date<br>Per Election for Office Sought                                                                                                                                                                                                                                                                                                     |             | 224869.26                                                                      | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶     |                                  |
| Full Name of Payee<br><b>Bright Roll</b>                                                                                                                                                                                                                                                                                                                    |             | Date of Public Distribution/Dissemination<br>MM / DD / YYYY<br>05 / 08 / 2014  |                                                                                                                                                       |                                  |
| Mailing Address<br>343 Sansome St.<br>Ste. 600                                                                                                                                                                                                                                                                                                              |             | Amount<br>5000.00                                                              |                                                                                                                                                       |                                  |
| City<br>San Francisco                                                                                                                                                                                                                                                                                                                                       | State<br>CA | Zip Code<br>94104                                                              | Transaction ID : <b>SE.27139</b>                                                                                                                      |                                  |
| Purpose of Expenditure<br>IE-Cochran-Online Ads                                                                                                                                                                                                                                                                                                             |             | Category/<br>Type<br>004                                                       | Date of Disbursement or Obligation<br>MM / DD / YYYY<br>05 / 08 / 2014                                                                                |                                  |
| Name of Federal Candidate<br>THAD COCHRAN                                                                                                                                                                                                                                                                                                                   |             | <input type="checkbox"/> Support<br><input checked="" type="checkbox"/> Oppose | Office Sought: <input type="checkbox"/> House District: 00<br><input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: MS |                                  |
| Calendar Year-To-Date<br>Per Election for Office Sought                                                                                                                                                                                                                                                                                                     |             | 229869.26                                                                      | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> 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 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                                                                                                                                                                                                                                                                                                                                              |             | [Electronically Filed]                                                         |                                                                                                                                                       | Date                             |
| Signature                                                                                                                                                                                                                                                                                                                                                   |             |                                                                                |                                                                                                                                                       | MM / DD / YYYY<br>06 / 20 / 2014 |

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 83 OF 207  
 FOR LINE 24 OF FORM 3X

|                                                                                                                                                                                                                                                                                                                                                             |                       |                                                                                                                                                                                                                                            |                                  |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------|
| NAME OF COMMITTEE (In Full)<br><b>FREEDOMWORKS FOR AMERICA</b>                                                                                                                                                                                                                                                                                              |                       | <b>FEC IDENTIFICATION NUMBER ▼</b><br><div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00499020       </div>                                                                                          |                                  |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on                                                                                                                                                                                |                       |                                                                                                                                                                                                                                            |                                  |
| Full Name of Payee<br><b>Bright Roll</b>                                                                                                                                                                                                                                                                                                                    |                       | Date of Public Distribution/Dissemination<br>MM / DD / YYYY<br>05 / 10 / 2014                                                                                                                                                              |                                  |
| Mailing Address<br>343 Sansome St.<br>Ste. 600                                                                                                                                                                                                                                                                                                              |                       | Amount<br>1500.00                                                                                                                                                                                                                          |                                  |
| City<br>San Francisco                                                                                                                                                                                                                                                                                                                                       | State<br>CA           | Zip Code<br>94104                                                                                                                                                                                                                          | Transaction ID : <b>SE.27201</b> |
| Purpose of Expenditure<br>IE-Dinsdale-Online Ads                                                                                                                                                                                                                                                                                                            | Category/<br>Type 004 | Date of Disbursement or Obligation<br>MM / DD / YYYY<br>05 / 10 / 2014                                                                                                                                                                     |                                  |
| Name of Federal Candidate<br>SID DINSDALE                                                                                                                                                                                                                                                                                                                   |                       | <input type="checkbox"/> Support    Office Sought: <input type="checkbox"/> House    District: 00<br><input checked="" type="checkbox"/> Oppose <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate    State: NE |                                  |
| Calendar Year-To-Date<br>Per Election for Office Sought                                                                                                                                                                                                                                                                                                     |                       | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶                                                                                          |                                  |
| Full Name of Payee<br><b>Bright Roll</b>                                                                                                                                                                                                                                                                                                                    |                       | Date of Public Distribution/Dissemination<br>MM / DD / YYYY<br>05 / 12 / 2014                                                                                                                                                              |                                  |
| Mailing Address<br>343 Sansome St.<br>Ste. 600                                                                                                                                                                                                                                                                                                              |                       | Amount<br>281.78                                                                                                                                                                                                                           |                                  |
| City<br>San Francisco                                                                                                                                                                                                                                                                                                                                       | State<br>CA           | Zip Code<br>94104                                                                                                                                                                                                                          | Transaction ID : <b>SE.35458</b> |
| Purpose of Expenditure<br>IE-Dinsdale-Online Ads                                                                                                                                                                                                                                                                                                            | Category/<br>Type 004 | Date of Disbursement or Obligation<br>MM / DD / YYYY<br>05 / 12 / 2014                                                                                                                                                                     |                                  |
| Name of Federal Candidate<br>SID DINSDALE                                                                                                                                                                                                                                                                                                                   |                       | <input type="checkbox"/> Support    Office Sought: <input type="checkbox"/> House    District: 00<br><input checked="" type="checkbox"/> Oppose <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate    State: NE |                                  |
| Calendar Year-To-Date<br>Per Election for Office Sought                                                                                                                                                                                                                                                                                                     |                       | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶                                                                                          |                                  |
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶                                                                                                                                                                                                                                                                                             |                       | 1781.78                                                                                                                                                                                                                                    |                                  |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶                                                                                                                                                                                                                                                                                          |                       |                                                                                                                                                                                                                                            |                                  |
| (c) <b>TOTAL</b> Independent Expenditures..... ▶                                                                                                                                                                                                                                                                                                            |                       |                                                                                                                                                                                                                                            |                                  |
| Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. |                       |                                                                                                                                                                                                                                            |                                  |
| Signature <u>R. Russ Walker</u>                                                                                                                                                                                                                                                                                                                             |                       | Date MM / DD / YYYY<br>06 / 20 / 2014                                                                                                                                                                                                      |                                  |

[Electronically Filed]

|                                                         |             |                                                                                |                                                                                                                                                       |
|---------------------------------------------------------|-------------|--------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------|
| Full Name of Payee<br><b>Bright Roll</b>                |             | Date of Public Distribution/Dissemination<br>MM / DD / YYYY<br>05 / 29 / 2014  |                                                                                                                                                       |
| Mailing Address<br>343 Sansome St.<br>Ste. 600          |             | Amount<br>2500.00                                                              |                                                                                                                                                       |
| City<br>San Francisco                                   | State<br>CA | Zip Code<br>94104                                                              | Transaction ID : SE.35525<br>Date of Disbursement or Obligation<br>MM / DD / YYYY<br>05 / 29 / 2014                                                   |
| Purpose of Expenditure<br>IE-McDaniel-Online Ads        |             | Category/<br>Type<br>004                                                       |                                                                                                                                                       |
| Name of Federal Candidate<br>CHRISTOPHER BRIAN MCDANIEL |             | <input checked="" type="checkbox"/> Support<br><input type="checkbox"/> Oppose | Office Sought: <input type="checkbox"/> House District: 00<br><input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: MS |
| Calendar Year-To-Date<br>Per Election for Office Sought |             | 296835.21                                                                      | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ►          |

|                                                                  |   |         |
|------------------------------------------------------------------|---|---------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....    | ▶ | 6500.00 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... | ▶ |         |
| (c) <b>TOTAL</b> Independent Expenditures.....                   | ▶ |         |

Signature

|                                                         |                                                                                |                                                                                                                                      |                                                                                                                                              |
|---------------------------------------------------------|--------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------|
| Full Name of Payee<br><b>Bright Roll</b>                |                                                                                | Date of Public Distribution/Dissemination<br>MM / DD / YYYY<br>05 / 31 / 2014                                                        |                                                                                                                                              |
| Mailing Address<br>343 Sansome St.<br>Ste. 600          |                                                                                | Amount<br>2500.00                                                                                                                    |                                                                                                                                              |
| City<br>San Francisco                                   | State<br>CA                                                                    | Zip Code<br>94104                                                                                                                    | Transaction ID : SE.32537                                                                                                                    |
| Purpose of Expenditure<br>IE-McDaniel-Online Ads        | Category/<br>Type                                                              | 004                                                                                                                                  | Date of Disbursement or Obligation<br>MM / DD / YYYY<br>05 / 31 / 2014                                                                       |
| Name of Federal Candidate<br>CHRISTOPHER BRIAN MCDANIEL | <input checked="" type="checkbox"/> Support<br><input type="checkbox"/> Oppose | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> President<br><input checked="" type="checkbox"/> Senate | District: 00<br>State: MS                                                                                                                    |
| Calendar Year-To-Date<br>Per Election for Office Sought | 320578.28                                                                      |                                                                                                                                      | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▶ |

|                                                                  |   |         |
|------------------------------------------------------------------|---|---------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....    | ▶ | 5000.00 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... | ▶ |         |
| (c) <b>TOTAL</b> Independent Expenditures.....                   | ▶ |         |

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 86 OF 207  
 FOR LINE 24 OF FORM 3X

|                                                                                                                                                                              |  |                                                                                                                                                   |  |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|---------------------------------------------------------------------------------------------------------------------------------------------------|--|
| NAME OF COMMITTEE (In Full)<br><b>FREEDOMWORKS FOR AMERICA</b>                                                                                                               |  | FEC IDENTIFICATION NUMBER ▼<br><b>C</b> C00499020                                                                                                 |  |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on |  | <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY</div> <div>MM / DD / YYYY</div> <div>MM / DD / YYYY</div> </div> |  |

  

|                                                         |                       |                                                                                                                                                                                                                                                                                                            |                           |
|---------------------------------------------------------|-----------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------|
| Full Name of Payee<br><b>Bright Roll</b>                |                       | Date of Public Distribution/Dissemination<br>MM / DD / YYYY<br>05 / 31 / 2014                                                                                                                                                                                                                              |                           |
| Mailing Address<br>343 Sansome St.<br>Ste. 600          |                       | Amount<br>2500.00                                                                                                                                                                                                                                                                                          |                           |
| City<br>San Francisco                                   | State<br>CA           | Zip Code<br>94104                                                                                                                                                                                                                                                                                          | Transaction ID : SE.32538 |
| Purpose of Expenditure<br>IE-Cochran-Online Ads         | Category/<br>Type 004 | Date of Disbursement or Obligation<br>MM / DD / YYYY<br>05 / 31 / 2014                                                                                                                                                                                                                                     |                           |
| Name of Federal Candidate<br>THAD COCHRAN               |                       | <input type="checkbox"/> Support<br><input checked="" type="checkbox"/> Oppose                                                                                                                                                                                                                             |                           |
| Calendar Year-To-Date<br>Per Election for Office Sought |                       | Office Sought: <input type="checkbox"/> House District: 00<br><input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: MS<br>Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶ |                           |
| 323078.28                                               |                       |                                                                                                                                                                                                                                                                                                            |                           |

  

|                                                         |                       |                                                                                                                                                                                                                                                                                                            |                           |
|---------------------------------------------------------|-----------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------|
| Full Name of Payee<br><b>Buffalo Wild Wings</b>         |                       | Date of Public Distribution/Dissemination<br>MM / DD / YYYY<br>05 / 05 / 2014                                                                                                                                                                                                                              |                           |
| Mailing Address<br>400 E. Martin Luther King            |                       | Amount<br>34.43                                                                                                                                                                                                                                                                                            |                           |
| City<br>Charlotte                                       | State<br>NC           | Zip Code<br>28214                                                                                                                                                                                                                                                                                          | Transaction ID : SE.27086 |
| Purpose of Expenditure<br>IE-Brannon-Travel             | Category/<br>Type 002 | Date of Disbursement or Obligation<br>MM / DD / YYYY<br>05 / 05 / 2014                                                                                                                                                                                                                                     |                           |
| Name of Federal Candidate<br>GREGORY JOSEPH BRANNON     |                       | <input checked="" type="checkbox"/> Support<br><input type="checkbox"/> Oppose                                                                                                                                                                                                                             |                           |
| Calendar Year-To-Date<br>Per Election for Office Sought |                       | Office Sought: <input type="checkbox"/> House District: 00<br><input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NC<br>Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶ |                           |
| 146120.34                                               |                       |                                                                                                                                                                                                                                                                                                            |                           |

  

|                                                                    |         |
|--------------------------------------------------------------------|---------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶    | 2534.43 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶ |         |
| (c) <b>TOTAL</b> Independent Expenditures..... ▶                   |         |

  

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

R. Russ Walker

Signature

[Electronically Filed]

Date

MM / DD / YYYY

06 / 20 / 2014

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**PAGE 87 OF 207  
FOR LINE 24 OF FORM 3X

|                                                                                                                                                                                                                                                                                                                                                             |  |                      |                                                                                                                                                   |                                                                        |                                                                                                                                                             |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|----------------------|---------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------|
| NAME OF COMMITTEE (In Full)<br><b>FREEDOMWORKS FOR AMERICA</b>                                                                                                                                                                                                                                                                                              |  |                      | <b>FEC IDENTIFICATION NUMBER ▼</b><br><div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00499020       </div> |                                                                        |                                                                                                                                                             |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on                                                                                                                                                                                |  |                      |                                                                                                                                                   |                                                                        |                                                                                                                                                             |
| Full Name of Payee<br><b>Casa Mexico</b>                                                                                                                                                                                                                                                                                                                    |  |                      | Date of Public Distribution/Dissemination<br>MM / DD / YYYY<br>05 / 10 / 2014                                                                     |                                                                        |                                                                                                                                                             |
| Mailing Address<br>10332 W. Fairview Ave.                                                                                                                                                                                                                                                                                                                   |  |                      | Amount<br>203.73                                                                                                                                  |                                                                        |                                                                                                                                                             |
| City<br>Boise                                                                                                                                                                                                                                                                                                                                               |  | State<br>ID          | Zip Code<br>83704                                                                                                                                 |                                                                        | Transaction ID : SE.27211                                                                                                                                   |
| Purpose of Expenditure<br>IE-Smith-Food/Beverage                                                                                                                                                                                                                                                                                                            |  | Category/Type<br>002 |                                                                                                                                                   | Date of Disbursement or Obligation<br>MM / DD / YYYY<br>05 / 10 / 2014 |                                                                                                                                                             |
| Name of Federal Candidate<br>BRYAN SMITH                                                                                                                                                                                                                                                                                                                    |  |                      | <input checked="" type="checkbox"/> Support<br><input type="checkbox"/> Oppose                                                                    |                                                                        | Office Sought: <input checked="" type="checkbox"/> House    District: 02<br><input type="checkbox"/> President <input type="checkbox"/> Senate    State: ID |
| Calendar Year-To-Date<br>Per Election for Office Sought                                                                                                                                                                                                                                                                                                     |  |                      | 31368.18                                                                                                                                          |                                                                        | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶           |
| Full Name of Payee<br><b>Chick Fil A-NC</b>                                                                                                                                                                                                                                                                                                                 |  |                      | Date of Public Distribution/Dissemination<br>MM / DD / YYYY<br>05 / 03 / 2014                                                                     |                                                                        |                                                                                                                                                             |
| Mailing Address<br>7910 Rea Rd.                                                                                                                                                                                                                                                                                                                             |  |                      | Amount<br>21.92                                                                                                                                   |                                                                        |                                                                                                                                                             |
| City<br>Charlotte                                                                                                                                                                                                                                                                                                                                           |  | State<br>NC          | Zip Code<br>82877                                                                                                                                 |                                                                        | Transaction ID : SE.26992                                                                                                                                   |
| Purpose of Expenditure<br>IE-Brannon-Food/Beverage                                                                                                                                                                                                                                                                                                          |  | Category/Type<br>002 |                                                                                                                                                   | Date of Disbursement or Obligation<br>MM / DD / YYYY<br>05 / 03 / 2014 |                                                                                                                                                             |
| Name of Federal Candidate<br>GREGORY JOSEPH BRANNON                                                                                                                                                                                                                                                                                                         |  |                      | <input checked="" type="checkbox"/> Support<br><input type="checkbox"/> Oppose                                                                    |                                                                        | Office Sought: <input type="checkbox"/> House    District: 00<br><input type="checkbox"/> President <input checked="" type="checkbox"/> Senate    State: NC |
| Calendar Year-To-Date<br>Per Election for Office Sought                                                                                                                                                                                                                                                                                                     |  |                      | 142564.61                                                                                                                                         |                                                                        | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶           |
| (a) SUBTOTAL of Itemized Independent Expenditures.....▶                                                                                                                                                                                                                                                                                                     |  |                      | 225.65                                                                                                                                            |                                                                        |                                                                                                                                                             |
| (b) SUBTOTAL of Unitemized Independent Expenditures .....▶                                                                                                                                                                                                                                                                                                  |  |                      |                                                                                                                                                   |                                                                        |                                                                                                                                                             |
| (c) TOTAL Independent Expenditures.....▶                                                                                                                                                                                                                                                                                                                    |  |                      |                                                                                                                                                   |                                                                        |                                                                                                                                                             |
| Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. |  |                      |                                                                                                                                                   |                                                                        |                                                                                                                                                             |
| Signature <u>R. Russ Walker</u>                                                                                                                                                                                                                                                                                                                             |  |                      | [Electronically Filed]                                                                                                                            |                                                                        | Date MM / DD / YYYY<br>06 / 20 / 2014                                                                                                                       |

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**PAGE 88 OF 207  
FOR LINE 24 OF FORM 3X

|                                                                                                                                                                                                                                                                                                                                                             |                    |                                                                                      |                                                                                                                                                                     |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------|--------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| NAME OF COMMITTEE (In Full)<br><b>FREEDOMWORKS FOR AMERICA</b>                                                                                                                                                                                                                                                                                              |                    | FEC IDENTIFICATION NUMBER ▼<br><b>C</b> C00499020                                    |                                                                                                                                                                     |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on                                                                                                                                                                                |                    | MM / DD / YYYY                                                                       |                                                                                                                                                                     |
| Full Name of Payee<br><b>Chick Fil A-NC</b>                                                                                                                                                                                                                                                                                                                 |                    | Date of Public Distribution/Dissemination<br>MM / DD / YYYY<br><b>05 / 06 / 2014</b> |                                                                                                                                                                     |
| Mailing Address<br><b>7910 Rea Rd.</b>                                                                                                                                                                                                                                                                                                                      |                    | Amount<br><b>13.95</b>                                                               |                                                                                                                                                                     |
| City<br><b>Charlotte</b>                                                                                                                                                                                                                                                                                                                                    | State<br><b>NC</b> | Zip Code<br><b>82877</b>                                                             | Transaction ID : <b>SE.35430</b>                                                                                                                                    |
| Purpose of Expenditure<br><b>IE-Brannon-Travel</b>                                                                                                                                                                                                                                                                                                          |                    | Category/<br>Type <b>002</b>                                                         | Date of Disbursement or Obligation<br>MM / DD / YYYY<br><b>05 / 06 / 2014</b>                                                                                       |
| Name of Federal Candidate<br><b>GREGORY JOSEPH BRANNON</b>                                                                                                                                                                                                                                                                                                  |                    | <input checked="" type="checkbox"/> Support<br><input type="checkbox"/> Oppose       | Office Sought: <input type="checkbox"/> House District: <b>00</b><br><input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <b>NC</b> |
| Calendar Year-To-Date<br>Per Election for Office Sought                                                                                                                                                                                                                                                                                                     |                    | <b>148381.58</b>                                                                     | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶                   |
| Full Name of Payee<br><b>Comfort Suites-Biltmore</b>                                                                                                                                                                                                                                                                                                        |                    | Date of Public Distribution/Dissemination<br>MM / DD / YYYY<br><b>05 / 02 / 2014</b> |                                                                                                                                                                     |
| Mailing Address<br><b>890 Brevard Rd.</b>                                                                                                                                                                                                                                                                                                                   |                    | Amount<br><b>532.76</b>                                                              |                                                                                                                                                                     |
| City<br><b>Asheville</b>                                                                                                                                                                                                                                                                                                                                    | State<br><b>ND</b> | Zip Code<br><b>28806</b>                                                             | Transaction ID : <b>SE.26958</b>                                                                                                                                    |
| Purpose of Expenditure<br><b>IE-Brannon-Travel</b>                                                                                                                                                                                                                                                                                                          |                    | Category/<br>Type <b>002</b>                                                         | Date of Disbursement or Obligation<br>MM / DD / YYYY<br><b>05 / 02 / 2014</b>                                                                                       |
| Name of Federal Candidate<br><b>GREGORY JOSEPH BRANNON</b>                                                                                                                                                                                                                                                                                                  |                    | <input checked="" type="checkbox"/> Support<br><input type="checkbox"/> Oppose       | Office Sought: <input type="checkbox"/> House District: <b>00</b><br><input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <b>NC</b> |
| Calendar Year-To-Date<br>Per Election for Office Sought                                                                                                                                                                                                                                                                                                     |                    | <b>137474.98</b>                                                                     | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶                   |
| (a) SUBTOTAL of Itemized Independent Expenditures.....▶                                                                                                                                                                                                                                                                                                     |                    | <b>546.71</b>                                                                        |                                                                                                                                                                     |
| (b) SUBTOTAL of Unitemized Independent Expenditures .....▶                                                                                                                                                                                                                                                                                                  |                    |                                                                                      |                                                                                                                                                                     |
| (c) TOTAL Independent Expenditures.....▶                                                                                                                                                                                                                                                                                                                    |                    |                                                                                      |                                                                                                                                                                     |
| Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. |                    |                                                                                      |                                                                                                                                                                     |
| Signature<br><b>R. Russ Walker</b>                                                                                                                                                                                                                                                                                                                          |                    | Date<br>MM / DD / YYYY<br><b>06 / 20 / 2014</b>                                      |                                                                                                                                                                     |
|                                                                                                                                                                                                                                                                                                                                                             |                    | [Electronically Filed]                                                               |                                                                                                                                                                     |



|                                                                      |             |                                                                                                                                              |                                                                                                                                                       |
|----------------------------------------------------------------------|-------------|----------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------|
| Full Name of Payee<br><b>Courtyard Marriott-NC</b>                   |             | Date of Public Distribution/Dissemination<br>MM / DD / YYYY<br>05 / 05 / 2014                                                                |                                                                                                                                                       |
| Mailing Address<br>1600 Westbrook Plaza Dr.                          |             | Amount<br>151.09                                                                                                                             |                                                                                                                                                       |
| City<br>Winston-Salam                                                | State<br>NC | Zip Code<br>27103                                                                                                                            | Transaction ID : <b>SE.27078</b><br>Date of Disbursement or Obligation<br>MM / DD / YYYY<br>05 / 05 / 2014                                            |
| Purpose of Expenditure<br>IE-Brannon-Travel                          |             | Category/<br>Type<br>002                                                                                                                     |                                                                                                                                                       |
| Name of Federal Candidate<br>GREGORY JOSEPH BRANNON                  |             | <input checked="" type="checkbox"/> Support<br><input type="checkbox"/> Oppose                                                               | Office Sought: <input type="checkbox"/> House District: 00<br><input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NC |
| Calendar Year-To-Date<br>Per Election for Office Sought<br>144389.93 |             | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▶ |                                                                                                                                                       |

|                                                                  |   |        |
|------------------------------------------------------------------|---|--------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....    | ▶ | 302.18 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... | ▶ |        |
| (c) <b>TOTAL</b> Independent Expenditures.....                   | ▶ |        |

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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 FOR LINE 24 OF FORM 3X

|                                                                                                                                                                              |  |                                                                                                                                                   |  |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|---------------------------------------------------------------------------------------------------------------------------------------------------|--|
| NAME OF COMMITTEE (In Full)<br><b>FREEDOMWORKS FOR AMERICA</b>                                                                                                               |  | FEC IDENTIFICATION NUMBER ▼<br><b>C</b> C00499020                                                                                                 |  |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on |  | <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY</div> <div>MM / DD / YYYY</div> <div>MM / DD / YYYY</div> </div> |  |

  

|                                                                   |                      |                                                                                                                                                                                       |                           |
|-------------------------------------------------------------------|----------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------|
| Full Name of Payee<br><b>Joel Davis</b>                           |                      | Date of Public Distribution/Dissemination<br>MM / DD / YYYY<br>05 / 01 / 2014                                                                                                         |                           |
| Mailing Address<br>200 S. 2nd Ave.                                |                      | Amount<br>4000.00                                                                                                                                                                     |                           |
| City<br>Paden City                                                | State<br>WV          | Zip Code<br>26159                                                                                                                                                                     | Transaction ID : SE.26899 |
| Purpose of Expenditure<br>IE-Bevin-Strategic Consulting           | Category/Type<br>001 | Date of Disbursement or Obligation<br>MM / DD / YYYY<br>05 / 01 / 2014                                                                                                                |                           |
| Name of Federal Candidate<br>MATTHEW GRISWOLD BEVIN               |                      | Office Sought: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose<br><input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: KY |                           |
| Calendar Year-To-Date Per Election for Office Sought<br>274544.78 |                      | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶                                     |                           |

  

|                                                                   |                      |                                                                                                                                                                                       |                           |
|-------------------------------------------------------------------|----------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------|
| Full Name of Payee<br><b>Dean &amp; Deluca</b>                    |                      | Date of Public Distribution/Dissemination<br>MM / DD / YYYY<br>05 / 03 / 2014                                                                                                         |                           |
| Mailing Address<br>7804 E. Rea Rd.                                |                      | Amount<br>8.12                                                                                                                                                                        |                           |
| City<br>Charlotte                                                 | State<br>NC          | Zip Code<br>82877                                                                                                                                                                     | Transaction ID : SE.26988 |
| Purpose of Expenditure<br>IE-Brannon-Food/Beverage                | Category/Type<br>002 | Date of Disbursement or Obligation<br>MM / DD / YYYY<br>05 / 03 / 2014                                                                                                                |                           |
| Name of Federal Candidate<br>GREGORY JOSEPH BRANNON               |                      | Office Sought: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose<br><input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NC |                           |
| Calendar Year-To-Date Per Election for Office Sought<br>142502.43 |                      | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶                                     |                           |

  

|                                                             |         |
|-------------------------------------------------------------|---------|
| (a) SUBTOTAL of Itemized Independent Expenditures..... ▶    | 4008.12 |
| (b) SUBTOTAL of Unitemized Independent Expenditures ..... ▶ |         |
| (c) TOTAL Independent Expenditures..... ▶                   |         |

  

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

R. Russ Walker

Signature

[Electronically Filed]

Date

MM / DD / YYYY  
06 / 20 / 2014

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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 FOR LINE 24 OF FORM 3X

|                                                                                                                                                                                                                                                                                                                                                             |  |                                                                                  |                                                                                                                                                                                                                                                          |                                                                                                                                    |                                  |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|----------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------|----------------------------------|
| NAME OF COMMITTEE (In Full)<br><b>FREEDOMWORKS FOR AMERICA</b>                                                                                                                                                                                                                                                                                              |  |                                                                                  | FEC IDENTIFICATION NUMBER ▼<br><b>C</b> C00499020                                                                                                                                                                                                        |                                                                                                                                    |                                  |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span>                                                                                                     |  |                                                                                  |                                                                                                                                                                                                                                                          |                                                                                                                                    |                                  |
| Full Name of Payee<br><b>Delta Airlines</b>                                                                                                                                                                                                                                                                                                                 |  |                                                                                  | Date of Public Distribution/Dissemination<br><span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span><br>05 / 02 / 2014                                                                                                                |                                                                                                                                    |                                  |
| Mailing Address<br>PO Box 20706                                                                                                                                                                                                                                                                                                                             |  |                                                                                  | Amount<br><span style="border: 1px solid black; padding: 2px;">1041.00</span>                                                                                                                                                                            |                                                                                                                                    |                                  |
| City<br>Atlanta                                                                                                                                                                                                                                                                                                                                             |  | State<br>GA                                                                      | Zip Code<br>30320                                                                                                                                                                                                                                        |                                                                                                                                    | Transaction ID : <b>SE.26957</b> |
| Purpose of Expenditure<br>IE-Brannon-Travel                                                                                                                                                                                                                                                                                                                 |  | Category/Type<br><span style="border: 1px solid black; padding: 2px;">002</span> |                                                                                                                                                                                                                                                          | Date of Disbursement or Obligation<br><span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span><br>05 / 02 / 2014 |                                  |
| Name of Federal Candidate<br>GREGORY JOSEPH BRANNON                                                                                                                                                                                                                                                                                                         |  |                                                                                  | <input checked="" type="checkbox"/> Support    Office Sought: <input type="checkbox"/> House    District: <u>00</u><br><input type="checkbox"/> Oppose <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate    State: <u>NC</u> |                                                                                                                                    |                                  |
| Calendar Year-To-Date<br>Per Election for Office Sought<br><span style="border: 1px solid black; padding: 2px;">136942.22</span>                                                                                                                                                                                                                            |  |                                                                                  | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶ _____                                                                                                  |                                                                                                                                    |                                  |
| Full Name of Payee<br><b>Delta Airlines</b>                                                                                                                                                                                                                                                                                                                 |  |                                                                                  | Date of Public Distribution/Dissemination<br><span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span><br>05 / 05 / 2015                                                                                                                |                                                                                                                                    |                                  |
| Mailing Address<br>PO Box 20706                                                                                                                                                                                                                                                                                                                             |  |                                                                                  | Amount<br><span style="border: 1px solid black; padding: 2px;">171.00</span>                                                                                                                                                                             |                                                                                                                                    |                                  |
| City<br>Atlanta                                                                                                                                                                                                                                                                                                                                             |  | State<br>GA                                                                      | Zip Code<br>30320                                                                                                                                                                                                                                        |                                                                                                                                    | Transaction ID : <b>SE.27059</b> |
| Purpose of Expenditure<br>IE-Brannon-Travel                                                                                                                                                                                                                                                                                                                 |  | Category/Type<br><span style="border: 1px solid black; padding: 2px;">002</span> |                                                                                                                                                                                                                                                          | Date of Disbursement or Obligation<br><span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span><br>05 / 05 / 2014 |                                  |
| Name of Federal Candidate<br>GREGORY JOSEPH BRANNON                                                                                                                                                                                                                                                                                                         |  |                                                                                  | <input checked="" type="checkbox"/> Support    Office Sought: <input type="checkbox"/> House    District: <u>00</u><br><input type="checkbox"/> Oppose <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate    State: <u>NC</u> |                                                                                                                                    |                                  |
| Calendar Year-To-Date<br>Per Election for Office Sought<br><span style="border: 1px solid black; padding: 2px;">143755.02</span>                                                                                                                                                                                                                            |  |                                                                                  | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶ _____                                                                                                  |                                                                                                                                    |                                  |
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶                                                                                                                                                                                                                                                                                             |  |                                                                                  | <span style="border: 1px solid black; padding: 2px;">1212.00</span>                                                                                                                                                                                      |                                                                                                                                    |                                  |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶                                                                                                                                                                                                                                                                                          |  |                                                                                  | <span style="border: 1px solid black; padding: 2px;"></span>                                                                                                                                                                                             |                                                                                                                                    |                                  |
| (c) <b>TOTAL</b> Independent Expenditures..... ▶                                                                                                                                                                                                                                                                                                            |  |                                                                                  | <span style="border: 1px solid black; padding: 2px;"></span>                                                                                                                                                                                             |                                                                                                                                    |                                  |
| 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. |  |                                                                                  |                                                                                                                                                                                                                                                          |                                                                                                                                    |                                  |
| Signature <u>R. Russ Walker</u><br><div style="text-align: right;">[Electronically Filed]</div>                                                                                                                                                                                                                                                             |  |                                                                                  | Date <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span><br>06 / 20 / 2014                                                                                                                                                        |                                                                                                                                    |                                  |

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**PAGE 92 OF 207  
FOR LINE 24 OF FORM 3X

|                                                                                                                                                                                                                                                                                                                                                                           |             |                                                                                 |                                                                                                                                                                                                                                                                    |                                                                                                                                                                                                                            |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|---------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| NAME OF COMMITTEE (In Full)<br><b>FREEDOMWORKS FOR AMERICA</b>                                                                                                                                                                                                                                                                                                            |             |                                                                                 | FEC IDENTIFICATION NUMBER ▼<br><b>C</b> C00499020                                                                                                                                                                                                                  |                                                                                                                                                                                                                            |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border:1px solid black; padding:2px;">MM</span> / <span style="border:1px solid black; padding:2px;">DD</span> / <span style="border:1px solid black; padding:2px;">YYYY</span> |             |                                                                                 |                                                                                                                                                                                                                                                                    |                                                                                                                                                                                                                            |
| Full Name of Payee<br><b>Ensho Sushi</b>                                                                                                                                                                                                                                                                                                                                  |             |                                                                                 | Date of Public Distribution/Dissemination<br><span style="border:1px solid black; padding:2px;">MM</span> / <span style="border:1px solid black; padding:2px;">DD</span> / <span style="border:1px solid black; padding:2px;">YYYY</span><br><b>05 / 04 / 2014</b> |                                                                                                                                                                                                                            |
| Mailing Address<br>201 E. Trade St., Ste. A                                                                                                                                                                                                                                                                                                                               |             |                                                                                 | Amount<br><span style="border:1px solid black; padding:2px;">78.20</span>                                                                                                                                                                                          |                                                                                                                                                                                                                            |
| City<br>Charlotte                                                                                                                                                                                                                                                                                                                                                         | State<br>NC | Zip Code<br>28202                                                               | Transaction ID : <b>SE.27066</b>                                                                                                                                                                                                                                   |                                                                                                                                                                                                                            |
| Purpose of Expenditure<br>IE-Brannon-Travel                                                                                                                                                                                                                                                                                                                               |             | Category/<br>Type <span style="border:1px solid black; padding:2px;">002</span> | Date of Disbursement or Obligation<br><span style="border:1px solid black; padding:2px;">MM</span> / <span style="border:1px solid black; padding:2px;">DD</span> / <span style="border:1px solid black; padding:2px;">YYYY</span><br><b>05 / 04 / 2014</b>        |                                                                                                                                                                                                                            |
| Name of Federal Candidate<br>GREGORY JOSEPH BRANNON                                                                                                                                                                                                                                                                                                                       |             | <input checked="" type="checkbox"/> Support<br><input type="checkbox"/> Oppose  | Office Sought: <input type="checkbox"/> House District: <u>00</u><br><input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>NC</u>                                                                                                |                                                                                                                                                                                                                            |
| Calendar Year-To-Date<br>Per Election for Office Sought                                                                                                                                                                                                                                                                                                                   |             | <span style="border:1px solid black; padding:2px;">143126.80</span>             | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶                                                                                                                  |                                                                                                                                                                                                                            |
| Full Name of Payee<br><b>Enterprise</b>                                                                                                                                                                                                                                                                                                                                   |             |                                                                                 | Date of Public Distribution/Dissemination<br><span style="border:1px solid black; padding:2px;">MM</span> / <span style="border:1px solid black; padding:2px;">DD</span> / <span style="border:1px solid black; padding:2px;">YYYY</span><br><b>05 / 02 / 2014</b> |                                                                                                                                                                                                                            |
| Mailing Address<br>4202 Air Ram Rd.                                                                                                                                                                                                                                                                                                                                       |             |                                                                                 | Amount<br><span style="border:1px solid black; padding:2px;">948.58</span>                                                                                                                                                                                         |                                                                                                                                                                                                                            |
| City<br>Charlotte                                                                                                                                                                                                                                                                                                                                                         | State<br>ND | Zip Code<br>28214                                                               | Transaction ID : <b>SE.26979</b>                                                                                                                                                                                                                                   |                                                                                                                                                                                                                            |
| Purpose of Expenditure<br>IE-Brannon-Travel                                                                                                                                                                                                                                                                                                                               |             | Category/<br>Type <span style="border:1px solid black; padding:2px;">002</span> | Date of Disbursement or Obligation<br><span style="border:1px solid black; padding:2px;">MM</span> / <span style="border:1px solid black; padding:2px;">DD</span> / <span style="border:1px solid black; padding:2px;">YYYY</span><br><b>05 / 02 / 2014</b>        |                                                                                                                                                                                                                            |
| Name of Federal Candidate<br>GREGORY JOSEPH BRANNON                                                                                                                                                                                                                                                                                                                       |             | <input checked="" type="checkbox"/> Support<br><input type="checkbox"/> Oppose  | Office Sought: <input type="checkbox"/> House District: <u>00</u><br><input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>NC</u>                                                                                                |                                                                                                                                                                                                                            |
| Calendar Year-To-Date<br>Per Election for Office Sought                                                                                                                                                                                                                                                                                                                   |             | <span style="border:1px solid black; padding:2px;">142040.53</span>             | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶                                                                                                                  |                                                                                                                                                                                                                            |
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶                                                                                                                                                                                                                                                                                                           |             |                                                                                 | <span style="border:1px solid black; padding:2px;">1026.78</span>                                                                                                                                                                                                  |                                                                                                                                                                                                                            |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶                                                                                                                                                                                                                                                                                                        |             |                                                                                 | <span style="border:1px solid black; padding:2px;"></span>                                                                                                                                                                                                         |                                                                                                                                                                                                                            |
| (c) <b>TOTAL</b> Independent Expenditures..... ▶                                                                                                                                                                                                                                                                                                                          |             |                                                                                 | <span style="border:1px solid black; padding:2px;"></span>                                                                                                                                                                                                         |                                                                                                                                                                                                                            |
| 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.               |             |                                                                                 |                                                                                                                                                                                                                                                                    |                                                                                                                                                                                                                            |
| Signature<br><br><i>R. Russ Walker</i>                                                                                                                                                                                                                                                                                                                                    |             | [Electronically Filed]                                                          |                                                                                                                                                                                                                                                                    | Date <span style="border:1px solid black; padding:2px;">MM</span> / <span style="border:1px solid black; padding:2px;">DD</span> / <span style="border:1px solid black; padding:2px;">YYYY</span><br><b>06 / 20 / 2014</b> |

|                                                                      |             |                                                                                                                                              |                                                                                                                                                       |
|----------------------------------------------------------------------|-------------|----------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------|
| Full Name of Payee<br><b>Facebook</b>                                |             | Date of Public Distribution/Dissemination<br>MM / DD / YYYY<br>05 / 08 / 2014                                                                |                                                                                                                                                       |
| Mailing Address<br>15161 Collection Center Dr.                       |             | Amount<br>3000.00                                                                                                                            |                                                                                                                                                       |
| City<br>Chicago                                                      | State<br>IL | Zip Code<br>60693                                                                                                                            | Transaction ID : <b>SE.27140</b><br>Date of Disbursement or Obligation<br>MM / DD / YYYY<br>05 / 08 / 2014                                            |
| Purpose of Expenditure<br>IE-McDaniel-Online Ads                     |             | Category/<br>Type<br>004                                                                                                                     |                                                                                                                                                       |
| Name of Federal Candidate<br>CHRISTOPHER BRIAN MCDANIEL              |             | <input checked="" type="checkbox"/> Support<br><input type="checkbox"/> Oppose                                                               | Office Sought: <input type="checkbox"/> House District: 00<br><input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: MS |
| Calendar Year-To-Date<br>Per Election for Office Sought<br>232869.26 |             | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▶ |                                                                                                                                                       |

|                                                                  |                                                                                                                         |         |
|------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------|---------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....    | ▶ <table border="1" data-bbox="1102 1650 1364 1656"> <tr><td data-bbox="1102 1650 1364 1656">2865.43</td></tr> </table> | 2865.43 |
| 2865.43                                                          |                                                                                                                         |         |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... | ▶ <table border="1" data-bbox="1102 1656 1364 1661"> <tr><td data-bbox="1102 1656 1364 1661"></td></tr> </table>        |         |
|                                                                  |                                                                                                                         |         |
| (c) <b>TOTAL</b> Independent Expenditures.....                   | ▶ <table border="1" data-bbox="1102 1661 1364 1669"> <tr><td data-bbox="1102 1661 1364 1669"></td></tr> </table>        |         |
|                                                                  |                                                                                                                         |         |

06 / 20 / 2014

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 94 OF 207  
 FOR LINE 24 OF FORM 3X

|                                                                                                                                                                                                                                                         |  |                                                                                                                                                   |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|---------------------------------------------------------------------------------------------------------------------------------------------------|
| NAME OF COMMITTEE (In Full)<br><b>FREEDOMWORKS FOR AMERICA</b>                                                                                                                                                                                          |  | <b>FEC IDENTIFICATION NUMBER ▼</b><br><div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00499020       </div> |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> |  |                                                                                                                                                   |

|                                                                                                                                  |                                                                                   |                                                                                                                                                                                                                                                          |                                  |
|----------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------|
| Full Name of Payee<br><b>Facebook</b>                                                                                            |                                                                                   | Date of Public Distribution/Dissemination<br><span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span><br>05 / 08 / 2014                                                                                                                |                                  |
| Mailing Address<br>15161 Collection Center Dr.                                                                                   |                                                                                   | Amount<br><span style="border: 1px solid black; padding: 2px;">3000.00</span>                                                                                                                                                                            |                                  |
| City<br>Chicago                                                                                                                  | State<br>IL                                                                       | Zip Code<br>60693                                                                                                                                                                                                                                        | Transaction ID : <b>SE.27141</b> |
| Purpose of Expenditure<br>IE-Cochran-Facebook                                                                                    | Category/<br>Type <span style="border: 1px solid black; padding: 2px;">004</span> | Date of Disbursement or Obligation<br><span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span><br>05 / 08 / 2014                                                                                                                       |                                  |
| Name of Federal Candidate<br>THAD COCHRAN                                                                                        |                                                                                   | <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose<br>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate    District: <u>00</u><br><input type="checkbox"/> President    State: <u>MS</u> |                                  |
| Calendar Year-To-Date<br>Per Election for Office Sought<br><span style="border: 1px solid black; padding: 2px;">235869.26</span> |                                                                                   | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶ _____                                                                                                  |                                  |

|                                                                                                                                 |                                                                                   |                                                                                                                                                                                                                                                          |                                  |
|---------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------|
| Full Name of Payee<br><b>Facebook</b>                                                                                           |                                                                                   | Date of Public Distribution/Dissemination<br><span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span><br>05 / 09 / 2014                                                                                                                |                                  |
| Mailing Address<br>15161 Collection Center Dr.                                                                                  |                                                                                   | Amount<br><span style="border: 1px solid black; padding: 2px;">2000.00</span>                                                                                                                                                                            |                                  |
| City<br>Chicago                                                                                                                 | State<br>IL                                                                       | Zip Code<br>60693                                                                                                                                                                                                                                        | Transaction ID : <b>SE.27165</b> |
| Purpose of Expenditure<br>IE-Birman-Online Ads                                                                                  | Category/<br>Type <span style="border: 1px solid black; padding: 2px;">004</span> | Date of Disbursement or Obligation<br><span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span><br>05 / 09 / 2014                                                                                                                       |                                  |
| Name of Federal Candidate<br>IGOR A BIRMAN                                                                                      |                                                                                   | <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose<br>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate    District: <u>07</u><br><input type="checkbox"/> President    State: <u>CA</u> |                                  |
| Calendar Year-To-Date<br>Per Election for Office Sought<br><span style="border: 1px solid black; padding: 2px;">20299.87</span> |                                                                                   | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶ _____                                                                                                  |                                  |

|                                                                    |                                                                     |
|--------------------------------------------------------------------|---------------------------------------------------------------------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶    | <span style="border: 1px solid black; padding: 2px;">5000.00</span> |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶ | <span style="border: 1px solid black; padding: 2px;"> </span>       |
| (c) <b>TOTAL</b> Independent Expenditures..... ▶                   | <span style="border: 1px solid black; padding: 2px;"> </span>       |

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

[Electronically Filed]

Date

MM / DD / YYYY  
 06 / 20 / 2014

Signature

|                                                         |             |                                                                                |                                                                                                                                                       |
|---------------------------------------------------------|-------------|--------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------|
| Full Name of Payee<br><b>Facebook</b>                   |             | Date of Public Distribution/Dissemination<br>MM / DD / YYYY<br>05 / 10 / 2014  |                                                                                                                                                       |
| Mailing Address<br>15161 Collection Center Dr.          |             | Amount<br>3600.00                                                              |                                                                                                                                                       |
| City<br>Chicago                                         | State<br>IL | Zip Code<br>60693                                                              | Transaction ID : <b>SE.27202</b><br>Date of Disbursement or Obligation<br>MM / DD / YYYY<br>05 / 10 / 2014                                            |
| Purpose of Expenditure<br>IE-Dinsdale-Online Ads        |             | Category/<br>Type<br>004                                                       |                                                                                                                                                       |
| Name of Federal Candidate<br>SID DINSDALE               |             | <input type="checkbox"/> Support<br><input checked="" type="checkbox"/> Oppose | Office Sought: <input type="checkbox"/> House District: 00<br><input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NE |
| Calendar Year-To-Date<br>Per Election for Office Sought |             | 73092.90                                                                       | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ►          |

|                                                                  |   |         |
|------------------------------------------------------------------|---|---------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....    | ▶ | 5600.00 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... | ▶ |         |
| (c) <b>TOTAL</b> Independent Expenditures.....                   | ▶ |         |

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**PAGE 96 OF 207  
FOR LINE 24 OF FORM 3X

|                                                                                                                                                                                                                                                                                                                                                             |             |                                                                                                   |                                                                                                                                                                     |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|---------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| NAME OF COMMITTEE (In Full)<br><b>FREEDOMWORKS FOR AMERICA</b>                                                                                                                                                                                                                                                                                              |             | FEC IDENTIFICATION NUMBER ▼<br><b>C</b> C00499020                                                 |                                                                                                                                                                     |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on                                                                                                                                                                                |             | M M M / D D D / Y Y Y Y Y Y                                                                       |                                                                                                                                                                     |
| Full Name of Payee<br><b>Facebook</b>                                                                                                                                                                                                                                                                                                                       |             | Date of Public Distribution/Dissemination<br>M M M / D D D / Y Y Y Y Y Y<br><b>05 / 16 / 2014</b> |                                                                                                                                                                     |
| Mailing Address<br>15161 Collection Center Dr.                                                                                                                                                                                                                                                                                                              |             | Amount<br><b>3500.00</b>                                                                          |                                                                                                                                                                     |
| City<br>Chicago                                                                                                                                                                                                                                                                                                                                             | State<br>IL | Zip Code<br>60693                                                                                 | Transaction ID : <b>SE.27242</b>                                                                                                                                    |
| Purpose of Expenditure<br>IE-Mathis-Online Ads                                                                                                                                                                                                                                                                                                              |             | Category/<br>Type <b>004</b>                                                                      | Date of Disbursement or Obligation<br>M M M / D D D / Y Y Y Y Y Y<br><b>05 / 16 / 2014</b>                                                                          |
| Name of Federal Candidate<br>CHAD DR MATHIS                                                                                                                                                                                                                                                                                                                 |             | <input checked="" type="checkbox"/> Support<br><input type="checkbox"/> Oppose                    | Office Sought: <input checked="" type="checkbox"/> House District: <b>06</b><br><input type="checkbox"/> President <input type="checkbox"/> Senate State: <b>AL</b> |
| Calendar Year-To-Date<br>Per Election for Office Sought                                                                                                                                                                                                                                                                                                     |             | <b>9522.13</b>                                                                                    | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶                   |
| Full Name of Payee<br><b>Facebook</b>                                                                                                                                                                                                                                                                                                                       |             | Date of Public Distribution/Dissemination<br>M M M / D D D / Y Y Y Y Y Y<br><b>05 / 16 / 2014</b> |                                                                                                                                                                     |
| Mailing Address<br>15161 Collection Center Dr.                                                                                                                                                                                                                                                                                                              |             | Amount<br><b>2000.00</b>                                                                          |                                                                                                                                                                     |
| City<br>Chicago                                                                                                                                                                                                                                                                                                                                             | State<br>IL | Zip Code<br>60693                                                                                 | Transaction ID : <b>SE.27255</b>                                                                                                                                    |
| Purpose of Expenditure<br>IE-Schultz-Online Ads                                                                                                                                                                                                                                                                                                             |             | Category/<br>Type <b>004</b>                                                                      | Date of Disbursement or Obligation<br>M M M / D D D / Y Y Y Y Y Y<br><b>05 / 16 / 2014</b>                                                                          |
| Name of Federal Candidate<br>MATTHEW DAVID SCHULTZ                                                                                                                                                                                                                                                                                                          |             | <input checked="" type="checkbox"/> Support<br><input type="checkbox"/> Oppose                    | Office Sought: <input checked="" type="checkbox"/> House District: <b>03</b><br><input type="checkbox"/> President <input type="checkbox"/> Senate State: <b>IA</b> |
| Calendar Year-To-Date<br>Per Election for Office Sought                                                                                                                                                                                                                                                                                                     |             | <b>2517.80</b>                                                                                    | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶                   |
| (a) SUBTOTAL of Itemized Independent Expenditures.....▶                                                                                                                                                                                                                                                                                                     |             | <b>5500.00</b>                                                                                    |                                                                                                                                                                     |
| (b) SUBTOTAL of Unitemized Independent Expenditures .....▶                                                                                                                                                                                                                                                                                                  |             |                                                                                                   |                                                                                                                                                                     |
| (c) TOTAL Independent Expenditures.....▶                                                                                                                                                                                                                                                                                                                    |             |                                                                                                   |                                                                                                                                                                     |
| Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. |             |                                                                                                   |                                                                                                                                                                     |
| Signature<br><br><i>R. Russ Walker</i>                                                                                                                                                                                                                                                                                                                      |             | Date<br>M M M / D D D / Y Y Y Y Y Y<br><b>06 / 20 / 2014</b>                                      |                                                                                                                                                                     |
|                                                                                                                                                                                                                                                                                                                                                             |             | [Electronically Filed]                                                                            |                                                                                                                                                                     |



**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 97 OF 207  
 FOR LINE 24 OF FORM 3X

|                                                                                                                                                                                                                                                                                                                                                             |  |                                                                                                                                                                        |                                                                                                                                                                                                                                                                          |  |  |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|
| NAME OF COMMITTEE (In Full)<br><b>FREEDOMWORKS FOR AMERICA</b>                                                                                                                                                                                                                                                                                              |  |                                                                                                                                                                        | FEC IDENTIFICATION NUMBER ▼<br><b>C</b> C00499020                                                                                                                                                                                                                        |  |  |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span>                                                                                                     |  |                                                                                                                                                                        |                                                                                                                                                                                                                                                                          |  |  |
| Full Name of Payee<br><b>Facebook</b>                                                                                                                                                                                                                                                                                                                       |  |                                                                                                                                                                        | Date of Public Distribution/Dissemination<br><span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span><br>05 / 29 / 2014                                                                                                                                |  |  |
| Mailing Address 15161 Collection Center Dr.                                                                                                                                                                                                                                                                                                                 |  |                                                                                                                                                                        | Amount<br><span style="border: 1px solid black; padding: 2px;">5000.00</span>                                                                                                                                                                                            |  |  |
| City State Zip Code<br>Chicago IL 60693                                                                                                                                                                                                                                                                                                                     |  | Transaction ID : <b>SE.35523</b><br>Date of Disbursement or Obligation<br><span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span><br>05 / 29 / 2014 |                                                                                                                                                                                                                                                                          |  |  |
| Purpose of Expenditure<br>IE-McDaniel-Online Ads                                                                                                                                                                                                                                                                                                            |  | Category/Type<br><span style="border: 1px solid black; padding: 2px;">004</span>                                                                                       |                                                                                                                                                                                                                                                                          |  |  |
| Name of Federal Candidate<br>CHRISTOPHER BRIAN MCDANIEL                                                                                                                                                                                                                                                                                                     |  |                                                                                                                                                                        | <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose<br>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate<br><input type="checkbox"/> President <input type="checkbox"/> General<br>District: 00 State: MS |  |  |
| Calendar Year-To-Date Per Election for Office Sought<br><span style="border: 1px solid black; padding: 2px;">289335.21</span>                                                                                                                                                                                                                               |  |                                                                                                                                                                        | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶                                                                                                                        |  |  |
| Full Name of Payee<br><b>Facebook</b>                                                                                                                                                                                                                                                                                                                       |  |                                                                                                                                                                        | Date of Public Distribution/Dissemination<br><span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span><br>05 / 29 / 2014                                                                                                                                |  |  |
| Mailing Address 15161 Collection Center Dr.                                                                                                                                                                                                                                                                                                                 |  |                                                                                                                                                                        | Amount<br><span style="border: 1px solid black; padding: 2px;">5000.00</span>                                                                                                                                                                                            |  |  |
| City State Zip Code<br>Chicago IL 60693                                                                                                                                                                                                                                                                                                                     |  | Transaction ID : <b>SE.35524</b><br>Date of Disbursement or Obligation<br><span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span><br>05 / 29 / 2014 |                                                                                                                                                                                                                                                                          |  |  |
| Purpose of Expenditure<br>IE-Cochran-Online Ads                                                                                                                                                                                                                                                                                                             |  | Category/Type<br><span style="border: 1px solid black; padding: 2px;">004</span>                                                                                       |                                                                                                                                                                                                                                                                          |  |  |
| Name of Federal Candidate<br>THAD COCHRAN                                                                                                                                                                                                                                                                                                                   |  |                                                                                                                                                                        | <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose<br>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate<br><input type="checkbox"/> President <input type="checkbox"/> General<br>District: 00 State: MS |  |  |
| Calendar Year-To-Date Per Election for Office Sought<br><span style="border: 1px solid black; padding: 2px;">294335.21</span>                                                                                                                                                                                                                               |  |                                                                                                                                                                        | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶                                                                                                                        |  |  |
| (a) SUBTOTAL of Itemized Independent Expenditures..... ▶                                                                                                                                                                                                                                                                                                    |  |                                                                                                                                                                        | <span style="border: 1px solid black; padding: 2px;">10000.00</span>                                                                                                                                                                                                     |  |  |
| (b) SUBTOTAL of Unitemized Independent Expenditures ..... ▶                                                                                                                                                                                                                                                                                                 |  |                                                                                                                                                                        | <span style="border: 1px solid black; padding: 2px;"></span>                                                                                                                                                                                                             |  |  |
| (c) TOTAL Independent Expenditures..... ▶                                                                                                                                                                                                                                                                                                                   |  |                                                                                                                                                                        | <span style="border: 1px solid black; padding: 2px;"></span>                                                                                                                                                                                                             |  |  |
| 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. |  |                                                                                                                                                                        |                                                                                                                                                                                                                                                                          |  |  |
| Signature <u>R. Russ Walker</u><br><div style="text-align: right;">[Electronically Filed]</div>                                                                                                                                                                                                                                                             |  |                                                                                                                                                                        | Date <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span><br>06 / 20 / 2014                                                                                                                                                                        |  |  |

|                                                         |             |                                                                                                               |                                                                                                                                                                               |
|---------------------------------------------------------|-------------|---------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Full Name of Payee<br><b>Facebook</b>                   |             | Date of Public Distribution/Dissemination<br><div> <div>MM / DD / YYYY</div> <div>05 / 31 / 2014</div> </div> |                                                                                                                                                                               |
| Mailing Address<br>15161 Collection Center Dr.          |             | Amount<br><div> <div>Amount</div> <div>1500.00</div> </div>                                                   |                                                                                                                                                                               |
| City<br>Chicago                                         | State<br>IL | Zip Code<br>60693                                                                                             | <b>Transaction ID : SE.32539</b><br>Date of Disbursement or Obligation<br><div> <div>MM / DD / YYYY</div> <div>05 / 31 / 2014</div> </div>                                    |
| Purpose of Expenditure<br>IE-McDaniel-Online Ads        |             | Category/<br>Type<br>004                                                                                      |                                                                                                                                                                               |
| Name of Federal Candidate<br>CHRISTOPHER BRIAN MCDANIEL |             | <input checked="" type="checkbox"/> Support<br><input type="checkbox"/> Oppose                                | Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate<br><input type="checkbox"/> President <input type="checkbox"/> Other (specify) _____ |
| Calendar Year-To-Date<br>Per Election for Office Sought |             | <div> <div>Amount</div> <div>324578.28</div> </div>                                                           | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ► _____                            |

|                                                                  |   |         |
|------------------------------------------------------------------|---|---------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....    | ▶ | 5000.00 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... | ▶ |         |
| (c) <b>TOTAL</b> Independent Expenditures.....                   | ▶ |         |

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 99 OF 207  
 FOR LINE 24 OF FORM 3X

|                                                                                                                                                                                                                                                         |  |                                                                                                                                                   |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|---------------------------------------------------------------------------------------------------------------------------------------------------|
| NAME OF COMMITTEE (In Full)<br><b>FREEDOMWORKS FOR AMERICA</b>                                                                                                                                                                                          |  | <b>FEC IDENTIFICATION NUMBER ▼</b><br><div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00499020       </div> |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> |  |                                                                                                                                                   |

|                                                                                                                                  |                                                                                   |                                                                                                                                                                                                                                                          |                                  |
|----------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------|
| Full Name of Payee<br><b>Facebook</b>                                                                                            |                                                                                   | Date of Public Distribution/Dissemination<br><span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span><br>05 / 31 / 2014                                                                                                                |                                  |
| Mailing Address<br>15161 Collection Center Dr.                                                                                   |                                                                                   | Amount<br><span style="border: 1px solid black; padding: 2px;">1500.00</span>                                                                                                                                                                            |                                  |
| City<br>Chicago                                                                                                                  | State<br>IL                                                                       | Zip Code<br>60693                                                                                                                                                                                                                                        | Transaction ID : <b>SE.32540</b> |
| Purpose of Expenditure<br>IE-Cochran-Online Ads                                                                                  | Category/<br>Type <span style="border: 1px solid black; padding: 2px;">004</span> | Date of Disbursement or Obligation<br><span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span><br>05 / 31 / 2014                                                                                                                       |                                  |
| Name of Federal Candidate<br>THAD COCHRAN                                                                                        |                                                                                   | <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose<br>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate    District: <u>00</u><br><input type="checkbox"/> President    State: <u>MS</u> |                                  |
| Calendar Year-To-Date<br>Per Election for Office Sought<br><span style="border: 1px solid black; padding: 2px;">326078.28</span> |                                                                                   | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶ _____                                                                                                  |                                  |

|                                                                                                                                  |                                                                                   |                                                                                                                                                                                                                                                          |                                  |
|----------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------|
| Full Name of Payee<br><b>Fox &amp; Hound</b>                                                                                     |                                                                                   | Date of Public Distribution/Dissemination<br><span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span><br>05 / 03 / 2014                                                                                                                |                                  |
| Mailing Address<br>8711 Lindholm Dr.                                                                                             |                                                                                   | Amount<br><span style="border: 1px solid black; padding: 2px;">588.35</span>                                                                                                                                                                             |                                  |
| City<br>Charlotte                                                                                                                | State<br>NC                                                                       | Zip Code<br>28078                                                                                                                                                                                                                                        | Transaction ID : <b>SE.26986</b> |
| Purpose of Expenditure<br>IE-Brannon-Food/Beverage                                                                               | Category/<br>Type <span style="border: 1px solid black; padding: 2px;">004</span> | Date of Disbursement or Obligation<br><span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span><br>05 / 03 / 2014                                                                                                                       |                                  |
| Name of Federal Candidate<br>GREGORY JOSEPH BRANNON                                                                              |                                                                                   | <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose<br>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate    District: <u>00</u><br><input type="checkbox"/> President    State: <u>NC</u> |                                  |
| Calendar Year-To-Date<br>Per Election for Office Sought<br><span style="border: 1px solid black; padding: 2px;">142494.31</span> |                                                                                   | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶ _____                                                                                                  |                                  |

|                                                                   |                                                                     |
|-------------------------------------------------------------------|---------------------------------------------------------------------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....▶    | <span style="border: 1px solid black; padding: 2px;">2088.35</span> |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....▶ | <span style="border: 1px solid black; padding: 2px;"> </span>       |
| (c) <b>TOTAL</b> Independent Expenditures.....▶                   | <span style="border: 1px solid black; padding: 2px;"> </span>       |

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

[Electronically Filed]

Date

MM / DD / YYYY  
 06 / 20 / 2014

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 100 OF 207  
 FOR LINE 24 OF FORM 3X

|                                                                                                                                                                                                                                                                                                                                                             |  |                                                                                  |                                                                                                                                                                                                                                            |                                                                                                                                    |                                  |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|----------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------|----------------------------------|
| NAME OF COMMITTEE (In Full)<br><b>FREEDOMWORKS FOR AMERICA</b>                                                                                                                                                                                                                                                                                              |  |                                                                                  | FEC IDENTIFICATION NUMBER ▼<br><b>C</b> C00499020                                                                                                                                                                                          |                                                                                                                                    |                                  |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span>                                                                                                     |  |                                                                                  |                                                                                                                                                                                                                                            |                                                                                                                                    |                                  |
| Full Name of Payee<br><b>Candace Franklin</b>                                                                                                                                                                                                                                                                                                               |  |                                                                                  | Date of Public Distribution/Dissemination<br><span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span><br>05 / 01 / 2014                                                                                                  |                                                                                                                                    |                                  |
| Mailing Address<br>1687 KY Hwy 1247                                                                                                                                                                                                                                                                                                                         |  |                                                                                  | Amount<br><span style="border: 1px solid black; padding: 2px;">4000.00</span>                                                                                                                                                              |                                                                                                                                    |                                  |
| City<br>Stanford                                                                                                                                                                                                                                                                                                                                            |  | State<br>KY                                                                      | Zip Code<br>40484                                                                                                                                                                                                                          |                                                                                                                                    | Transaction ID : <b>SE.26901</b> |
| Purpose of Expenditure<br>IE-Bevin-Strategic Consulting                                                                                                                                                                                                                                                                                                     |  | Category/Type<br><span style="border: 1px solid black; padding: 2px;">001</span> |                                                                                                                                                                                                                                            | Date of Disbursement or Obligation<br><span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span><br>05 / 01 / 2014 |                                  |
| Name of Federal Candidate<br>MATTHEW GRISWOLD BEVIN                                                                                                                                                                                                                                                                                                         |  |                                                                                  | <input checked="" type="checkbox"/> Support    Office Sought: <input type="checkbox"/> House    District: 00<br><input type="checkbox"/> Oppose <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate    State: KY |                                                                                                                                    |                                  |
| Calendar Year-To-Date<br>Per Election for Office Sought<br><span style="border: 1px solid black; padding: 2px;">282544.78</span>                                                                                                                                                                                                                            |  |                                                                                  | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶                                                                                          |                                                                                                                                    |                                  |
| Full Name of Payee<br><b>Freedomworks, Inc.</b>                                                                                                                                                                                                                                                                                                             |  |                                                                                  | Date of Public Distribution/Dissemination<br><span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span><br>05 / 01 / 2014                                                                                                  |                                                                                                                                    |                                  |
| Mailing Address<br>400 N Capitol St., NW<br>Suite 735                                                                                                                                                                                                                                                                                                       |  |                                                                                  | Amount<br><span style="border: 1px solid black; padding: 2px;">2.74</span>                                                                                                                                                                 |                                                                                                                                    |                                  |
| City<br>Washington                                                                                                                                                                                                                                                                                                                                          |  | State<br>DC                                                                      | Zip Code<br>20001                                                                                                                                                                                                                          |                                                                                                                                    | Transaction ID : <b>SE.26902</b> |
| Purpose of Expenditure<br>IE-McConnell-Email/Social Media/Printing                                                                                                                                                                                                                                                                                          |  | Category/Type<br><span style="border: 1px solid black; padding: 2px;">004</span> |                                                                                                                                                                                                                                            | Date of Disbursement or Obligation<br><span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span><br>05 / 01 / 2014 |                                  |
| Name of Federal Candidate<br>MITCH MCCONNELL                                                                                                                                                                                                                                                                                                                |  |                                                                                  | <input type="checkbox"/> Support    Office Sought: <input type="checkbox"/> House    District: 00<br><input checked="" type="checkbox"/> Oppose <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate    State: KY |                                                                                                                                    |                                  |
| Calendar Year-To-Date<br>Per Election for Office Sought<br><span style="border: 1px solid black; padding: 2px;">282547.52</span>                                                                                                                                                                                                                            |  |                                                                                  | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶                                                                                          |                                                                                                                                    |                                  |
| (a) SUBTOTAL of Itemized Independent Expenditures..... ▶                                                                                                                                                                                                                                                                                                    |  |                                                                                  | <span style="border: 1px solid black; padding: 2px;">4002.74</span>                                                                                                                                                                        |                                                                                                                                    |                                  |
| (b) SUBTOTAL of Unitemized Independent Expenditures ..... ▶                                                                                                                                                                                                                                                                                                 |  |                                                                                  | <span style="border: 1px solid black; padding: 2px;"></span>                                                                                                                                                                               |                                                                                                                                    |                                  |
| (c) TOTAL Independent Expenditures..... ▶                                                                                                                                                                                                                                                                                                                   |  |                                                                                  | <span style="border: 1px solid black; padding: 2px;"></span>                                                                                                                                                                               |                                                                                                                                    |                                  |
| 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. |  |                                                                                  |                                                                                                                                                                                                                                            |                                                                                                                                    |                                  |
| Signature <u>R. Russ Walker</u>                                                                                                                                                                                                                                                                                                                             |  |                                                                                  | Date <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span><br>06 / 20 / 2014                                                                                                                                          |                                                                                                                                    |                                  |

[Electronically Filed]

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**PAGE 101 OF 207  
FOR LINE 24 OF FORM 3X

|                                                                                                                                                                                                                                                                                                                                                             |                    |                                                                                      |                                                                                                                                                                     |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------|--------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| NAME OF COMMITTEE (In Full)<br><b>FREEDOMWORKS FOR AMERICA</b>                                                                                                                                                                                                                                                                                              |                    | FEC IDENTIFICATION NUMBER ▼<br><b>C</b> C00499020                                    |                                                                                                                                                                     |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on                                                                                                                                                                                |                    | MM / DD / YYYY                                                                       |                                                                                                                                                                     |
| Full Name of Payee<br><b>Freedomworks, Inc.</b>                                                                                                                                                                                                                                                                                                             |                    | Date of Public Distribution/Dissemination<br>MM / DD / YYYY<br><b>05 / 01 / 2014</b> |                                                                                                                                                                     |
| Mailing Address<br><b>400 N Capitol St., NW<br/>Suite 735</b>                                                                                                                                                                                                                                                                                               |                    | Amount<br><b>50.33</b>                                                               |                                                                                                                                                                     |
| City<br><b>Washington</b>                                                                                                                                                                                                                                                                                                                                   | State<br><b>DC</b> | Zip Code<br><b>20001</b>                                                             | Transaction ID : <b>SE.26913</b>                                                                                                                                    |
| Purpose of Expenditure<br><b>IE-Brannon-Travel</b>                                                                                                                                                                                                                                                                                                          |                    | Category/<br>Type <b>002</b>                                                         | Date of Disbursement or Obligation<br>MM / DD / YYYY<br><b>05 / 01 / 2014</b>                                                                                       |
| Name of Federal Candidate<br><b>GREGORY JOSEPH BRANNON</b>                                                                                                                                                                                                                                                                                                  |                    | <input checked="" type="checkbox"/> Support<br><input type="checkbox"/> Oppose       | Office Sought: <input type="checkbox"/> House District: <b>00</b><br><input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <b>NC</b> |
| Calendar Year-To-Date<br>Per Election for Office Sought                                                                                                                                                                                                                                                                                                     |                    | <b>134807.05</b>                                                                     | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶                   |
| Full Name of Payee<br><b>Freedomworks, Inc.</b>                                                                                                                                                                                                                                                                                                             |                    | Date of Public Distribution/Dissemination<br>MM / DD / YYYY<br><b>05 / 01 / 2014</b> |                                                                                                                                                                     |
| Mailing Address<br><b>400 N Capitol St., NW<br/>Suite 735</b>                                                                                                                                                                                                                                                                                               |                    | Amount<br><b>142.49</b>                                                              |                                                                                                                                                                     |
| City<br><b>Washington</b>                                                                                                                                                                                                                                                                                                                                   | State<br><b>DC</b> | Zip Code<br><b>20001</b>                                                             | Transaction ID : <b>SE.26914</b>                                                                                                                                    |
| Purpose of Expenditure<br><b>IE-Hagan-Email/Social Media/Printing</b>                                                                                                                                                                                                                                                                                       |                    | Category/<br>Type <b>004</b>                                                         | Date of Disbursement or Obligation<br>MM / DD / YYYY<br><b>05 / 01 / 2014</b>                                                                                       |
| Name of Federal Candidate<br><b>KAY R HAGAN</b>                                                                                                                                                                                                                                                                                                             |                    | <input type="checkbox"/> Support<br><input checked="" type="checkbox"/> Oppose       | Office Sought: <input type="checkbox"/> House District: <b>00</b><br><input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <b>NC</b> |
| Calendar Year-To-Date<br>Per Election for Office Sought                                                                                                                                                                                                                                                                                                     |                    | <b>134949.54</b>                                                                     | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶                   |
| (a) SUBTOTAL of Itemized Independent Expenditures..... ▶                                                                                                                                                                                                                                                                                                    |                    | <b>192.82</b>                                                                        |                                                                                                                                                                     |
| (b) SUBTOTAL of Unitemized Independent Expenditures ..... ▶                                                                                                                                                                                                                                                                                                 |                    |                                                                                      |                                                                                                                                                                     |
| (c) TOTAL Independent Expenditures..... ▶                                                                                                                                                                                                                                                                                                                   |                    |                                                                                      |                                                                                                                                                                     |
| Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. |                    |                                                                                      |                                                                                                                                                                     |
| Signature<br><b>R. Russ Walker</b>                                                                                                                                                                                                                                                                                                                          |                    | Date<br>MM / DD / YYYY<br><b>06 / 20 / 2014</b>                                      |                                                                                                                                                                     |
|                                                                                                                                                                                                                                                                                                                                                             |                    | [Electronically Filed]                                                               |                                                                                                                                                                     |

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**PAGE 102 OF 207  
FOR LINE 24 OF FORM 3X

|                                                                                                                                                                                                                                                                                                                                                             |             |                                                                                                                                                   |                                                                                                                                                                     |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|---------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| NAME OF COMMITTEE (In Full)<br><b>FREEDOMWORKS FOR AMERICA</b>                                                                                                                                                                                                                                                                                              |             | FEC IDENTIFICATION NUMBER ▼<br><b>C</b> C00499020                                                                                                 |                                                                                                                                                                     |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on                                                                                                                                                                                |             | MM / DD / YYYY                                                                                                                                    |                                                                                                                                                                     |
| Full Name of Payee<br><b>Freedomworks, Inc.</b>                                                                                                                                                                                                                                                                                                             |             | Date of Public Distribution/Dissemination<br>MM / DD / YYYY<br><b>05 / 01 / 2014</b>                                                              |                                                                                                                                                                     |
| Mailing Address<br>400 N Capitol St., NW<br>Suite 735                                                                                                                                                                                                                                                                                                       |             | Amount<br><b>60.97</b>                                                                                                                            |                                                                                                                                                                     |
| City<br>Washington                                                                                                                                                                                                                                                                                                                                          | State<br>DC | Zip Code<br>20001                                                                                                                                 | Transaction ID : <b>SE.26924</b>                                                                                                                                    |
| Purpose of Expenditure<br>IE-Sasse-Email/Social Media/Printing                                                                                                                                                                                                                                                                                              |             | Category/<br>Type <b>004</b>                                                                                                                      | Date of Disbursement or Obligation<br>MM / DD / YYYY<br><b>05 / 01 / 2014</b>                                                                                       |
| Name of Federal Candidate<br><b>BENJAMIN E SASSE</b>                                                                                                                                                                                                                                                                                                        |             | <input checked="" type="checkbox"/> Support<br><input type="checkbox"/> Oppose                                                                    | Office Sought: <input type="checkbox"/> House District: <b>00</b><br><input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <b>NE</b> |
| Calendar Year-To-Date<br>Per Election for Office Sought                                                                                                                                                                                                                                                                                                     |             | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶ |                                                                                                                                                                     |
| Full Name of Payee<br><b>Freedomworks, Inc.</b>                                                                                                                                                                                                                                                                                                             |             | Date of Public Distribution/Dissemination<br>MM / DD / YYYY<br><b>05 / 01 / 2014</b>                                                              |                                                                                                                                                                     |
| Mailing Address<br>400 N Capitol St., NW<br>Suite 735                                                                                                                                                                                                                                                                                                       |             | Amount<br><b>97.20</b>                                                                                                                            |                                                                                                                                                                     |
| City<br>Washington                                                                                                                                                                                                                                                                                                                                          | State<br>DC | Zip Code<br>20001                                                                                                                                 | Transaction ID : <b>SE.26931</b>                                                                                                                                    |
| Purpose of Expenditure<br>IE-Lynch-Email/Social Media/Printing                                                                                                                                                                                                                                                                                              |             | Category/<br>Type <b>004</b>                                                                                                                      | Date of Disbursement or Obligation<br>MM / DD / YYYY<br><b>05 / 01 / 2014</b>                                                                                       |
| Name of Federal Candidate<br><b>MATT LYNCH</b>                                                                                                                                                                                                                                                                                                              |             | <input checked="" type="checkbox"/> Support<br><input type="checkbox"/> Oppose                                                                    | Office Sought: <input checked="" type="checkbox"/> House District: <b>14</b><br><input type="checkbox"/> President <input type="checkbox"/> Senate State: <b>OH</b> |
| Calendar Year-To-Date<br>Per Election for Office Sought                                                                                                                                                                                                                                                                                                     |             | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶ |                                                                                                                                                                     |
| (a) SUBTOTAL of Itemized Independent Expenditures..... ▶                                                                                                                                                                                                                                                                                                    |             | <b>158.17</b>                                                                                                                                     |                                                                                                                                                                     |
| (b) SUBTOTAL of Unitemized Independent Expenditures ..... ▶                                                                                                                                                                                                                                                                                                 |             |                                                                                                                                                   |                                                                                                                                                                     |
| (c) TOTAL Independent Expenditures..... ▶                                                                                                                                                                                                                                                                                                                   |             |                                                                                                                                                   |                                                                                                                                                                     |
| Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. |             |                                                                                                                                                   |                                                                                                                                                                     |
| Signature<br><br><i>R. Russ Walker</i>                                                                                                                                                                                                                                                                                                                      |             | Date<br>MM / DD / YYYY<br><b>06 / 20 / 2014</b>                                                                                                   |                                                                                                                                                                     |
|                                                                                                                                                                                                                                                                                                                                                             |             | [Electronically Filed]                                                                                                                            |                                                                                                                                                                     |

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 103 OF 207  
 FOR LINE 24 OF FORM 3X

|                                                                                                                                                                              |  |                                                                                                                                                             |  |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|-------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| NAME OF COMMITTEE (In Full)<br><b>FREEDOMWORKS FOR AMERICA</b>                                                                                                               |  | FEC IDENTIFICATION NUMBER ▼<br><b>C</b> C00499020                                                                                                           |  |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on |  | <div style="border: 1px solid black; padding: 2px;"> <div style="display: flex; justify-content: space-between;"> <span>MM / DD / YYYY</span> </div> </div> |  |

|                                                                   |                   |                                                                                                                                                   |                                                                                                                                                       |
|-------------------------------------------------------------------|-------------------|---------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------|
| Full Name of Payee<br><b>Freedomworks, Inc.</b>                   |                   | Date of Public Distribution/Dissemination<br>MM / DD / YYYY<br>05 / 01 / 2014                                                                     |                                                                                                                                                       |
| Mailing Address 400 N Capitol St., NW<br>Suite 735                |                   | Amount<br>106.26                                                                                                                                  |                                                                                                                                                       |
| City Washington                                                   | State DC          | Zip Code 20001                                                                                                                                    | Transaction ID : SE.27039                                                                                                                             |
| Purpose of Expenditure<br>IE-McDaniel-Email/Social Media/Printing | Category/Type 004 | Date of Disbursement or Obligation<br>MM / DD / YYYY<br>05 / 01 / 2014                                                                            |                                                                                                                                                       |
| Name of Federal Candidate<br>CHRISTOPHER BRIAN MCDANIEL           |                   | <input checked="" type="checkbox"/> Support<br><input type="checkbox"/> Oppose                                                                    | Office Sought: <input type="checkbox"/> House District: 00<br><input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: MS |
| Calendar Year-To-Date<br>Per Election for Office Sought           |                   | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶ |                                                                                                                                                       |

|                                                                  |                   |                                                                                                                                                   |                                                                                                                                                       |
|------------------------------------------------------------------|-------------------|---------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------|
| Full Name of Payee<br><b>Freedomworks, Inc.</b>                  |                   | Date of Public Distribution/Dissemination<br>MM / DD / YYYY<br>05 / 01 / 2014                                                                     |                                                                                                                                                       |
| Mailing Address 400 N Capitol St., NW<br>Suite 735               |                   | Amount<br>5.49                                                                                                                                    |                                                                                                                                                       |
| City Washington                                                  | State DC          | Zip Code 20001                                                                                                                                    | Transaction ID : SE.35422                                                                                                                             |
| Purpose of Expenditure<br>IE-Shannon-Email/Social Media/Printing | Category/Type 004 | Date of Disbursement or Obligation<br>MM / DD / YYYY<br>05 / 01 / 2014                                                                            |                                                                                                                                                       |
| Name of Federal Candidate<br>T W SHANNON                         |                   | <input checked="" type="checkbox"/> Support<br><input type="checkbox"/> Oppose                                                                    | Office Sought: <input type="checkbox"/> House District: 00<br><input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: OK |
| Calendar Year-To-Date<br>Per Election for Office Sought          |                   | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶ |                                                                                                                                                       |

|                                                           |        |
|-----------------------------------------------------------|--------|
| (a) SUBTOTAL of Itemized Independent Expenditures.....▶   | 111.75 |
| (b) SUBTOTAL of Unitemized Independent Expenditures.....▶ |        |
| (c) TOTAL Independent Expenditures.....▶                  |        |

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

R. Russ Walker

[Electronically Filed]

Date

 MM / DD / YYYY  
 06 / 20 / 2014

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 104 OF 207  
 FOR LINE 24 OF FORM 3X

|                                                                                                                                                                              |  |  |                                                                                                                                                   |  |  |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|---------------------------------------------------------------------------------------------------------------------------------------------------|--|--|
| NAME OF COMMITTEE (In Full)<br><b>FREEDOMWORKS FOR AMERICA</b>                                                                                                               |  |  | FEC IDENTIFICATION NUMBER ▼<br><b>C</b> C00499020                                                                                                 |  |  |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on |  |  | <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY</div> <div>MM / DD / YYYY</div> <div>MM / DD / YYYY</div> </div> |  |  |

  

|                                                                   |             |                                                                                |                                                                                                                                                       |  |  |
|-------------------------------------------------------------------|-------------|--------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|
| Full Name of Payee<br><b>Freedomworks, Inc.</b>                   |             |                                                                                | Date of Public Distribution/Dissemination<br>MM / DD / YYYY<br>05 / 02 / 2014                                                                         |  |  |
| Mailing Address<br>400 N Capitol St., NW<br>Suite 735             |             |                                                                                | Amount<br>951.68                                                                                                                                      |  |  |
| City<br>Washington                                                | State<br>DC | Zip Code<br>20001                                                              | Transaction ID : SE.26956                                                                                                                             |  |  |
| Purpose of Expenditure<br>IE-Hagan-Email/Social Media/Printing    |             | Category/<br>Type 004                                                          | Date of Disbursement or Obligation<br>MM / DD / YYYY<br>05 / 02 / 2014                                                                                |  |  |
| Name of Federal Candidate<br>KAY R HAGAN                          |             | <input type="checkbox"/> Support<br><input checked="" type="checkbox"/> Oppose | Office Sought: <input type="checkbox"/> House District: 00<br><input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NC |  |  |
| Calendar Year-To-Date<br>Per Election for Office Sought 135901.22 |             |                                                                                | Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▶     |  |  |

  

|                                                                   |             |                                                                                |                                                                                                                                                       |  |  |
|-------------------------------------------------------------------|-------------|--------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|
| Full Name of Payee<br><b>Freedomworks, Inc.</b>                   |             |                                                                                | Date of Public Distribution/Dissemination<br>MM / DD / YYYY<br>05 / 02 / 2014                                                                         |  |  |
| Mailing Address<br>400 N Capitol St., NW<br>Suite 735             |             |                                                                                | Amount<br>1870.85                                                                                                                                     |  |  |
| City<br>Washington                                                | State<br>DC | Zip Code<br>20001                                                              | Transaction ID : SE.26968                                                                                                                             |  |  |
| Purpose of Expenditure<br>IE-Brannon-Travel                       |             | Category/<br>Type 002                                                          | Date of Disbursement or Obligation<br>MM / DD / YYYY<br>05 / 02 / 2014                                                                                |  |  |
| Name of Federal Candidate<br>GREGORY JOSEPH BRANNON               |             | <input checked="" type="checkbox"/> Support<br><input type="checkbox"/> Oppose | Office Sought: <input type="checkbox"/> House District: 00<br><input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NC |  |  |
| Calendar Year-To-Date<br>Per Election for Office Sought 141045.89 |             |                                                                                | Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▶     |  |  |

  

|                                                                    |         |
|--------------------------------------------------------------------|---------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶    | 2822.53 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶ |         |
| (c) <b>TOTAL</b> Independent Expenditures..... ▶                   |         |

  

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

R. Russ Walker

Signature \_\_\_\_\_

[Electronically Filed]

Date

MM / DD / YYYY  
06 / 20 / 2014



**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 105 OF 207  
 FOR LINE 24 OF FORM 3X

|                                                                                                                                                                              |  |  |                                                                                                                                                   |  |  |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|---------------------------------------------------------------------------------------------------------------------------------------------------|--|--|
| NAME OF COMMITTEE (In Full)<br><b>FREEDOMWORKS FOR AMERICA</b>                                                                                                               |  |  | FEC IDENTIFICATION NUMBER ▼<br><b>C</b> C00499020                                                                                                 |  |  |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on |  |  | <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY</div> <div>MM / DD / YYYY</div> <div>MM / DD / YYYY</div> </div> |  |  |

  

|                                                                                             |             |                       |                                                                                                                                                   |  |  |
|---------------------------------------------------------------------------------------------|-------------|-----------------------|---------------------------------------------------------------------------------------------------------------------------------------------------|--|--|
| Full Name of Payee<br><b>Freedomworks, Inc.</b>                                             |             |                       | Date of Public Distribution/Dissemination<br>MM / DD / YYYY<br>05 / 02 / 2014                                                                     |  |  |
| Mailing Address<br>400 N Capitol St., NW<br>Suite 735                                       |             |                       | Amount<br>196.84                                                                                                                                  |  |  |
| City<br>Washington                                                                          | State<br>DC | Zip Code<br>20001     | Transaction ID : SE.27031                                                                                                                         |  |  |
| Purpose of Expenditure<br>IE-Sasse-Email/Social Media/Printing                              |             | Category/<br>Type 004 | Date of Disbursement or Obligation<br>MM / DD / YYYY<br>05 / 02 / 2014                                                                            |  |  |
| Name of Federal Candidate<br>BENJAMIN E SASSE                                               |             |                       | <input checked="" type="checkbox"/> Support<br><input type="checkbox"/> Oppose                                                                    |  |  |
| Office Sought:<br><input type="checkbox"/> House <input checked="" type="checkbox"/> Senate |             |                       | District: 00<br>State: NE                                                                                                                         |  |  |
| Calendar Year-To-Date<br>Per Election for Office Sought                                     |             |                       | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶ |  |  |
| 20352.86                                                                                    |             |                       |                                                                                                                                                   |  |  |

  

|                                                                                             |             |                       |                                                                                                                                                   |  |  |
|---------------------------------------------------------------------------------------------|-------------|-----------------------|---------------------------------------------------------------------------------------------------------------------------------------------------|--|--|
| Full Name of Payee<br><b>Freedomworks, Inc.</b>                                             |             |                       | Date of Public Distribution/Dissemination<br>MM / DD / YYYY<br>05 / 02 / 2014                                                                     |  |  |
| Mailing Address<br>400 N Capitol St., NW<br>Suite 735                                       |             |                       | Amount<br>106.26                                                                                                                                  |  |  |
| City<br>Washington                                                                          | State<br>DC | Zip Code<br>20001     | Transaction ID : SE.27042                                                                                                                         |  |  |
| Purpose of Expenditure<br>IE-McDaniel-Email/Social Media/Printing                           |             | Category/<br>Type 004 | Date of Disbursement or Obligation<br>MM / DD / YYYY<br>05 / 02 / 2014                                                                            |  |  |
| Name of Federal Candidate<br>CHRISTOPHER BRIAN MCDANIEL                                     |             |                       | <input checked="" type="checkbox"/> Support<br><input type="checkbox"/> Oppose                                                                    |  |  |
| Office Sought:<br><input type="checkbox"/> House <input checked="" type="checkbox"/> Senate |             |                       | District: 00<br>State: MS                                                                                                                         |  |  |
| Calendar Year-To-Date<br>Per Election for Office Sought                                     |             |                       | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶ |  |  |
| 158105.47                                                                                   |             |                       |                                                                                                                                                   |  |  |

  

|                                                                    |        |
|--------------------------------------------------------------------|--------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶    | 303.10 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶ |        |
| (c) <b>TOTAL</b> Independent Expenditures..... ▶                   |        |

  

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

R. Russ Walker

Signature

[Electronically Filed]

Date

MM / DD / YYYY

06 / 20 / 2014

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 106 OF 207  
 FOR LINE 24 OF FORM 3X

|                                                                                                                                                                              |  |  |                                                                                                                                                   |  |  |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|---------------------------------------------------------------------------------------------------------------------------------------------------|--|--|
| NAME OF COMMITTEE (In Full)<br><b>FREEDOMWORKS FOR AMERICA</b>                                                                                                               |  |  | FEC IDENTIFICATION NUMBER ▼<br><b>C</b> C00499020                                                                                                 |  |  |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on |  |  | <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY</div> <div>MM / DD / YYYY</div> <div>MM / DD / YYYY</div> </div> |  |  |

  

|                                                                    |             |                                                                                |                                                                                                                                                       |  |  |
|--------------------------------------------------------------------|-------------|--------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|
| Full Name of Payee<br><b>Freedomworks, Inc.</b>                    |             |                                                                                | Date of Public Distribution/Dissemination<br>MM / DD / YYYY<br>05 / 02 / 2014                                                                         |  |  |
| Mailing Address<br>400 N Capitol St., NW<br>Suite 735              |             |                                                                                | Amount<br>2.74                                                                                                                                        |  |  |
| City<br>Washington                                                 | State<br>DC | Zip Code<br>20001                                                              | Transaction ID : SE.27271                                                                                                                             |  |  |
| Purpose of Expenditure<br>IE-McConnell-Email/Social Media/Printing |             | Category/<br>Type 004                                                          | Date of Disbursement or Obligation<br>MM / DD / YYYY<br>05 / 02 / 2014                                                                                |  |  |
| Name of Federal Candidate<br>MITCH MCCONNELL                       |             | <input type="checkbox"/> Support<br><input checked="" type="checkbox"/> Oppose | Office Sought: <input type="checkbox"/> House District: 00<br><input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: KY |  |  |
| Calendar Year-To-Date<br>Per Election for Office Sought 282550.26  |             |                                                                                | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶     |  |  |

  

|                                                                  |             |                                                                                |                                                                                                                                                       |  |  |
|------------------------------------------------------------------|-------------|--------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|
| Full Name of Payee<br><b>Freedomworks, Inc.</b>                  |             |                                                                                | Date of Public Distribution/Dissemination<br>MM / DD / YYYY<br>05 / 02 / 2014                                                                         |  |  |
| Mailing Address<br>400 N Capitol St., NW<br>Suite 735            |             |                                                                                | Amount<br>5.49                                                                                                                                        |  |  |
| City<br>Washington                                               | State<br>DC | Zip Code<br>20001                                                              | Transaction ID : SE.35423                                                                                                                             |  |  |
| Purpose of Expenditure<br>IE-Shannon-Email/Social Media/Printing |             | Category/<br>Type 004                                                          | Date of Disbursement or Obligation<br>MM / DD / YYYY<br>05 / 02 / 2014                                                                                |  |  |
| Name of Federal Candidate<br>T W SHANNON                         |             | <input checked="" type="checkbox"/> Support<br><input type="checkbox"/> Oppose | Office Sought: <input type="checkbox"/> House District: 00<br><input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: OK |  |  |
| Calendar Year-To-Date<br>Per Election for Office Sought 64.61    |             |                                                                                | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶     |  |  |

  

|                                                                    |      |
|--------------------------------------------------------------------|------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶    | 8.23 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶ |      |
| (c) <b>TOTAL</b> Independent Expenditures..... ▶                   |      |

  

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

R. Russ Walker

Signature \_\_\_\_\_

[Electronically Filed]

Date MM / DD / YYYY  
06 / 20 / 2014

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 107 OF 207  
 FOR LINE 24 OF FORM 3X

|                                                                                                                                                                              |  |  |                                                                                                                                                   |  |  |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|---------------------------------------------------------------------------------------------------------------------------------------------------|--|--|
| NAME OF COMMITTEE (In Full)<br><b>FREEDOMWORKS FOR AMERICA</b>                                                                                                               |  |  | FEC IDENTIFICATION NUMBER ▼<br><b>C</b> C00499020                                                                                                 |  |  |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on |  |  | <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY</div> <div>MM / DD / YYYY</div> <div>MM / DD / YYYY</div> </div> |  |  |

  

|                                                                  |             |                                                                                |                                                                                                                                                       |  |  |
|------------------------------------------------------------------|-------------|--------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|
| Full Name of Payee<br><b>Freedomworks, Inc.</b>                  |             |                                                                                | Date of Public Distribution/Dissemination<br>MM / DD / YYYY<br>05 / 02 / 2014                                                                         |  |  |
| Mailing Address 400 N Capitol St., NW<br>Suite 735               |             |                                                                                | Amount<br>158.02                                                                                                                                      |  |  |
| City<br>Washington                                               | State<br>DC | Zip Code<br>20001                                                              | Transaction ID : SE.35424                                                                                                                             |  |  |
| Purpose of Expenditure<br>IE-Lynch-Email/Social Media/Printing   |             | Category/<br>Type 004                                                          | Date of Disbursement or Obligation<br>MM / DD / YYYY<br>05 / 02 / 2014                                                                                |  |  |
| Name of Federal Candidate<br>MATT LYNCH                          |             | <input checked="" type="checkbox"/> Support<br><input type="checkbox"/> Oppose | Office Sought: <input checked="" type="checkbox"/> House District: 14<br><input type="checkbox"/> President <input type="checkbox"/> Senate State: OH |  |  |
| Calendar Year-To-Date<br>Per Election for Office Sought 78487.25 |             |                                                                                | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶     |  |  |

  

|                                                                   |             |                                                                                |                                                                                                                                                       |  |  |
|-------------------------------------------------------------------|-------------|--------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|
| Full Name of Payee<br><b>Freedomworks, Inc.</b>                   |             |                                                                                | Date of Public Distribution/Dissemination<br>MM / DD / YYYY<br>05 / 03 / 2014                                                                         |  |  |
| Mailing Address 400 N Capitol St., NW<br>Suite 735                |             |                                                                                | Amount<br>250.71                                                                                                                                      |  |  |
| City<br>Washington                                                | State<br>DC | Zip Code<br>20001                                                              | Transaction ID : SE.26994                                                                                                                             |  |  |
| Purpose of Expenditure<br>IE-Brannon-Travel                       |             | Category/<br>Type 002                                                          | Date of Disbursement or Obligation<br>MM / DD / YYYY<br>05 / 03 / 2014                                                                                |  |  |
| Name of Federal Candidate<br>GREGORY JOSEPH BRANNON               |             | <input checked="" type="checkbox"/> Support<br><input type="checkbox"/> Oppose | Office Sought: <input type="checkbox"/> House District: 00<br><input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NC |  |  |
| Calendar Year-To-Date<br>Per Election for Office Sought 142815.32 |             |                                                                                | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶     |  |  |

  

|                                                                    |        |
|--------------------------------------------------------------------|--------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶    | 408.73 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶ |        |
| (c) <b>TOTAL</b> Independent Expenditures..... ▶                   |        |

  

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

R. Russ Walker

Signature \_\_\_\_\_

[Electronically Filed]

Date MM / DD / YYYY  
06 / 20 / 2014

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 108 OF 207  
 FOR LINE 24 OF FORM 3X

|                                                                                                                                                                              |  |  |                                                                                                                                                   |  |  |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|---------------------------------------------------------------------------------------------------------------------------------------------------|--|--|
| NAME OF COMMITTEE (In Full)<br><b>FREEDOMWORKS FOR AMERICA</b>                                                                                                               |  |  | FEC IDENTIFICATION NUMBER ▼<br><b>C</b> C00499020                                                                                                 |  |  |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on |  |  | <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY</div> <div>MM / DD / YYYY</div> <div>MM / DD / YYYY</div> </div> |  |  |

  

|                                                                   |             |                                                                                |                                                                                                                                                       |  |  |
|-------------------------------------------------------------------|-------------|--------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|
| Full Name of Payee<br><b>Freedomworks, Inc.</b>                   |             |                                                                                | Date of Public Distribution/Dissemination<br>MM / DD / YYYY<br>05 / 04 / 2014                                                                         |  |  |
| Mailing Address<br>400 N Capitol St., NW<br>Suite 735             |             |                                                                                | Amount<br>583.57                                                                                                                                      |  |  |
| City<br>Washington                                                | State<br>DC | Zip Code<br>20001                                                              | Transaction ID : SE.27048                                                                                                                             |  |  |
| Purpose of Expenditure<br>IE-McDaniel-Travel                      |             | Category/<br>Type 002                                                          | Date of Disbursement or Obligation<br>MM / DD / YYYY<br>05 / 04 / 2014                                                                                |  |  |
| Name of Federal Candidate<br>CHRISTOPHER BRIAN MCDANIEL           |             | <input checked="" type="checkbox"/> Support<br><input type="checkbox"/> Oppose | Office Sought: <input type="checkbox"/> House District: 00<br><input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: MS |  |  |
| Calendar Year-To-Date<br>Per Election for Office Sought 188694.04 |             |                                                                                | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶     |  |  |

  

|                                                                   |             |                                                                                |                                                                                                                                                       |  |  |
|-------------------------------------------------------------------|-------------|--------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|
| Full Name of Payee<br><b>Freedomworks, Inc.</b>                   |             |                                                                                | Date of Public Distribution/Dissemination<br>MM / DD / YYYY<br>05 / 04 / 2014                                                                         |  |  |
| Mailing Address<br>400 N Capitol St., NW<br>Suite 735             |             |                                                                                | Amount<br>59.67                                                                                                                                       |  |  |
| City<br>Washington                                                | State<br>DC | Zip Code<br>20001                                                              | Transaction ID : SE.27072                                                                                                                             |  |  |
| Purpose of Expenditure<br>IE-Brannon-Travel                       |             | Category/<br>Type 002                                                          | Date of Disbursement or Obligation<br>MM / DD / YYYY<br>05 / 04 / 2014                                                                                |  |  |
| Name of Federal Candidate<br>GREGORY JOSEPH BRANNON               |             | <input checked="" type="checkbox"/> Support<br><input type="checkbox"/> Oppose | Office Sought: <input type="checkbox"/> House District: 00<br><input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NC |  |  |
| Calendar Year-To-Date<br>Per Election for Office Sought 143270.96 |             |                                                                                | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶     |  |  |

  

|                                                                    |        |
|--------------------------------------------------------------------|--------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶    | 643.24 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶ |        |
| (c) <b>TOTAL</b> Independent Expenditures..... ▶                   |        |

  

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

R. Russ Walker

Signature \_\_\_\_\_

[Electronically Filed]

Date MM / DD / YYYY  
06 / 20 / 2014

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 109 OF 207  
 FOR LINE 24 OF FORM 3X

|                                                                                                                                                                                                                                                                                                                                                                                 |  |                                                                                  |                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                   |                                  |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|----------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------|
| NAME OF COMMITTEE (In Full)<br><b>FREEDOMWORKS FOR AMERICA</b>                                                                                                                                                                                                                                                                                                                  |  |                                                                                  | FEC IDENTIFICATION NUMBER ▼<br><b>C</b> C00499020                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                                   |                                  |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">MM</span> / <span style="border: 1px solid black; padding: 2px;">DD</span> / <span style="border: 1px solid black; padding: 2px;">YYYY</span> |  |                                                                                  |                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                   |                                  |
| Full Name of Payee<br><b>Freedomworks, Inc.</b>                                                                                                                                                                                                                                                                                                                                 |  |                                                                                  | Date of Public Distribution/Dissemination<br><span style="border: 1px solid black; padding: 2px;">MM</span> / <span style="border: 1px solid black; padding: 2px;">DD</span> / <span style="border: 1px solid black; padding: 2px;">YYYY</span><br><b>05 / 05 / 2014</b> |                                                                                                                                                                                                                                                                   |                                  |
| Mailing Address<br>400 N Capitol St., NW<br>Suite 735                                                                                                                                                                                                                                                                                                                           |  |                                                                                  | Amount<br><span style="border: 1px solid black; padding: 2px;">97.12</span>                                                                                                                                                                                              |                                                                                                                                                                                                                                                                   |                                  |
| City<br>Washington                                                                                                                                                                                                                                                                                                                                                              |  | State<br>DC                                                                      | Zip Code<br>20001                                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                                   | Transaction ID : <b>SE.27075</b> |
| Purpose of Expenditure<br>IE-Brannon-Travel                                                                                                                                                                                                                                                                                                                                     |  | Category/Type<br><span style="border: 1px solid black; padding: 2px;">002</span> |                                                                                                                                                                                                                                                                          | Date of Disbursement or Obligation<br><span style="border: 1px solid black; padding: 2px;">MM</span> / <span style="border: 1px solid black; padding: 2px;">DD</span> / <span style="border: 1px solid black; padding: 2px;">YYYY</span><br><b>05 / 05 / 2014</b> |                                  |
| Name of Federal Candidate<br>GREGORY JOSEPH BRANNON                                                                                                                                                                                                                                                                                                                             |  |                                                                                  | <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose<br>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate    District: <u>00</u><br><input type="checkbox"/> President    State: <u>NC</u>                 |                                                                                                                                                                                                                                                                   |                                  |
| Calendar Year-To-Date<br>Per Election for Office Sought<br><span style="border: 1px solid black; padding: 2px;">144176.08</span>                                                                                                                                                                                                                                                |  |                                                                                  | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶                                                                                                                        |                                                                                                                                                                                                                                                                   |                                  |
| Full Name of Payee<br><b>Freedomworks, Inc.</b>                                                                                                                                                                                                                                                                                                                                 |  |                                                                                  | Date of Public Distribution/Dissemination<br><span style="border: 1px solid black; padding: 2px;">MM</span> / <span style="border: 1px solid black; padding: 2px;">DD</span> / <span style="border: 1px solid black; padding: 2px;">YYYY</span><br><b>05 / 05 / 2014</b> |                                                                                                                                                                                                                                                                   |                                  |
| Mailing Address<br>400 N Capitol St., NW<br>Suite 735                                                                                                                                                                                                                                                                                                                           |  |                                                                                  | Amount<br><span style="border: 1px solid black; padding: 2px;">1607.86</span>                                                                                                                                                                                            |                                                                                                                                                                                                                                                                   |                                  |
| City<br>Washington                                                                                                                                                                                                                                                                                                                                                              |  | State<br>DC                                                                      | Zip Code<br>20001                                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                                   | Transaction ID : <b>SE.27080</b> |
| Purpose of Expenditure<br>IE-Hagan-Email/Social Media/Printing                                                                                                                                                                                                                                                                                                                  |  | Category/Type<br><span style="border: 1px solid black; padding: 2px;">004</span> |                                                                                                                                                                                                                                                                          | Date of Disbursement or Obligation<br><span style="border: 1px solid black; padding: 2px;">MM</span> / <span style="border: 1px solid black; padding: 2px;">DD</span> / <span style="border: 1px solid black; padding: 2px;">YYYY</span><br><b>05 / 05 / 2014</b> |                                  |
| Name of Federal Candidate<br>KAY R HAGAN                                                                                                                                                                                                                                                                                                                                        |  |                                                                                  | <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose<br>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate    District: <u>00</u><br><input type="checkbox"/> President    State: <u>NC</u>                 |                                                                                                                                                                                                                                                                   |                                  |
| Calendar Year-To-Date<br>Per Election for Office Sought<br><span style="border: 1px solid black; padding: 2px;">145999.49</span>                                                                                                                                                                                                                                                |  |                                                                                  | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶                                                                                                                        |                                                                                                                                                                                                                                                                   |                                  |
| (a) SUBTOTAL of Itemized Independent Expenditures..... ▶                                                                                                                                                                                                                                                                                                                        |  |                                                                                  | <span style="border: 1px solid black; padding: 2px;">1704.98</span>                                                                                                                                                                                                      |                                                                                                                                                                                                                                                                   |                                  |
| (b) SUBTOTAL of Unitemized Independent Expenditures ..... ▶                                                                                                                                                                                                                                                                                                                     |  |                                                                                  | <span style="border: 1px solid black; padding: 2px;"></span>                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                   |                                  |
| (c) TOTAL Independent Expenditures..... ▶                                                                                                                                                                                                                                                                                                                                       |  |                                                                                  | <span style="border: 1px solid black; padding: 2px;"></span>                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                   |                                  |
| 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.                     |  |                                                                                  |                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                   |                                  |
| Signature <u>R. Russ Walker</u><br><div style="text-align: right;">[Electronically Filed]</div>                                                                                                                                                                                                                                                                                 |  |                                                                                  | Date <span style="border: 1px solid black; padding: 2px;">MM</span> / <span style="border: 1px solid black; padding: 2px;">DD</span> / <span style="border: 1px solid black; padding: 2px;">YYYY</span><br><b>06 / 20 / 2014</b>                                         |                                                                                                                                                                                                                                                                   |                                  |

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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 FOR LINE 24 OF FORM 3X

|                                                                                                                                                                                                                                                                                                                                                             |  |                      |                                                                                                                                                   |                                                                        |                           |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|----------------------|---------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------|---------------------------|
| NAME OF COMMITTEE (In Full)<br><b>FREEDOMWORKS FOR AMERICA</b>                                                                                                                                                                                                                                                                                              |  |                      | FEC IDENTIFICATION NUMBER ▼<br><b>C</b> C00499020                                                                                                 |                                                                        |                           |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on                                                                                                                                                                                |  |                      | <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY</div> <div>MM / DD / YYYY</div> <div>MM / DD / YYYY</div> </div> |                                                                        |                           |
| Full Name of Payee<br><b>Freedomworks, Inc.</b>                                                                                                                                                                                                                                                                                                             |  |                      | Date of Public Distribution/Dissemination<br>MM / DD / YYYY<br>05 / 05 / 2014                                                                     |                                                                        |                           |
| Mailing Address<br>400 N Capitol St., NW<br>Suite 735                                                                                                                                                                                                                                                                                                       |  |                      | Amount<br>3842.53                                                                                                                                 |                                                                        |                           |
| City<br>Washington                                                                                                                                                                                                                                                                                                                                          |  | State<br>DC          | Zip Code<br>20001                                                                                                                                 |                                                                        | Transaction ID : SE.27127 |
| Purpose of Expenditure<br>IE-McDaniel-Travel                                                                                                                                                                                                                                                                                                                |  | Category/Type<br>002 |                                                                                                                                                   | Date of Disbursement or Obligation<br>MM / DD / YYYY<br>05 / 05 / 2014 |                           |
| Name of Federal Candidate<br>CHRISTOPHER BRIAN MCDANIEL                                                                                                                                                                                                                                                                                                     |  |                      | <input checked="" type="checkbox"/> Support<br><input type="checkbox"/> Oppose                                                                    |                                                                        |                           |
| Office Sought:<br><input type="checkbox"/> House <input checked="" type="checkbox"/> Senate                                                                                                                                                                                                                                                                 |  |                      | District: 00<br>State: MS                                                                                                                         |                                                                        |                           |
| Calendar Year-To-Date<br>Per Election for Office Sought                                                                                                                                                                                                                                                                                                     |  |                      | 192536.57                                                                                                                                         |                                                                        |                           |
| Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General                                                                                                                                                                                                                                                              |  |                      | 2014 <input type="checkbox"/> Other (specify) ▶                                                                                                   |                                                                        |                           |
| Full Name of Payee<br><b>Freedomworks, Inc.</b>                                                                                                                                                                                                                                                                                                             |  |                      | Date of Public Distribution/Dissemination<br>MM / DD / YYYY<br>05 / 05 / 2014                                                                     |                                                                        |                           |
| Mailing Address<br>400 N Capitol St., NW<br>Suite 735                                                                                                                                                                                                                                                                                                       |  |                      | Amount<br>719.71                                                                                                                                  |                                                                        |                           |
| City<br>Washington                                                                                                                                                                                                                                                                                                                                          |  | State<br>DC          | Zip Code<br>20001                                                                                                                                 |                                                                        | Transaction ID : SE.27128 |
| Purpose of Expenditure<br>IE-McDaniel-Email/Social Media/Printing                                                                                                                                                                                                                                                                                           |  | Category/Type<br>004 |                                                                                                                                                   | Date of Disbursement or Obligation<br>MM / DD / YYYY<br>05 / 05 / 2014 |                           |
| Name of Federal Candidate<br>CHRISTOPHER BRIAN MCDANIEL                                                                                                                                                                                                                                                                                                     |  |                      | <input checked="" type="checkbox"/> Support<br><input type="checkbox"/> Oppose                                                                    |                                                                        |                           |
| Office Sought:<br><input type="checkbox"/> House <input checked="" type="checkbox"/> Senate                                                                                                                                                                                                                                                                 |  |                      | District: 00<br>State: MS                                                                                                                         |                                                                        |                           |
| Calendar Year-To-Date<br>Per Election for Office Sought                                                                                                                                                                                                                                                                                                     |  |                      | 193256.28                                                                                                                                         |                                                                        |                           |
| Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General                                                                                                                                                                                                                                                              |  |                      | 2014 <input type="checkbox"/> Other (specify) ▶                                                                                                   |                                                                        |                           |
| (a) SUBTOTAL of Itemized Independent Expenditures..... ▶                                                                                                                                                                                                                                                                                                    |  |                      | 4562.24                                                                                                                                           |                                                                        |                           |
| (b) SUBTOTAL of Unitemized Independent Expenditures ..... ▶                                                                                                                                                                                                                                                                                                 |  |                      |                                                                                                                                                   |                                                                        |                           |
| (c) TOTAL Independent Expenditures..... ▶                                                                                                                                                                                                                                                                                                                   |  |                      |                                                                                                                                                   |                                                                        |                           |
| Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. |  |                      |                                                                                                                                                   |                                                                        |                           |
| Signature<br><br>R. Russ Walker                                                                                                                                                                                                                                                                                                                             |  |                      | Date<br>MM / DD / YYYY<br>06 / 20 / 2014                                                                                                          |                                                                        |                           |
| [Electronically Filed]                                                                                                                                                                                                                                                                                                                                      |  |                      |                                                                                                                                                   |                                                                        |                           |

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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 FOR LINE 24 OF FORM 3X

|                                                                                                                                                                                                                                                                                                                                                             |  |                                                                                  |                                                                                                                                                                                                                                                       |                                                                                                                                    |                                  |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|----------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------|----------------------------------|
| NAME OF COMMITTEE (In Full)<br><b>FREEDOMWORKS FOR AMERICA</b>                                                                                                                                                                                                                                                                                              |  |                                                                                  | FEC IDENTIFICATION NUMBER ▼<br><b>C</b> C00499020                                                                                                                                                                                                     |                                                                                                                                    |                                  |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span>                                                                                                     |  |                                                                                  |                                                                                                                                                                                                                                                       |                                                                                                                                    |                                  |
| Full Name of Payee<br><b>Freedomworks, Inc.</b>                                                                                                                                                                                                                                                                                                             |  |                                                                                  | Date of Public Distribution/Dissemination<br><span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span><br>05 / 05 / 2014                                                                                                             |                                                                                                                                    |                                  |
| Mailing Address<br>400 N Capitol St., NW<br>Suite 735                                                                                                                                                                                                                                                                                                       |  |                                                                                  | Amount<br><span style="border: 1px solid black; padding: 2px;">155.27</span>                                                                                                                                                                          |                                                                                                                                    |                                  |
| City<br>Washington                                                                                                                                                                                                                                                                                                                                          |  | State<br>DC                                                                      | Zip Code<br>20001                                                                                                                                                                                                                                     |                                                                                                                                    | Transaction ID : <b>SE.27272</b> |
| Purpose of Expenditure<br>IE-McConnell-Email/Social Media/Printing                                                                                                                                                                                                                                                                                          |  | Category/Type<br><span style="border: 1px solid black; padding: 2px;">004</span> |                                                                                                                                                                                                                                                       | Date of Disbursement or Obligation<br><span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span><br>05 / 05 / 2014 |                                  |
| Name of Federal Candidate<br>MITCH MCCONNELL                                                                                                                                                                                                                                                                                                                |  |                                                                                  | <input type="checkbox"/> Support<br><input checked="" type="checkbox"/> Oppose<br>Office Sought: <input type="checkbox"/> House District: <u>00</u><br><input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>KY</u> |                                                                                                                                    |                                  |
| Calendar Year-To-Date<br>Per Election for Office Sought<br><span style="border: 1px solid black; padding: 2px;">282705.53</span>                                                                                                                                                                                                                            |  |                                                                                  | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶                                                                                                     |                                                                                                                                    |                                  |
| Full Name of Payee<br><b>Freedomworks, Inc.</b>                                                                                                                                                                                                                                                                                                             |  |                                                                                  | Date of Public Distribution/Dissemination<br><span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span><br>05 / 05 / 2014                                                                                                             |                                                                                                                                    |                                  |
| Mailing Address<br>400 N Capitol St., NW<br>Suite 735                                                                                                                                                                                                                                                                                                       |  |                                                                                  | Amount<br><span style="border: 1px solid black; padding: 2px;">147.25</span>                                                                                                                                                                          |                                                                                                                                    |                                  |
| City<br>Washington                                                                                                                                                                                                                                                                                                                                          |  | State<br>DC                                                                      | Zip Code<br>20001                                                                                                                                                                                                                                     |                                                                                                                                    | Transaction ID : <b>SE.35425</b> |
| Purpose of Expenditure<br>IE-Lynch-Email/Social Media/Printing                                                                                                                                                                                                                                                                                              |  | Category/Type<br><span style="border: 1px solid black; padding: 2px;">004</span> |                                                                                                                                                                                                                                                       | Date of Disbursement or Obligation<br><span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span><br>05 / 05 / 2014 |                                  |
| Name of Federal Candidate<br>MATT LYNCH                                                                                                                                                                                                                                                                                                                     |  |                                                                                  | <input checked="" type="checkbox"/> Support<br><input type="checkbox"/> Oppose<br>Office Sought: <input checked="" type="checkbox"/> House District: <u>14</u><br><input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>OH</u> |                                                                                                                                    |                                  |
| Calendar Year-To-Date<br>Per Election for Office Sought<br><span style="border: 1px solid black; padding: 2px;">78634.50</span>                                                                                                                                                                                                                             |  |                                                                                  | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶                                                                                                     |                                                                                                                                    |                                  |
| (a) SUBTOTAL of Itemized Independent Expenditures..... ▶                                                                                                                                                                                                                                                                                                    |  |                                                                                  | <span style="border: 1px solid black; padding: 2px;">302.52</span>                                                                                                                                                                                    |                                                                                                                                    |                                  |
| (b) SUBTOTAL of Unitemized Independent Expenditures ..... ▶                                                                                                                                                                                                                                                                                                 |  |                                                                                  | <span style="border: 1px solid black; padding: 2px;"></span>                                                                                                                                                                                          |                                                                                                                                    |                                  |
| (c) TOTAL Independent Expenditures..... ▶                                                                                                                                                                                                                                                                                                                   |  |                                                                                  | <span style="border: 1px solid black; padding: 2px;"></span>                                                                                                                                                                                          |                                                                                                                                    |                                  |
| 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. |  |                                                                                  |                                                                                                                                                                                                                                                       |                                                                                                                                    |                                  |
| Signature <u>R. Russ Walker</u>                                                                                                                                                                                                                                                                                                                             |  |                                                                                  | Date <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span><br>06 / 20 / 2014                                                                                                                                                     |                                                                                                                                    |                                  |

[Electronically Filed]

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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 FOR LINE 24 OF FORM 3X

|                                                                                                                                                                              |  |  |                                                                                                                                                   |  |  |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|---------------------------------------------------------------------------------------------------------------------------------------------------|--|--|
| NAME OF COMMITTEE (In Full)<br><b>FREEDOMWORKS FOR AMERICA</b>                                                                                                               |  |  | FEC IDENTIFICATION NUMBER ▼<br><b>C</b> C00499020                                                                                                 |  |  |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on |  |  | <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY</div> <div>MM / DD / YYYY</div> <div>MM / DD / YYYY</div> </div> |  |  |

  

|                                                                   |             |                       |                                                                                                                                                                                       |  |  |
|-------------------------------------------------------------------|-------------|-----------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|
| Full Name of Payee<br><b>Freedomworks, Inc.</b>                   |             |                       | Date of Public Distribution/Dissemination<br>MM / DD / YYYY<br>05 / 06 / 2014                                                                                                         |  |  |
| Mailing Address<br>400 N Capitol St., NW<br>Suite 735             |             |                       | Amount<br>157.17                                                                                                                                                                      |  |  |
| City<br>Washington                                                | State<br>DC | Zip Code<br>20001     | Transaction ID : SE.27130                                                                                                                                                             |  |  |
| Purpose of Expenditure<br>IE-McDaniel-Travel                      |             | Category/<br>Type 002 | Date of Disbursement or Obligation<br>MM / DD / YYYY<br>05 / 06 / 2014                                                                                                                |  |  |
| Name of Federal Candidate<br>CHRISTOPHER BRIAN MCDANIEL           |             |                       | Office Sought: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose<br><input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: MS |  |  |
| Calendar Year-To-Date<br>Per Election for Office Sought 196665.45 |             |                       | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶                                     |  |  |

  

|                                                                   |             |                       |                                                                                                                                                                                       |  |  |
|-------------------------------------------------------------------|-------------|-----------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|
| Full Name of Payee<br><b>Freedomworks, Inc.</b>                   |             |                       | Date of Public Distribution/Dissemination<br>MM / DD / YYYY<br>05 / 06 / 2014                                                                                                         |  |  |
| Mailing Address<br>400 N Capitol St., NW<br>Suite 735             |             |                       | Amount<br>548.74                                                                                                                                                                      |  |  |
| City<br>Washington                                                | State<br>DC | Zip Code<br>20001     | Transaction ID : SE.27131                                                                                                                                                             |  |  |
| Purpose of Expenditure<br>IE-McDaniel-Email/Social Media/Printing |             | Category/<br>Type 004 | Date of Disbursement or Obligation<br>MM / DD / YYYY<br>05 / 06 / 2014                                                                                                                |  |  |
| Name of Federal Candidate<br>CHRISTOPHER BRIAN MCDANIEL           |             |                       | Office Sought: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose<br><input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: MS |  |  |
| Calendar Year-To-Date<br>Per Election for Office Sought 197214.19 |             |                       | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶                                     |  |  |

  

|                                                                    |        |
|--------------------------------------------------------------------|--------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶    | 705.91 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶ |        |
| (c) <b>TOTAL</b> Independent Expenditures..... ▶                   |        |

  

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

R. Russ Walker

Signature

[Electronically Filed]

Date

MM / DD / YYYY

06 / 20 / 2014



**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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 FOR LINE 24 OF FORM 3X

|                                                                                                                                                                                                                                                                                                                                                                                       |             |                                                                                                                                                                                                                                                                         |                                                                                                                                                                                                                                                                  |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| NAME OF COMMITTEE (In Full)<br><b>FREEDOMWORKS FOR AMERICA</b>                                                                                                                                                                                                                                                                                                                        |             | <b>FEC IDENTIFICATION NUMBER ▼</b><br><div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00499020       </div>                                                                                                                       |                                                                                                                                                                                                                                                                  |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 0 5px;">MM</span> / <span style="border: 1px solid black; padding: 0 5px;">DD</span> / <span style="border: 1px solid black; padding: 0 5px;">YYYY</span> |             |                                                                                                                                                                                                                                                                         |                                                                                                                                                                                                                                                                  |
| Full Name of Payee<br><b>Freedomworks, Inc.</b>                                                                                                                                                                                                                                                                                                                                       |             | Date of Public Distribution/Dissemination<br><span style="border: 1px solid black; padding: 0 5px;">MM</span> / <span style="border: 1px solid black; padding: 0 5px;">DD</span> / <span style="border: 1px solid black; padding: 0 5px;">YYYY</span><br>05 / 06 / 2014 |                                                                                                                                                                                                                                                                  |
| Mailing Address<br>400 N Capitol St., NW<br>Suite 735                                                                                                                                                                                                                                                                                                                                 |             | Amount<br><div style="border: 1px solid black; padding: 2px; display: inline-block;">1578.88</div>                                                                                                                                                                      |                                                                                                                                                                                                                                                                  |
| City<br>Washington                                                                                                                                                                                                                                                                                                                                                                    | State<br>DC | Zip Code<br>20001                                                                                                                                                                                                                                                       | Transaction ID : <b>SE.35427</b>                                                                                                                                                                                                                                 |
| Purpose of Expenditure<br>IE-Hagan-Email/Social Media/Printing                                                                                                                                                                                                                                                                                                                        |             | Category/<br>Type <span style="border: 1px solid black; padding: 0 5px;">004</span>                                                                                                                                                                                     | Date of Disbursement or Obligation<br><span style="border: 1px solid black; padding: 0 5px;">MM</span> / <span style="border: 1px solid black; padding: 0 5px;">DD</span> / <span style="border: 1px solid black; padding: 0 5px;">YYYY</span><br>05 / 06 / 2014 |
| Name of Federal Candidate<br>KAY R HAGAN                                                                                                                                                                                                                                                                                                                                              |             | <input type="checkbox"/> Support<br><input checked="" type="checkbox"/> Oppose                                                                                                                                                                                          | Office Sought: <input type="checkbox"/> House District: <u>00</u><br><input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>NC</u>                                                                                              |
| Calendar Year-To-Date<br>Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">148354.10</div>                                                                                                                                                                                                                                    |             | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶ _____                                                                                                                 |                                                                                                                                                                                                                                                                  |
| Full Name of Payee<br><b>Freedomworks, Inc.</b>                                                                                                                                                                                                                                                                                                                                       |             | Date of Public Distribution/Dissemination<br><span style="border: 1px solid black; padding: 0 5px;">MM</span> / <span style="border: 1px solid black; padding: 0 5px;">DD</span> / <span style="border: 1px solid black; padding: 0 5px;">YYYY</span><br>05 / 06 / 2014 |                                                                                                                                                                                                                                                                  |
| Mailing Address<br>400 N Capitol St., NW<br>Suite 735                                                                                                                                                                                                                                                                                                                                 |             | Amount<br><div style="border: 1px solid black; padding: 2px; display: inline-block;">150.62</div>                                                                                                                                                                       |                                                                                                                                                                                                                                                                  |
| City<br>Washington                                                                                                                                                                                                                                                                                                                                                                    | State<br>DC | Zip Code<br>20001                                                                                                                                                                                                                                                       | Transaction ID : <b>SE.35428</b>                                                                                                                                                                                                                                 |
| Purpose of Expenditure<br>IE-Lynch-Email/Social Media/Printing                                                                                                                                                                                                                                                                                                                        |             | Category/<br>Type <span style="border: 1px solid black; padding: 0 5px;">004</span>                                                                                                                                                                                     | Date of Disbursement or Obligation<br><span style="border: 1px solid black; padding: 0 5px;">MM</span> / <span style="border: 1px solid black; padding: 0 5px;">DD</span> / <span style="border: 1px solid black; padding: 0 5px;">YYYY</span><br>05 / 06 / 2014 |
| Name of Federal Candidate<br>MATT LYNCH                                                                                                                                                                                                                                                                                                                                               |             | <input checked="" type="checkbox"/> Support<br><input type="checkbox"/> Oppose                                                                                                                                                                                          | Office Sought: <input checked="" type="checkbox"/> House District: <u>14</u><br><input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>OH</u>                                                                                              |
| Calendar Year-To-Date<br>Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">79553.29</div>                                                                                                                                                                                                                                     |             | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶ _____                                                                                                                 |                                                                                                                                                                                                                                                                  |
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶                                                                                                                                                                                                                                                                                                                       |             | <div style="border: 1px solid black; padding: 2px; display: inline-block;">1729.50</div>                                                                                                                                                                                |                                                                                                                                                                                                                                                                  |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶                                                                                                                                                                                                                                                                                                                    |             | <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>                                                                                                                                                                                       |                                                                                                                                                                                                                                                                  |
| (c) <b>TOTAL</b> Independent Expenditures..... ▶                                                                                                                                                                                                                                                                                                                                      |             | <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>                                                                                                                                                                                       |                                                                                                                                                                                                                                                                  |
| Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.                           |             |                                                                                                                                                                                                                                                                         |                                                                                                                                                                                                                                                                  |
| Signature <u>R. Russ Walker</u>                                                                                                                                                                                                                                                                                                                                                       |             | Date <span style="border: 1px solid black; padding: 0 5px;">MM</span> / <span style="border: 1px solid black; padding: 0 5px;">DD</span> / <span style="border: 1px solid black; padding: 0 5px;">YYYY</span><br>06 / 20 / 2014                                         |                                                                                                                                                                                                                                                                  |

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**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 114 OF 207  
 FOR LINE 24 OF FORM 3X

|                                                                                                                                                                              |  |  |                                                                                                                                                   |  |  |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|---------------------------------------------------------------------------------------------------------------------------------------------------|--|--|
| NAME OF COMMITTEE (In Full)<br><b>FREEDOMWORKS FOR AMERICA</b>                                                                                                               |  |  | FEC IDENTIFICATION NUMBER ▼<br><b>C</b> C00499020                                                                                                 |  |  |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on |  |  | <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY</div> <div>MM / DD / YYYY</div> <div>MM / DD / YYYY</div> </div> |  |  |

  

|                                                                                             |             |                       |                                                                                                                                                   |  |  |
|---------------------------------------------------------------------------------------------|-------------|-----------------------|---------------------------------------------------------------------------------------------------------------------------------------------------|--|--|
| Full Name of Payee<br><b>Freedomworks, Inc.</b>                                             |             |                       | Date of Public Distribution/Dissemination<br>MM / DD / YYYY<br>05 / 06 / 2014                                                                     |  |  |
| Mailing Address<br>400 N Capitol St., NW<br>Suite 735                                       |             |                       | Amount<br>328.95                                                                                                                                  |  |  |
| City<br>Washington                                                                          | State<br>DC | Zip Code<br>20001     | Transaction ID : SE.35561                                                                                                                         |  |  |
| Purpose of Expenditure<br>IE-Brannon-Travel                                                 |             | Category/<br>Type 002 | Date of Disbursement or Obligation<br>MM / DD / YYYY<br>05 / 06 / 2014                                                                            |  |  |
| Name of Federal Candidate<br>GREGORY JOSEPH BRANNON                                         |             |                       | <input checked="" type="checkbox"/> Support<br><input type="checkbox"/> Oppose                                                                    |  |  |
| Office Sought:<br><input type="checkbox"/> House <input checked="" type="checkbox"/> Senate |             |                       | District: 00<br>State: NC                                                                                                                         |  |  |
| Calendar Year-To-Date<br>Per Election for Office Sought                                     |             |                       | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶ |  |  |
| 149115.26                                                                                   |             |                       |                                                                                                                                                   |  |  |

  

|                                                                                             |             |                       |                                                                                                                                                   |  |  |
|---------------------------------------------------------------------------------------------|-------------|-----------------------|---------------------------------------------------------------------------------------------------------------------------------------------------|--|--|
| Full Name of Payee<br><b>Freedomworks, Inc.</b>                                             |             |                       | Date of Public Distribution/Dissemination<br>MM / DD / YYYY<br>05 / 06 / 2014                                                                     |  |  |
| Mailing Address<br>400 N Capitol St., NW<br>Suite 735                                       |             |                       | Amount<br>267.78                                                                                                                                  |  |  |
| City<br>Washington                                                                          | State<br>DC | Zip Code<br>20001     | Transaction ID : SE.35564                                                                                                                         |  |  |
| Purpose of Expenditure<br>IE-Lynch-Travel                                                   |             | Category/<br>Type 002 | Date of Disbursement or Obligation<br>MM / DD / YYYY<br>05 / 06 / 2014                                                                            |  |  |
| Name of Federal Candidate<br>MATT LYNCH                                                     |             |                       | <input checked="" type="checkbox"/> Support<br><input type="checkbox"/> Oppose                                                                    |  |  |
| Office Sought:<br><input type="checkbox"/> House <input checked="" type="checkbox"/> Senate |             |                       | District: 14<br>State: OH                                                                                                                         |  |  |
| Calendar Year-To-Date<br>Per Election for Office Sought                                     |             |                       | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶ |  |  |
| 79821.07                                                                                    |             |                       |                                                                                                                                                   |  |  |

  

|                                                                    |        |
|--------------------------------------------------------------------|--------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶    | 596.73 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶ |        |
| (c) <b>TOTAL</b> Independent Expenditures..... ▶                   |        |

  

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

R. Russ Walker

Signature

[Electronically Filed]

Date

MM / DD / YYYY

06 / 20 / 2014

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 115 OF 207  
 FOR LINE 24 OF FORM 3X

|                                                                                                                                                                              |  |  |                                                                                                                                                   |  |  |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|---------------------------------------------------------------------------------------------------------------------------------------------------|--|--|
| NAME OF COMMITTEE (In Full)<br><b>FREEDOMWORKS FOR AMERICA</b>                                                                                                               |  |  | FEC IDENTIFICATION NUMBER ▼<br><b>C</b> C00499020                                                                                                 |  |  |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on |  |  | <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY</div> <div>MM / DD / YYYY</div> <div>MM / DD / YYYY</div> </div> |  |  |

  

|                                                                                             |             |                       |                                                                                                                                                   |  |  |
|---------------------------------------------------------------------------------------------|-------------|-----------------------|---------------------------------------------------------------------------------------------------------------------------------------------------|--|--|
| Full Name of Payee<br><b>Freedomworks, Inc.</b>                                             |             |                       | Date of Public Distribution/Dissemination<br>MM / DD / YYYY<br>05 / 07 / 2014                                                                     |  |  |
| Mailing Address<br>400 N Capitol St., NW<br>Suite 735                                       |             |                       | Amount<br>116.46                                                                                                                                  |  |  |
| City<br>Washington                                                                          | State<br>DC | Zip Code<br>20001     | Transaction ID : SE.27123                                                                                                                         |  |  |
| Purpose of Expenditure<br>IE-Sasse-Email/Social Media/Printing                              |             | Category/<br>Type 004 | Date of Disbursement or Obligation<br>MM / DD / YYYY<br>05 / 07 / 2014                                                                            |  |  |
| Name of Federal Candidate<br>BENJAMIN E SASSE                                               |             |                       | <input checked="" type="checkbox"/> Support<br><input type="checkbox"/> Oppose                                                                    |  |  |
| Office Sought:<br><input type="checkbox"/> House <input checked="" type="checkbox"/> Senate |             |                       | District: 00<br>State: NE                                                                                                                         |  |  |
| Calendar Year-To-Date<br>Per Election for Office Sought                                     |             |                       | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶ |  |  |

  

|                                                                                             |             |                       |                                                                                                                                                   |  |  |
|---------------------------------------------------------------------------------------------|-------------|-----------------------|---------------------------------------------------------------------------------------------------------------------------------------------------|--|--|
| Full Name of Payee<br><b>Freedomworks, Inc.</b>                                             |             |                       | Date of Public Distribution/Dissemination<br>MM / DD / YYYY<br>05 / 07 / 2014                                                                     |  |  |
| Mailing Address<br>400 N Capitol St., NW<br>Suite 735                                       |             |                       | Amount<br>155.27                                                                                                                                  |  |  |
| City<br>Washington                                                                          | State<br>DC | Zip Code<br>20001     | Transaction ID : SE.27132                                                                                                                         |  |  |
| Purpose of Expenditure<br>IE-McDaniel-Email/Social Media/Printing                           |             | Category/<br>Type 004 | Date of Disbursement or Obligation<br>MM / DD / YYYY<br>05 / 07 / 2014                                                                            |  |  |
| Name of Federal Candidate<br>CHRISTOPHER BRIAN MCDANIEL                                     |             |                       | <input checked="" type="checkbox"/> Support<br><input type="checkbox"/> Oppose                                                                    |  |  |
| Office Sought:<br><input type="checkbox"/> House <input checked="" type="checkbox"/> Senate |             |                       | District: 00<br>State: MS                                                                                                                         |  |  |
| Calendar Year-To-Date<br>Per Election for Office Sought                                     |             |                       | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶ |  |  |

  

|                                                             |        |
|-------------------------------------------------------------|--------|
| (a) SUBTOTAL of Itemized Independent Expenditures..... ▶    | 271.73 |
| (b) SUBTOTAL of Unitemized Independent Expenditures ..... ▶ |        |
| (c) TOTAL Independent Expenditures..... ▶                   |        |

  

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

R. Russ Walker

Signature

[Electronically Filed]

Date

MM / DD / YYYY

06 / 20 / 2014

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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 FOR LINE 24 OF FORM 3X

|                                                                                                                                                                                                                                                                                                                                                                                 |  |                                                                                  |                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                   |                                                                                                                                                                           |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|----------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| NAME OF COMMITTEE (In Full)<br><b>FREEDOMWORKS FOR AMERICA</b>                                                                                                                                                                                                                                                                                                                  |  |                                                                                  | FEC IDENTIFICATION NUMBER ▼<br><b>C</b> C00499020                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                                   |                                                                                                                                                                           |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">MM</span> / <span style="border: 1px solid black; padding: 2px;">DD</span> / <span style="border: 1px solid black; padding: 2px;">YYYY</span> |  |                                                                                  |                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                   |                                                                                                                                                                           |
| Full Name of Payee<br><b>Freedomworks, Inc.</b>                                                                                                                                                                                                                                                                                                                                 |  |                                                                                  | Date of Public Distribution/Dissemination<br><span style="border: 1px solid black; padding: 2px;">MM</span> / <span style="border: 1px solid black; padding: 2px;">DD</span> / <span style="border: 1px solid black; padding: 2px;">YYYY</span><br><b>05 / 07 / 2014</b> |                                                                                                                                                                                                                                                                   |                                                                                                                                                                           |
| Mailing Address<br>400 N Capitol St., NW<br>Suite 735                                                                                                                                                                                                                                                                                                                           |  |                                                                                  | Amount<br><span style="border: 1px solid black; padding: 2px;">46.59</span>                                                                                                                                                                                              |                                                                                                                                                                                                                                                                   |                                                                                                                                                                           |
| City<br>Washington                                                                                                                                                                                                                                                                                                                                                              |  | State<br>DC                                                                      | Zip Code<br>20001                                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                                   | Transaction ID : <b>SE.27208</b>                                                                                                                                          |
| Purpose of Expenditure<br>IE-Smith-Email/Social Media/Printing                                                                                                                                                                                                                                                                                                                  |  | Category/Type<br><span style="border: 1px solid black; padding: 2px;">004</span> |                                                                                                                                                                                                                                                                          | Date of Disbursement or Obligation<br><span style="border: 1px solid black; padding: 2px;">MM</span> / <span style="border: 1px solid black; padding: 2px;">DD</span> / <span style="border: 1px solid black; padding: 2px;">YYYY</span><br><b>05 / 07 / 2014</b> |                                                                                                                                                                           |
| Name of Federal Candidate<br>BRYAN SMITH                                                                                                                                                                                                                                                                                                                                        |  |                                                                                  | <input checked="" type="checkbox"/> Support<br><input type="checkbox"/> Oppose                                                                                                                                                                                           |                                                                                                                                                                                                                                                                   | Office Sought: <input checked="" type="checkbox"/> House    District: <u>02</u><br><input type="checkbox"/> President <input type="checkbox"/> Senate    State: <u>ID</u> |
| Calendar Year-To-Date<br>Per Election for Office Sought<br><span style="border: 1px solid black; padding: 2px;">30543.53</span>                                                                                                                                                                                                                                                 |  |                                                                                  | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶ _____                                                                                                                  |                                                                                                                                                                                                                                                                   |                                                                                                                                                                           |
| Full Name of Payee<br><b>Freedomworks, Inc.</b>                                                                                                                                                                                                                                                                                                                                 |  |                                                                                  | Date of Public Distribution/Dissemination<br><span style="border: 1px solid black; padding: 2px;">MM</span> / <span style="border: 1px solid black; padding: 2px;">DD</span> / <span style="border: 1px solid black; padding: 2px;">YYYY</span><br><b>05 / 07 / 2014</b> |                                                                                                                                                                                                                                                                   |                                                                                                                                                                           |
| Mailing Address<br>400 N Capitol St., NW<br>Suite 735                                                                                                                                                                                                                                                                                                                           |  |                                                                                  | Amount<br><span style="border: 1px solid black; padding: 2px;">38.82</span>                                                                                                                                                                                              |                                                                                                                                                                                                                                                                   |                                                                                                                                                                           |
| City<br>Washington                                                                                                                                                                                                                                                                                                                                                              |  | State<br>DC                                                                      | Zip Code<br>20001                                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                                   | Transaction ID : <b>SE.27273</b>                                                                                                                                          |
| Purpose of Expenditure<br>IE-McConnell-Email/Social Media/Printing                                                                                                                                                                                                                                                                                                              |  | Category/Type<br><span style="border: 1px solid black; padding: 2px;">004</span> |                                                                                                                                                                                                                                                                          | Date of Disbursement or Obligation<br><span style="border: 1px solid black; padding: 2px;">MM</span> / <span style="border: 1px solid black; padding: 2px;">DD</span> / <span style="border: 1px solid black; padding: 2px;">YYYY</span><br><b>05 / 07 / 2014</b> |                                                                                                                                                                           |
| Name of Federal Candidate<br>MITCH MCCONNELL                                                                                                                                                                                                                                                                                                                                    |  |                                                                                  | <input type="checkbox"/> Support<br><input checked="" type="checkbox"/> Oppose                                                                                                                                                                                           |                                                                                                                                                                                                                                                                   | Office Sought: <input type="checkbox"/> House    District: <u>00</u><br><input type="checkbox"/> President <input checked="" type="checkbox"/> Senate    State: <u>KY</u> |
| Calendar Year-To-Date<br>Per Election for Office Sought<br><span style="border: 1px solid black; padding: 2px;">282744.35</span>                                                                                                                                                                                                                                                |  |                                                                                  | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶ _____                                                                                                                  |                                                                                                                                                                                                                                                                   |                                                                                                                                                                           |
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶                                                                                                                                                                                                                                                                                                                 |  |                                                                                  | <span style="border: 1px solid black; padding: 2px;">85.41</span>                                                                                                                                                                                                        |                                                                                                                                                                                                                                                                   |                                                                                                                                                                           |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶                                                                                                                                                                                                                                                                                                              |  |                                                                                  | <span style="border: 1px solid black; padding: 2px;"></span>                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                   |                                                                                                                                                                           |
| (c) <b>TOTAL</b> Independent Expenditures..... ▶                                                                                                                                                                                                                                                                                                                                |  |                                                                                  | <span style="border: 1px solid black; padding: 2px;"></span>                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                   |                                                                                                                                                                           |
| 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.                     |  |                                                                                  |                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                   |                                                                                                                                                                           |
| Signature <u>R. Russ Walker</u><br><div style="text-align: right;">[Electronically Filed]</div>                                                                                                                                                                                                                                                                                 |  |                                                                                  | Date <span style="border: 1px solid black; padding: 2px;">MM</span> / <span style="border: 1px solid black; padding: 2px;">DD</span> / <span style="border: 1px solid black; padding: 2px;">YYYY</span><br><b>06 / 20 / 2014</b>                                         |                                                                                                                                                                                                                                                                   |                                                                                                                                                                           |

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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 FOR LINE 24 OF FORM 3X

|                                                                                                                                                                                                                                                                                                                                                                                 |             |                                                                                   |                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                  |  |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|-----------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| NAME OF COMMITTEE (In Full)<br><b>FREEDOMWORKS FOR AMERICA</b>                                                                                                                                                                                                                                                                                                                  |             |                                                                                   | FEC IDENTIFICATION NUMBER ▼<br><b>C</b> C00499020                                                                                                                                                                                                                        |                                                                                                                                                                                                                                  |  |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">MM</span> / <span style="border: 1px solid black; padding: 2px;">DD</span> / <span style="border: 1px solid black; padding: 2px;">YYYY</span> |             |                                                                                   |                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                  |  |
| Full Name of Payee<br><b>Freedomworks, Inc.</b>                                                                                                                                                                                                                                                                                                                                 |             |                                                                                   | Date of Public Distribution/Dissemination<br><span style="border: 1px solid black; padding: 2px;">MM</span> / <span style="border: 1px solid black; padding: 2px;">DD</span> / <span style="border: 1px solid black; padding: 2px;">YYYY</span><br><b>05 / 07 / 2014</b> |                                                                                                                                                                                                                                  |  |
| Mailing Address<br>400 N Capitol St., NW<br>Suite 735                                                                                                                                                                                                                                                                                                                           |             |                                                                                   | Amount<br><span style="border: 1px solid black; padding: 2px;">243.95</span>                                                                                                                                                                                             |                                                                                                                                                                                                                                  |  |
| City<br>Washington                                                                                                                                                                                                                                                                                                                                                              | State<br>DC | Zip Code<br>20001                                                                 | Transaction ID : <b>SE.35444</b>                                                                                                                                                                                                                                         |                                                                                                                                                                                                                                  |  |
| Purpose of Expenditure<br>IE-Hagan-Email/Social Media/Printing                                                                                                                                                                                                                                                                                                                  |             | Category/<br>Type <span style="border: 1px solid black; padding: 2px;">004</span> | Date of Disbursement or Obligation<br><span style="border: 1px solid black; padding: 2px;">MM</span> / <span style="border: 1px solid black; padding: 2px;">DD</span> / <span style="border: 1px solid black; padding: 2px;">YYYY</span><br><b>05 / 07 / 2014</b>        |                                                                                                                                                                                                                                  |  |
| Name of Federal Candidate<br>KAY R HAGAN                                                                                                                                                                                                                                                                                                                                        |             | <input type="checkbox"/> Support<br><input checked="" type="checkbox"/> Oppose    | Office Sought: <input type="checkbox"/> House District: <u>00</u><br><input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>NC</u>                                                                                                      |                                                                                                                                                                                                                                  |  |
| Calendar Year-To-Date<br>Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">243.95</span>                                                                                                                                                                                                                                                      |             |                                                                                   | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶                                                                                                                        |                                                                                                                                                                                                                                  |  |
| Full Name of Payee<br><b>Freedomworks, Inc.</b>                                                                                                                                                                                                                                                                                                                                 |             |                                                                                   | Date of Public Distribution/Dissemination<br><span style="border: 1px solid black; padding: 2px;">MM</span> / <span style="border: 1px solid black; padding: 2px;">DD</span> / <span style="border: 1px solid black; padding: 2px;">YYYY</span><br><b>05 / 06 / 2014</b> |                                                                                                                                                                                                                                  |  |
| Mailing Address<br>400 N Capitol St., NW<br>Suite 735                                                                                                                                                                                                                                                                                                                           |             |                                                                                   | Amount<br><span style="border: 1px solid black; padding: 2px;">180.08</span>                                                                                                                                                                                             |                                                                                                                                                                                                                                  |  |
| City<br>Washington                                                                                                                                                                                                                                                                                                                                                              | State<br>DC | Zip Code<br>20001                                                                 | Transaction ID : <b>SE.35562</b>                                                                                                                                                                                                                                         |                                                                                                                                                                                                                                  |  |
| Purpose of Expenditure<br>IE-Brannon-Travel                                                                                                                                                                                                                                                                                                                                     |             | Category/<br>Type <span style="border: 1px solid black; padding: 2px;">002</span> | Date of Disbursement or Obligation<br><span style="border: 1px solid black; padding: 2px;">MM</span> / <span style="border: 1px solid black; padding: 2px;">DD</span> / <span style="border: 1px solid black; padding: 2px;">YYYY</span><br><b>05 / 07 / 2014</b>        |                                                                                                                                                                                                                                  |  |
| Name of Federal Candidate<br>GREGORY JOSEPH BRANNON                                                                                                                                                                                                                                                                                                                             |             | <input checked="" type="checkbox"/> Support<br><input type="checkbox"/> Oppose    | Office Sought: <input type="checkbox"/> House District: <u>00</u><br><input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>NC</u>                                                                                                      |                                                                                                                                                                                                                                  |  |
| Calendar Year-To-Date<br>Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">149340.34</span>                                                                                                                                                                                                                                                   |             |                                                                                   | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶                                                                                                                        |                                                                                                                                                                                                                                  |  |
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶                                                                                                                                                                                                                                                                                                                 |             |                                                                                   | <span style="border: 1px solid black; padding: 2px;">424.03</span>                                                                                                                                                                                                       |                                                                                                                                                                                                                                  |  |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶                                                                                                                                                                                                                                                                                                              |             |                                                                                   | <span style="border: 1px solid black; padding: 2px;"></span>                                                                                                                                                                                                             |                                                                                                                                                                                                                                  |  |
| (c) <b>TOTAL</b> Independent Expenditures..... ▶                                                                                                                                                                                                                                                                                                                                |             |                                                                                   | <span style="border: 1px solid black; padding: 2px;"></span>                                                                                                                                                                                                             |                                                                                                                                                                                                                                  |  |
| 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.                     |             |                                                                                   |                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                  |  |
| Signature<br><br><i>R. Russ Walker</i>                                                                                                                                                                                                                                                                                                                                          |             | [Electronically Filed]                                                            |                                                                                                                                                                                                                                                                          | Date <span style="border: 1px solid black; padding: 2px;">MM</span> / <span style="border: 1px solid black; padding: 2px;">DD</span> / <span style="border: 1px solid black; padding: 2px;">YYYY</span><br><b>06 / 20 / 2014</b> |  |

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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 FOR LINE 24 OF FORM 3X

|                                                                                                                                                                                                                                                                                                                                                                                 |  |                                                                                  |                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                   |                                  |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|----------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------|
| NAME OF COMMITTEE (In Full)<br><b>FREEDOMWORKS FOR AMERICA</b>                                                                                                                                                                                                                                                                                                                  |  |                                                                                  | FEC IDENTIFICATION NUMBER ▼<br><b>C</b> C00499020                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                                   |                                  |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">MM</span> / <span style="border: 1px solid black; padding: 2px;">DD</span> / <span style="border: 1px solid black; padding: 2px;">YYYY</span> |  |                                                                                  |                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                   |                                  |
| Full Name of Payee<br><b>Freedomworks, Inc.</b>                                                                                                                                                                                                                                                                                                                                 |  |                                                                                  | Date of Public Distribution/Dissemination<br><span style="border: 1px solid black; padding: 2px;">MM</span> / <span style="border: 1px solid black; padding: 2px;">DD</span> / <span style="border: 1px solid black; padding: 2px;">YYYY</span><br><b>05 / 08 / 2014</b> |                                                                                                                                                                                                                                                                   |                                  |
| Mailing Address<br>400 N Capitol St., NW<br>Suite 735                                                                                                                                                                                                                                                                                                                           |  |                                                                                  | Amount<br><span style="border: 1px solid black; padding: 2px;">203.93</span>                                                                                                                                                                                             |                                                                                                                                                                                                                                                                   |                                  |
| City<br>Washington                                                                                                                                                                                                                                                                                                                                                              |  | State<br>DC                                                                      | Zip Code<br>20001                                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                                   | Transaction ID : <b>SE.27144</b> |
| Purpose of Expenditure<br>IE-McDaniel-Email/Social Media/Printing                                                                                                                                                                                                                                                                                                               |  | Category/Type<br><span style="border: 1px solid black; padding: 2px;">004</span> |                                                                                                                                                                                                                                                                          | Date of Disbursement or Obligation<br><span style="border: 1px solid black; padding: 2px;">MM</span> / <span style="border: 1px solid black; padding: 2px;">DD</span> / <span style="border: 1px solid black; padding: 2px;">YYYY</span><br><b>05 / 08 / 2014</b> |                                  |
| Name of Federal Candidate<br>CHRISTOPHER BRIAN MCDANIEL                                                                                                                                                                                                                                                                                                                         |  |                                                                                  | <input checked="" type="checkbox"/> Support    Office Sought: <input type="checkbox"/> House    District: <u>00</u><br><input type="checkbox"/> Oppose <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate    State: <u>MS</u>                 |                                                                                                                                                                                                                                                                   |                                  |
| Calendar Year-To-Date<br>Per Election for Office Sought<br><span style="border: 1px solid black; padding: 2px;">248283.39</span>                                                                                                                                                                                                                                                |  |                                                                                  | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶                                                                                                                        |                                                                                                                                                                                                                                                                   |                                  |
| Full Name of Payee<br><b>Freedomworks, Inc.</b>                                                                                                                                                                                                                                                                                                                                 |  |                                                                                  | Date of Public Distribution/Dissemination<br><span style="border: 1px solid black; padding: 2px;">MM</span> / <span style="border: 1px solid black; padding: 2px;">DD</span> / <span style="border: 1px solid black; padding: 2px;">YYYY</span><br><b>05 / 08 / 2014</b> |                                                                                                                                                                                                                                                                   |                                  |
| Mailing Address<br>400 N Capitol St., NW<br>Suite 735                                                                                                                                                                                                                                                                                                                           |  |                                                                                  | Amount<br><span style="border: 1px solid black; padding: 2px;">100.42</span>                                                                                                                                                                                             |                                                                                                                                                                                                                                                                   |                                  |
| City<br>Washington                                                                                                                                                                                                                                                                                                                                                              |  | State<br>DC                                                                      | Zip Code<br>20001                                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                                   | Transaction ID : <b>SE.27190</b> |
| Purpose of Expenditure<br>IE-Sasse-Email/Social Media/Printing                                                                                                                                                                                                                                                                                                                  |  | Category/Type<br><span style="border: 1px solid black; padding: 2px;">004</span> |                                                                                                                                                                                                                                                                          | Date of Disbursement or Obligation<br><span style="border: 1px solid black; padding: 2px;">MM</span> / <span style="border: 1px solid black; padding: 2px;">DD</span> / <span style="border: 1px solid black; padding: 2px;">YYYY</span><br><b>05 / 08 / 2014</b> |                                  |
| Name of Federal Candidate<br>BENJAMIN E SASSE                                                                                                                                                                                                                                                                                                                                   |  |                                                                                  | <input checked="" type="checkbox"/> Support    Office Sought: <input type="checkbox"/> House    District: <u>00</u><br><input type="checkbox"/> Oppose <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate    State: <u>NE</u>                 |                                                                                                                                                                                                                                                                   |                                  |
| Calendar Year-To-Date<br>Per Election for Office Sought<br><span style="border: 1px solid black; padding: 2px;">66036.38</span>                                                                                                                                                                                                                                                 |  |                                                                                  | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶                                                                                                                        |                                                                                                                                                                                                                                                                   |                                  |
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶                                                                                                                                                                                                                                                                                                                 |  |                                                                                  | <span style="border: 1px solid black; padding: 2px;">304.35</span>                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                   |                                  |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶                                                                                                                                                                                                                                                                                                              |  |                                                                                  | <span style="border: 1px solid black; padding: 2px;"></span>                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                   |                                  |
| (c) <b>TOTAL</b> Independent Expenditures..... ▶                                                                                                                                                                                                                                                                                                                                |  |                                                                                  | <span style="border: 1px solid black; padding: 2px;"></span>                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                   |                                  |
| 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.                     |  |                                                                                  |                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                   |                                  |
| Signature <u>R. Russ Walker</u><br><div style="text-align: right;">[Electronically Filed]</div>                                                                                                                                                                                                                                                                                 |  |                                                                                  | Date <span style="border: 1px solid black; padding: 2px;">MM</span> / <span style="border: 1px solid black; padding: 2px;">DD</span> / <span style="border: 1px solid black; padding: 2px;">YYYY</span><br><b>06 / 20 / 2014</b>                                         |                                                                                                                                                                                                                                                                   |                                  |

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 119 OF 207  
 FOR LINE 24 OF FORM 3X

|                                                                                                                                                                              |  |  |                                                                                                                                                   |  |  |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|---------------------------------------------------------------------------------------------------------------------------------------------------|--|--|
| NAME OF COMMITTEE (In Full)<br><b>FREEDOMWORKS FOR AMERICA</b>                                                                                                               |  |  | FEC IDENTIFICATION NUMBER ▼<br><b>C</b> C00499020                                                                                                 |  |  |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on |  |  | <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY</div> <div>MM / DD / YYYY</div> <div>MM / DD / YYYY</div> </div> |  |  |

  

|                                                                                      |             |                       |                                                                                                                                                   |  |  |
|--------------------------------------------------------------------------------------|-------------|-----------------------|---------------------------------------------------------------------------------------------------------------------------------------------------|--|--|
| Full Name of Payee<br><b>Freedomworks, Inc.</b>                                      |             |                       | Date of Public Distribution/Dissemination<br>MM / DD / YYYY<br>05 / 09 / 2014                                                                     |  |  |
| Mailing Address<br>400 N Capitol St., NW<br>Suite 735                                |             |                       | Amount<br>11.39                                                                                                                                   |  |  |
| City<br>Washington                                                                   | State<br>DC | Zip Code<br>20001     | Transaction ID : SE.27174                                                                                                                         |  |  |
| Purpose of Expenditure<br>IE-Loudermilk-Email/Social Media/Printing                  |             | Category/<br>Type 004 | Date of Disbursement or Obligation<br>MM / DD / YYYY<br>05 / 09 / 2014                                                                            |  |  |
| Name of Federal Candidate<br>BARRY LOUDERMILK                                        |             |                       | <input checked="" type="checkbox"/> Support<br><input type="checkbox"/> Oppose                                                                    |  |  |
| Office Sought:<br><input type="checkbox"/> President <input type="checkbox"/> Senate |             |                       | <input checked="" type="checkbox"/> House District: 11<br>State: GA                                                                               |  |  |
| Calendar Year-To-Date<br>Per Election for Office Sought                              |             |                       | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶ |  |  |

  

|                                                                                                 |             |                       |                                                                                                                                                   |  |  |
|-------------------------------------------------------------------------------------------------|-------------|-----------------------|---------------------------------------------------------------------------------------------------------------------------------------------------|--|--|
| Full Name of Payee<br><b>Freedomworks, Inc.</b>                                                 |             |                       | Date of Public Distribution/Dissemination<br>MM / DD / YYYY<br>05 / 09 / 2014                                                                     |  |  |
| Mailing Address<br>400 N Capitol St., NW<br>Suite 735                                           |             |                       | Amount<br>206.52                                                                                                                                  |  |  |
| City<br>Washington                                                                              | State<br>DC | Zip Code<br>20001     | Transaction ID : SE.27191                                                                                                                         |  |  |
| Purpose of Expenditure<br>IE-Sasse-Email/Social Media/Printing                                  |             | Category/<br>Type 004 | Date of Disbursement or Obligation<br>MM / DD / YYYY<br>05 / 09 / 2014                                                                            |  |  |
| Name of Federal Candidate<br>BENJAMIN E SASSE                                                   |             |                       | <input checked="" type="checkbox"/> Support<br><input type="checkbox"/> Oppose                                                                    |  |  |
| Office Sought:<br><input type="checkbox"/> President <input checked="" type="checkbox"/> Senate |             |                       | <input type="checkbox"/> House District: 00<br>State: NE                                                                                          |  |  |
| Calendar Year-To-Date<br>Per Election for Office Sought                                         |             |                       | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶ |  |  |

  

|                                                                    |        |
|--------------------------------------------------------------------|--------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶    | 217.91 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶ |        |
| (c) <b>TOTAL</b> Independent Expenditures..... ▶                   |        |

  

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

R. Russ Walker

Signature

[Electronically Filed]

Date

MM / DD / YYYY

06 / 20 / 2014

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 120 OF 207  
 FOR LINE 24 OF FORM 3X

|                                                                                                                                                                              |  |                                                                                                                                                   |  |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|---------------------------------------------------------------------------------------------------------------------------------------------------|--|
| NAME OF COMMITTEE (In Full)<br><b>FREEDOMWORKS FOR AMERICA</b>                                                                                                               |  | FEC IDENTIFICATION NUMBER ▼<br><b>C</b> C00499020                                                                                                 |  |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on |  | <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY</div> <div>MM / DD / YYYY</div> <div>MM / DD / YYYY</div> </div> |  |

  

|                                                                  |             |                                                                                |                                                                                                                                                       |  |  |
|------------------------------------------------------------------|-------------|--------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|
| Full Name of Payee<br><b>Freedomworks, Inc.</b>                  |             |                                                                                | Date of Public Distribution/Dissemination<br>MM / DD / YYYY<br>05 / 09 / 2014                                                                         |  |  |
| Mailing Address<br>400 N Capitol St., NW<br>Suite 735            |             |                                                                                | Amount<br>195.85                                                                                                                                      |  |  |
| City<br>Washington                                               | State<br>DC | Zip Code<br>20001                                                              | Transaction ID : SE.27209                                                                                                                             |  |  |
| Purpose of Expenditure<br>IE-Smith-Email/Social Media/Printing   |             | Category/<br>Type 004                                                          | Date of Disbursement or Obligation<br>MM / DD / YYYY<br>05 / 09 / 2014                                                                                |  |  |
| Name of Federal Candidate<br>BRYAN SMITH                         |             | <input checked="" type="checkbox"/> Support<br><input type="checkbox"/> Oppose | Office Sought: <input checked="" type="checkbox"/> House District: 02<br><input type="checkbox"/> President <input type="checkbox"/> Senate State: ID |  |  |
| Calendar Year-To-Date<br>Per Election for Office Sought 30739.38 |             |                                                                                | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶     |  |  |

  

|                                                                   |             |                                                                                |                                                                                                                                                       |  |  |
|-------------------------------------------------------------------|-------------|--------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|
| Full Name of Payee<br><b>Freedomworks, Inc.</b>                   |             |                                                                                | Date of Public Distribution/Dissemination<br>MM / DD / YYYY<br>05 / 09 / 2014                                                                         |  |  |
| Mailing Address<br>400 N Capitol St., NW<br>Suite 735             |             |                                                                                | Amount<br>384.74                                                                                                                                      |  |  |
| City<br>Washington                                                | State<br>DC | Zip Code<br>20001                                                              | Transaction ID : SE.27224                                                                                                                             |  |  |
| Purpose of Expenditure<br>IE-McDaniel-Email/Social Media/Printing |             | Category/<br>Type 004                                                          | Date of Disbursement or Obligation<br>MM / DD / YYYY<br>05 / 09 / 2014                                                                                |  |  |
| Name of Federal Candidate<br>CHRISTOPHER BRIAN MCDANIEL           |             | <input checked="" type="checkbox"/> Support<br><input type="checkbox"/> Oppose | Office Sought: <input type="checkbox"/> House District: 00<br><input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: MS |  |  |
| Calendar Year-To-Date<br>Per Election for Office Sought 257958.13 |             |                                                                                | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶     |  |  |

  

|                                                            |        |
|------------------------------------------------------------|--------|
| (a) SUBTOTAL of Itemized Independent Expenditures.....▶    | 580.59 |
| (b) SUBTOTAL of Unitemized Independent Expenditures .....▶ |        |
| (c) TOTAL Independent Expenditures.....▶                   |        |

  

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

R. Russ Walker

Signature \_\_\_\_\_

[Electronically Filed]

Date MM / DD / YYYY  
06 / 20 / 2014



**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 121 OF 207  
 FOR LINE 24 OF FORM 3X

|                                                                                                                                                                                                                                                         |  |                                                                                                                                                   |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|---------------------------------------------------------------------------------------------------------------------------------------------------|
| NAME OF COMMITTEE (In Full)<br><b>FREEDOMWORKS FOR AMERICA</b>                                                                                                                                                                                          |  | <b>FEC IDENTIFICATION NUMBER ▼</b><br><div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00499020       </div> |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> |  |                                                                                                                                                   |

|                                                                                                                            |                                                                                   |                                                                                                                                                                                                                                                          |                                  |
|----------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------|
| Full Name of Payee<br><b>Freedomworks, Inc.</b>                                                                            |                                                                                   | Date of Public Distribution/Dissemination<br><span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span><br>05 / 09 / 2014                                                                                                                |                                  |
| Mailing Address<br>400 N Capitol St., NW<br>Suite 735                                                                      |                                                                                   | Amount<br><span style="border: 1px solid black; padding: 2px;">6.83</span>                                                                                                                                                                               |                                  |
| City<br>Washington                                                                                                         | State<br>DC                                                                       | Zip Code<br>20001                                                                                                                                                                                                                                        | Transaction ID : <b>SE.35445</b> |
| Purpose of Expenditure<br>IE-Schultz-Email/Social Media/Printing                                                           | Category/<br>Type <span style="border: 1px solid black; padding: 2px;">004</span> | Date of Disbursement or Obligation<br><span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span><br>05 / 09 / 2014                                                                                                                       |                                  |
| Name of Federal Candidate<br>MATTHEW DAVID SCHULTZ                                                                         |                                                                                   | <input checked="" type="checkbox"/> Support    Office Sought: <input checked="" type="checkbox"/> House    District: <u>03</u><br><input type="checkbox"/> Oppose <input type="checkbox"/> President <input type="checkbox"/> Senate    State: <u>IA</u> |                                  |
| Calendar Year-To-Date<br>Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">251.87</span> |                                                                                   | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶ _____                                                                                                  |                                  |

|                                                                                                                             |                                                                                   |                                                                                                                                                                                                                                                          |                                  |
|-----------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------|
| Full Name of Payee<br><b>Freedomworks, Inc.</b>                                                                             |                                                                                   | Date of Public Distribution/Dissemination<br><span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span><br>05 / 09 / 2014                                                                                                                |                                  |
| Mailing Address<br>400 N Capitol St., NW<br>Suite 735                                                                       |                                                                                   | Amount<br><span style="border: 1px solid black; padding: 2px;">32.27</span>                                                                                                                                                                              |                                  |
| City<br>Washington                                                                                                          | State<br>DC                                                                       | Zip Code<br>20001                                                                                                                                                                                                                                        | Transaction ID : <b>SE.35446</b> |
| Purpose of Expenditure<br>IE-Mathis-Email/Social Media/Printing                                                             | Category/<br>Type <span style="border: 1px solid black; padding: 2px;">004</span> | Date of Disbursement or Obligation<br><span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span><br>05 / 09 / 2014                                                                                                                       |                                  |
| Name of Federal Candidate<br>CHAD DR MATHIS                                                                                 |                                                                                   | <input checked="" type="checkbox"/> Support    Office Sought: <input checked="" type="checkbox"/> House    District: <u>06</u><br><input type="checkbox"/> Oppose <input type="checkbox"/> President <input type="checkbox"/> Senate    State: <u>AL</u> |                                  |
| Calendar Year-To-Date<br>Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">1882.14</span> |                                                                                   | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶ _____                                                                                                  |                                  |

|                                                                   |                                                                   |
|-------------------------------------------------------------------|-------------------------------------------------------------------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....▶    | <span style="border: 1px solid black; padding: 2px;">39.10</span> |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....▶ | <span style="border: 1px solid black; padding: 2px;"> </span>     |
| (c) <b>TOTAL</b> Independent Expenditures.....▶                   | <span style="border: 1px solid black; padding: 2px;"> </span>     |

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

[Electronically Filed]

Date

MM / DD / YYYY  
 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)<br><b>FREEDOMWORKS FOR AMERICA</b>                                                                                                                                                                                                                                                                                              |             | FEC IDENTIFICATION NUMBER ▼<br><b>C</b> C00499020                                                                                                 |                                                                                                                                                                     |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on                                                                                                                                                                                |             | M M M / D D D / Y Y Y Y Y Y                                                                                                                       |                                                                                                                                                                     |
| Full Name of Payee<br><b>Freedomworks, Inc.</b>                                                                                                                                                                                                                                                                                                             |             | Date of Public Distribution/Dissemination<br>M M M / D D D / Y Y Y Y Y Y<br><b>05 / 12 / 2014</b>                                                 |                                                                                                                                                                     |
| Mailing Address<br>400 N Capitol St., NW<br>Suite 735                                                                                                                                                                                                                                                                                                       |             | Amount<br><b>93.18</b>                                                                                                                            |                                                                                                                                                                     |
| City<br>Washington                                                                                                                                                                                                                                                                                                                                          | State<br>DC | Zip Code<br>20001                                                                                                                                 | Transaction ID : <b>SE.27213</b>                                                                                                                                    |
| Purpose of Expenditure<br>IE-Smith-Email/Social Media/Printing                                                                                                                                                                                                                                                                                              |             | Category/<br>Type <b>004</b>                                                                                                                      | Date of Disbursement or Obligation<br>M M M / D D D / Y Y Y Y Y Y<br><b>05 / 12 / 2014</b>                                                                          |
| Name of Federal Candidate<br><b>BRYAN SMITH</b>                                                                                                                                                                                                                                                                                                             |             | <input checked="" type="checkbox"/> Support<br><input type="checkbox"/> Oppose                                                                    | Office Sought: <input checked="" type="checkbox"/> House District: <b>02</b><br><input type="checkbox"/> President <input type="checkbox"/> Senate State: <b>ID</b> |
| Calendar Year-To-Date<br>Per Election for Office Sought                                                                                                                                                                                                                                                                                                     |             | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶ |                                                                                                                                                                     |
| Full Name of Payee<br><b>Freedomworks, Inc.</b>                                                                                                                                                                                                                                                                                                             |             | Date of Public Distribution/Dissemination<br>M M M / D D D / Y Y Y Y Y Y<br><b>05 / 12 / 2014</b>                                                 |                                                                                                                                                                     |
| Mailing Address<br>400 N Capitol St., NW<br>Suite 735                                                                                                                                                                                                                                                                                                       |             | Amount<br><b>211.52</b>                                                                                                                           |                                                                                                                                                                     |
| City<br>Washington                                                                                                                                                                                                                                                                                                                                          | State<br>DC | Zip Code<br>20001                                                                                                                                 | Transaction ID : <b>SE.27225</b>                                                                                                                                    |
| Purpose of Expenditure<br>IE-McDaniel-Email/Social Media/Printing                                                                                                                                                                                                                                                                                           |             | Category/<br>Type <b>004</b>                                                                                                                      | Date of Disbursement or Obligation<br>M M M / D D D / Y Y Y Y Y Y<br><b>05 / 12 / 2014</b>                                                                          |
| Name of Federal Candidate<br><b>CHRISTOPHER BRIAN MCDANIEL</b>                                                                                                                                                                                                                                                                                              |             | <input checked="" type="checkbox"/> Support<br><input type="checkbox"/> Oppose                                                                    | Office Sought: <input type="checkbox"/> House District: <b>00</b><br><input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <b>MS</b> |
| Calendar Year-To-Date<br>Per Election for Office Sought                                                                                                                                                                                                                                                                                                     |             | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶ |                                                                                                                                                                     |
| (a) SUBTOTAL of Itemized Independent Expenditures.....▶                                                                                                                                                                                                                                                                                                     |             | <b>304.70</b>                                                                                                                                     |                                                                                                                                                                     |
| (b) SUBTOTAL of Unitemized Independent Expenditures.....▶                                                                                                                                                                                                                                                                                                   |             |                                                                                                                                                   |                                                                                                                                                                     |
| (c) TOTAL Independent Expenditures.....▶                                                                                                                                                                                                                                                                                                                    |             |                                                                                                                                                   |                                                                                                                                                                     |
| Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. |             |                                                                                                                                                   |                                                                                                                                                                     |
| Signature<br><br><i>R. Russ Walker</i>                                                                                                                                                                                                                                                                                                                      |             | Date<br>M M M / D D D / Y Y Y Y Y Y<br><b>06 / 20 / 2014</b>                                                                                      |                                                                                                                                                                     |
|                                                                                                                                                                                                                                                                                                                                                             |             | [Electronically Filed]                                                                                                                            |                                                                                                                                                                     |

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**PAGE 123 OF 207  
FOR LINE 24 OF FORM 3X

|                                                                                                                                                                                                                                                                                                                                                             |                    |                                                                                                                                                   |                                                                                                                                                                     |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------|---------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| NAME OF COMMITTEE (In Full)<br><b>FREEDOMWORKS FOR AMERICA</b>                                                                                                                                                                                                                                                                                              |                    | FEC IDENTIFICATION NUMBER ▼<br><b>C</b> C00499020                                                                                                 |                                                                                                                                                                     |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on                                                                                                                                                                                |                    | MM / DD / YYYY                                                                                                                                    |                                                                                                                                                                     |
| Full Name of Payee<br><b>Freedomworks, Inc.</b>                                                                                                                                                                                                                                                                                                             |                    | Date of Public Distribution/Dissemination<br>MM / DD / YYYY<br><b>05 / 12 / 2014</b>                                                              |                                                                                                                                                                     |
| Mailing Address<br><b>400 N Capitol St., NW<br/>Suite 735</b>                                                                                                                                                                                                                                                                                               |                    | Amount<br><b>232.91</b>                                                                                                                           |                                                                                                                                                                     |
| City<br><b>Washington</b>                                                                                                                                                                                                                                                                                                                                   | State<br><b>DC</b> | Zip Code<br><b>20001</b>                                                                                                                          | Transaction ID : <b>SE.35448</b>                                                                                                                                    |
| Purpose of Expenditure<br><b>IE-Sasse-Email/Social Media/Printing</b>                                                                                                                                                                                                                                                                                       |                    | Category/<br>Type <b>004</b>                                                                                                                      | Date of Disbursement or Obligation<br>MM / DD / YYYY<br><b>05 / 12 / 2014</b>                                                                                       |
| Name of Federal Candidate<br><b>BENJAMIN E SASSE</b>                                                                                                                                                                                                                                                                                                        |                    | <input checked="" type="checkbox"/> Support<br><input type="checkbox"/> Oppose                                                                    | Office Sought: <input type="checkbox"/> House District: <b>00</b><br><input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <b>NE</b> |
| Calendar Year-To-Date<br>Per Election for Office Sought<br><b>74225.81</b>                                                                                                                                                                                                                                                                                  |                    | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶ |                                                                                                                                                                     |
| Full Name of Payee<br><b>Freedomworks, Inc.</b>                                                                                                                                                                                                                                                                                                             |                    | Date of Public Distribution/Dissemination<br>MM / DD / YYYY<br><b>05 / 12 / 2014</b>                                                              |                                                                                                                                                                     |
| Mailing Address<br><b>400 N Capitol St., NW<br/>Suite 735</b>                                                                                                                                                                                                                                                                                               |                    | Amount<br><b>108.44</b>                                                                                                                           |                                                                                                                                                                     |
| City<br><b>Washington</b>                                                                                                                                                                                                                                                                                                                                   | State<br><b>DC</b> | Zip Code<br><b>20001</b>                                                                                                                          | Transaction ID : <b>SE.35449</b>                                                                                                                                    |
| Purpose of Expenditure<br><b>IE-Birman-Email/Social Media/Printing</b>                                                                                                                                                                                                                                                                                      |                    | Category/<br>Type <b>004</b>                                                                                                                      | Date of Disbursement or Obligation<br>MM / DD / YYYY<br><b>05 / 12 / 2014</b>                                                                                       |
| Name of Federal Candidate<br><b>IGOR A BIRMAN</b>                                                                                                                                                                                                                                                                                                           |                    | <input checked="" type="checkbox"/> Support<br><input type="checkbox"/> Oppose                                                                    | Office Sought: <input checked="" type="checkbox"/> House District: <b>07</b><br><input type="checkbox"/> President <input type="checkbox"/> Senate State: <b>CA</b> |
| Calendar Year-To-Date<br>Per Election for Office Sought<br><b>28408.31</b>                                                                                                                                                                                                                                                                                  |                    | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶ |                                                                                                                                                                     |
| (a) SUBTOTAL of Itemized Independent Expenditures.....▶                                                                                                                                                                                                                                                                                                     |                    | <b>341.35</b>                                                                                                                                     |                                                                                                                                                                     |
| (b) SUBTOTAL of Unitemized Independent Expenditures .....                                                                                                                                                                                                                                                                                                   |                    |                                                                                                                                                   |                                                                                                                                                                     |
| (c) TOTAL Independent Expenditures.....▶                                                                                                                                                                                                                                                                                                                    |                    |                                                                                                                                                   |                                                                                                                                                                     |
| Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. |                    |                                                                                                                                                   |                                                                                                                                                                     |
| Signature<br><b>R. Russ Walker</b>                                                                                                                                                                                                                                                                                                                          |                    | Date<br>MM / DD / YYYY<br><b>06 / 20 / 2014</b>                                                                                                   |                                                                                                                                                                     |
|                                                                                                                                                                                                                                                                                                                                                             |                    | [Electronically Filed]                                                                                                                            |                                                                                                                                                                     |

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**PAGE 124 OF 207  
FOR LINE 24 OF FORM 3X

|                                                                                                                                                                                                                                                                                                                                                             |             |                                                                                                                                                   |                                                                                                                                                                     |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|---------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| NAME OF COMMITTEE (In Full)<br><b>FREEDOMWORKS FOR AMERICA</b>                                                                                                                                                                                                                                                                                              |             | FEC IDENTIFICATION NUMBER ▼<br><b>C</b> C00499020                                                                                                 |                                                                                                                                                                     |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on                                                                                                                                                                                |             | M M M / D D D / Y Y Y Y Y Y                                                                                                                       |                                                                                                                                                                     |
| Full Name of Payee<br><b>Freedomworks, Inc.</b>                                                                                                                                                                                                                                                                                                             |             | Date of Public Distribution/Dissemination<br>M M M / D D D / Y Y Y Y Y Y<br><b>05 / 12 / 2014</b>                                                 |                                                                                                                                                                     |
| Mailing Address<br>400 N Capitol St., NW<br>Suite 735                                                                                                                                                                                                                                                                                                       |             | Amount<br><b>77.64</b>                                                                                                                            |                                                                                                                                                                     |
| City<br>Washington                                                                                                                                                                                                                                                                                                                                          | State<br>DC | Zip Code<br>20001                                                                                                                                 | Transaction ID : <b>SE.35450</b>                                                                                                                                    |
| Purpose of Expenditure<br>IE-Mathis-Email/Social Media/Printing                                                                                                                                                                                                                                                                                             |             | Category/<br>Type <b>004</b>                                                                                                                      | Date of Disbursement or Obligation<br>M M M / D D D / Y Y Y Y Y Y<br><b>05 / 12 / 2014</b>                                                                          |
| Name of Federal Candidate<br><b>CHAD DR MATHIS</b>                                                                                                                                                                                                                                                                                                          |             | <input checked="" type="checkbox"/> Support<br><input type="checkbox"/> Oppose                                                                    | Office Sought: <input checked="" type="checkbox"/> House District: <b>06</b><br><input type="checkbox"/> President <input type="checkbox"/> Senate State: <b>AL</b> |
| Calendar Year-To-Date<br>Per Election for Office Sought                                                                                                                                                                                                                                                                                                     |             | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶ |                                                                                                                                                                     |
| Full Name of Payee<br><b>Freedomworks, Inc.</b>                                                                                                                                                                                                                                                                                                             |             | Date of Public Distribution/Dissemination<br>M M M / D D D / Y Y Y Y Y Y<br><b>05 / 13 / 2014</b>                                                 |                                                                                                                                                                     |
| Mailing Address<br>400 N Capitol St., NW<br>Suite 735                                                                                                                                                                                                                                                                                                       |             | Amount<br><b>116.48</b>                                                                                                                           |                                                                                                                                                                     |
| City<br>Washington                                                                                                                                                                                                                                                                                                                                          | State<br>DC | Zip Code<br>20001                                                                                                                                 | Transaction ID : <b>SE.27214</b>                                                                                                                                    |
| Purpose of Expenditure<br>IE-Smith-Email/Social Media/Printing                                                                                                                                                                                                                                                                                              |             | Category/<br>Type <b>004</b>                                                                                                                      | Date of Disbursement or Obligation<br>M M M / D D D / Y Y Y Y Y Y<br><b>05 / 13 / 2014</b>                                                                          |
| Name of Federal Candidate<br><b>BRYAN SMITH</b>                                                                                                                                                                                                                                                                                                             |             | <input checked="" type="checkbox"/> Support<br><input type="checkbox"/> Oppose                                                                    | Office Sought: <input checked="" type="checkbox"/> House District: <b>02</b><br><input type="checkbox"/> President <input type="checkbox"/> Senate State: <b>ID</b> |
| Calendar Year-To-Date<br>Per Election for Office Sought                                                                                                                                                                                                                                                                                                     |             | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶ |                                                                                                                                                                     |
| (a) SUBTOTAL of Itemized Independent Expenditures..... ▶                                                                                                                                                                                                                                                                                                    |             | <b>194.12</b>                                                                                                                                     |                                                                                                                                                                     |
| (b) SUBTOTAL of Unitemized Independent Expenditures ..... ▶                                                                                                                                                                                                                                                                                                 |             |                                                                                                                                                   |                                                                                                                                                                     |
| (c) TOTAL Independent Expenditures..... ▶                                                                                                                                                                                                                                                                                                                   |             |                                                                                                                                                   |                                                                                                                                                                     |
| Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. |             |                                                                                                                                                   |                                                                                                                                                                     |
| Signature<br><br><i>R. Russ Walker</i>                                                                                                                                                                                                                                                                                                                      |             | Date<br>M M M / D D D / Y Y Y Y Y Y<br><b>06 / 20 / 2014</b>                                                                                      |                                                                                                                                                                     |
|                                                                                                                                                                                                                                                                                                                                                             |             | [Electronically Filed]                                                                                                                            |                                                                                                                                                                     |

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**PAGE 125 OF 207  
FOR LINE 24 OF FORM 3X

|                                                                                                                                                                                                                                                                                                                                                             |             |                                                                                      |                                                                                                                                                                     |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|--------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| NAME OF COMMITTEE (In Full)<br><b>FREEDOMWORKS FOR AMERICA</b>                                                                                                                                                                                                                                                                                              |             | FEC IDENTIFICATION NUMBER ▼<br><b>C</b> C00499020                                    |                                                                                                                                                                     |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on                                                                                                                                                                                |             | MM / DD / YYYY                                                                       |                                                                                                                                                                     |
| Full Name of Payee<br><b>Freedomworks, Inc.</b>                                                                                                                                                                                                                                                                                                             |             | Date of Public Distribution/Dissemination<br>MM / DD / YYYY<br><b>05 / 13 / 2014</b> |                                                                                                                                                                     |
| Mailing Address<br>400 N Capitol St., NW<br>Suite 735                                                                                                                                                                                                                                                                                                       |             | Amount<br><b>251.55</b>                                                              |                                                                                                                                                                     |
| City<br>Washington                                                                                                                                                                                                                                                                                                                                          | State<br>DC | Zip Code<br>20001                                                                    | Transaction ID : <b>SE.27226</b>                                                                                                                                    |
| Purpose of Expenditure<br>IE-McDaniel-Email/Social Media/Printing                                                                                                                                                                                                                                                                                           |             | Category/<br>Type <b>004</b>                                                         | Date of Disbursement or Obligation<br>MM / DD / YYYY<br><b>05 / 13 / 2014</b>                                                                                       |
| Name of Federal Candidate<br><b>CHRISTOPHER BRIAN MCDANIEL</b>                                                                                                                                                                                                                                                                                              |             | <input checked="" type="checkbox"/> Support<br><input type="checkbox"/> Oppose       | Office Sought: <input type="checkbox"/> House District: <b>00</b><br><input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <b>MS</b> |
| Calendar Year-To-Date<br>Per Election for Office Sought                                                                                                                                                                                                                                                                                                     |             | <b>258421.20</b>                                                                     | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶                   |
| Full Name of Payee<br><b>Freedomworks, Inc.</b>                                                                                                                                                                                                                                                                                                             |             | Date of Public Distribution/Dissemination<br>MM / DD / YYYY<br><b>05 / 13 / 2014</b> |                                                                                                                                                                     |
| Mailing Address<br>400 N Capitol St., NW<br>Suite 735                                                                                                                                                                                                                                                                                                       |             | Amount<br><b>379.74</b>                                                              |                                                                                                                                                                     |
| City<br>Washington                                                                                                                                                                                                                                                                                                                                          | State<br>DC | Zip Code<br>20001                                                                    | Transaction ID : <b>SE.35453</b>                                                                                                                                    |
| Purpose of Expenditure<br>IE-Sasse-Email/Social Media/Printing                                                                                                                                                                                                                                                                                              |             | Category/<br>Type <b>004</b>                                                         | Date of Disbursement or Obligation<br>MM / DD / YYYY<br><b>05 / 13 / 2014</b>                                                                                       |
| Name of Federal Candidate<br><b>BENJAMIN E SASSE</b>                                                                                                                                                                                                                                                                                                        |             | <input checked="" type="checkbox"/> Support<br><input type="checkbox"/> Oppose       | Office Sought: <input type="checkbox"/> House District: <b>00</b><br><input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <b>NE</b> |
| Calendar Year-To-Date<br>Per Election for Office Sought                                                                                                                                                                                                                                                                                                     |             | <b>74975.16</b>                                                                      | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶                   |
| (a) SUBTOTAL of Itemized Independent Expenditures..... ▶                                                                                                                                                                                                                                                                                                    |             | <b>631.29</b>                                                                        |                                                                                                                                                                     |
| (b) SUBTOTAL of Unitemized Independent Expenditures ..... ▶                                                                                                                                                                                                                                                                                                 |             |                                                                                      |                                                                                                                                                                     |
| (c) TOTAL Independent Expenditures..... ▶                                                                                                                                                                                                                                                                                                                   |             |                                                                                      |                                                                                                                                                                     |
| Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. |             |                                                                                      |                                                                                                                                                                     |
| Signature<br><br><i>R. Russ Walker</i>                                                                                                                                                                                                                                                                                                                      |             | Date<br>MM / DD / YYYY<br><b>06 / 20 / 2014</b>                                      |                                                                                                                                                                     |
|                                                                                                                                                                                                                                                                                                                                                             |             | [Electronically Filed]                                                               |                                                                                                                                                                     |

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**PAGE 126 OF 207  
FOR LINE 24 OF FORM 3X

|                                                                                                                                                                                                                                                                                                                                                             |             |                                                                                      |                                                                                                                                                                     |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|--------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| NAME OF COMMITTEE (In Full)<br><b>FREEDOMWORKS FOR AMERICA</b>                                                                                                                                                                                                                                                                                              |             | FEC IDENTIFICATION NUMBER ▼<br><b>C</b> C00499020                                    |                                                                                                                                                                     |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on                                                                                                                                                                                |             | MM / DD / YYYY                                                                       |                                                                                                                                                                     |
| Full Name of Payee<br><b>Freedomworks, Inc.</b>                                                                                                                                                                                                                                                                                                             |             | Date of Public Distribution/Dissemination<br>MM / DD / YYYY<br><b>05 / 13 / 2014</b> |                                                                                                                                                                     |
| Mailing Address<br>400 N Capitol St., NW<br>Suite 735                                                                                                                                                                                                                                                                                                       |             | Amount<br><b>77.64</b>                                                               |                                                                                                                                                                     |
| City<br>Washington                                                                                                                                                                                                                                                                                                                                          | State<br>DC | Zip Code<br>20001                                                                    | Transaction ID : <b>SE.35454</b>                                                                                                                                    |
| Purpose of Expenditure<br>IE-Shannon-Email/Social Media/Printing                                                                                                                                                                                                                                                                                            |             | Category/<br>Type <b>001</b>                                                         | Date of Disbursement or Obligation<br>MM / DD / YYYY<br><b>05 / 13 / 2014</b>                                                                                       |
| Name of Federal Candidate<br>T W SHANNON                                                                                                                                                                                                                                                                                                                    |             | <input checked="" type="checkbox"/> Support<br><input type="checkbox"/> Oppose       | Office Sought: <input type="checkbox"/> House District: <b>00</b><br><input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <b>OK</b> |
| Calendar Year-To-Date<br>Per Election for Office Sought                                                                                                                                                                                                                                                                                                     |             | <b>142.25</b>                                                                        | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶                   |
| Full Name of Payee<br><b>Freedomworks, Inc.</b>                                                                                                                                                                                                                                                                                                             |             | Date of Public Distribution/Dissemination<br>MM / DD / YYYY<br><b>05 / 13 / 2014</b> |                                                                                                                                                                     |
| Mailing Address<br>400 N Capitol St., NW<br>Suite 735                                                                                                                                                                                                                                                                                                       |             | Amount<br><b>101.17</b>                                                              |                                                                                                                                                                     |
| City<br>Washington                                                                                                                                                                                                                                                                                                                                          | State<br>DC | Zip Code<br>20001                                                                    | Transaction ID : <b>SE.35455</b>                                                                                                                                    |
| Purpose of Expenditure<br>IE-Loudermilk-Email/Social Media/Printing                                                                                                                                                                                                                                                                                         |             | Category/<br>Type <b>004</b>                                                         | Date of Disbursement or Obligation<br>MM / DD / YYYY<br><b>05 / 13 / 2014</b>                                                                                       |
| Name of Federal Candidate<br>BARRY LOUDERMILK                                                                                                                                                                                                                                                                                                               |             | <input checked="" type="checkbox"/> Support<br><input type="checkbox"/> Oppose       | Office Sought: <input checked="" type="checkbox"/> House District: <b>11</b><br><input type="checkbox"/> President <input type="checkbox"/> Senate State: <b>GA</b> |
| Calendar Year-To-Date<br>Per Election for Office Sought                                                                                                                                                                                                                                                                                                     |             | <b>10413.50</b>                                                                      | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶                   |
| (a) SUBTOTAL of Itemized Independent Expenditures.....▶                                                                                                                                                                                                                                                                                                     |             | <b>178.81</b>                                                                        |                                                                                                                                                                     |
| (b) SUBTOTAL of Unitemized Independent Expenditures .....                                                                                                                                                                                                                                                                                                   |             |                                                                                      |                                                                                                                                                                     |
| (c) TOTAL Independent Expenditures.....▶                                                                                                                                                                                                                                                                                                                    |             |                                                                                      |                                                                                                                                                                     |
| Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. |             |                                                                                      |                                                                                                                                                                     |
| Signature<br><br><i>R. Russ Walker</i>                                                                                                                                                                                                                                                                                                                      |             | Date<br>MM / DD / YYYY<br><b>06 / 20 / 2014</b>                                      |                                                                                                                                                                     |
|                                                                                                                                                                                                                                                                                                                                                             |             | [Electronically Filed]                                                               |                                                                                                                                                                     |

|                                                                                                                                                    |             |                                                                                                               |                                                                                                                                            |
|----------------------------------------------------------------------------------------------------------------------------------------------------|-------------|---------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------|
| Full Name of Payee<br><b>Freedomworks, Inc.</b>                                                                                                    |             | Date of Public Distribution/Dissemination<br><div> <div>MM / DD / YYYY</div> <div>05 / 13 / 2014</div> </div> |                                                                                                                                            |
| Mailing Address<br>400 N Capitol St., NW<br>Suite 735                                                                                              |             | Amount<br><div> <div></div> <div>23.53</div> </div>                                                           |                                                                                                                                            |
| City<br>Washington                                                                                                                                 | State<br>DC | Zip Code<br>20001                                                                                             | <b>Transaction ID : SE.35457</b><br>Date of Disbursement or Obligation<br><div> <div>MM / DD / YYYY</div> <div>05 / 13 / 2014</div> </div> |
| Purpose of Expenditure<br>IE-Mathis-Email/Social Media/Printing                                                                                    |             | Category/<br>Type<br><div> <div>004</div> </div>                                                              |                                                                                                                                            |
| Name of Federal Candidate<br>CHAD DR MATHIS                                                                                                        |             | <input checked="" type="checkbox"/> Support<br><input type="checkbox"/> Oppose                                | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President<br><input type="checkbox"/> Senate             |
| District: <u>06</u><br>State: <u>AL</u>                                                                                                            |             | Calendar Year-To-Date<br>Per Election for Office Sought<br><div> <div></div> <div>1983.31</div> </div>        |                                                                                                                                            |
| Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ► _____ |             |                                                                                                               |                                                                                                                                            |

|                                                                  |   |       |
|------------------------------------------------------------------|---|-------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....    | ▶ | 47.06 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... | ▶ |       |
| (c) <b>TOTAL</b> Independent Expenditures.....                   | ▶ |       |

FEC Schedule E (Form 3X) Rev. 09/2013

|                                                                   |             |                                                                                                                                              |                                                                                                                                                       |
|-------------------------------------------------------------------|-------------|----------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------|
| Full Name of Payee<br><b>Freedomworks, Inc.</b>                   |             | Date of Public Distribution/Dissemination<br>MM / DD / YYYY<br>05 / 14 / 2014                                                                |                                                                                                                                                       |
| Mailing Address<br>400 N Capitol St., NW<br>Suite 735             |             | Amount<br>341.35                                                                                                                             |                                                                                                                                                       |
| City<br>Washington                                                | State<br>DC | Zip Code<br>20001                                                                                                                            | Transaction ID : <b>SE.32504</b><br>Date of Disbursement or Obligation<br>MM / DD / YYYY<br>05 / 14 / 2014                                            |
| Purpose of Expenditure<br>IE-McDaniel-Email/Social Media/Printing |             | Category/<br>Type<br>004                                                                                                                     |                                                                                                                                                       |
| Name of Federal Candidate<br>CHRISTOPHER BRIAN MCDANIEL           |             | <input checked="" type="checkbox"/> Support<br><input type="checkbox"/> Oppose                                                               | Office Sought: <input type="checkbox"/> House District: 00<br><input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: MS |
| Calendar Year-To-Date<br>Per Election for Office Sought<br>341.35 |             | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▶ |                                                                                                                                                       |

|                                                                  |   |        |
|------------------------------------------------------------------|---|--------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....    | ▶ | 411.24 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... | ▶ |        |
| (c) <b>TOTAL</b> Independent Expenditures.....                   | ▶ |        |

Signature



|                                                                   |             |                                                                                                                                              |                                                                                                                                                       |
|-------------------------------------------------------------------|-------------|----------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------|
| Full Name of Payee<br><b>Freedomworks, Inc.</b>                   |             | Date of Public Distribution/Dissemination<br>MM / DD / YYYY<br>05 / 14 / 2014                                                                |                                                                                                                                                       |
| Mailing Address<br>400 N Capitol St., NW<br>Suite 735             |             | Amount<br>77.64                                                                                                                              |                                                                                                                                                       |
| City<br>Washington                                                | State<br>DC | Zip Code<br>20001                                                                                                                            | Transaction ID : <b>SE.35460</b><br>Date of Disbursement or Obligation<br>MM / DD / YYYY<br>05 / 14 / 2014                                            |
| Purpose of Expenditure<br>IE-Shannon-Email/Social Media/Printing  |             | Category/<br>Type<br>004                                                                                                                     |                                                                                                                                                       |
| Name of Federal Candidate<br>T W SHANNON                          |             | <input checked="" type="checkbox"/> Support<br><input type="checkbox"/> Oppose                                                               | Office Sought: <input type="checkbox"/> House District: 00<br><input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: OK |
| Calendar Year-To-Date<br>Per Election for Office Sought<br>219.89 |             | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ► |                                                                                                                                                       |

|                                                                  |   |        |
|------------------------------------------------------------------|---|--------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....    | ▶ | 197.03 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... | ▶ |        |
| (c) <b>TOTAL</b> Independent Expenditures.....                   | ▶ |        |

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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 FOR LINE 24 OF FORM 3X

|                                                                                                                                                                              |  |                                                                                                                                                             |  |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|-------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| NAME OF COMMITTEE (In Full)<br><b>FREEDOMWORKS FOR AMERICA</b>                                                                                                               |  | FEC IDENTIFICATION NUMBER ▼<br><b>C</b> C00499020                                                                                                           |  |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on |  | <div style="border: 1px solid black; padding: 2px;"> <div style="display: flex; justify-content: space-between;"> <span>MM / DD / YYYY</span> </div> </div> |  |

|                                                                                                                                                                                                                  |             |                                                                                |                                                                                                                                                                                                                                       |  |  |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|--------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|
| Full Name of Payee<br><b>Freedomworks, Inc.</b>                                                                                                                                                                  |             |                                                                                | Date of Public Distribution/Dissemination<br><div style="border: 1px solid black; padding: 2px;"> <div style="display: flex; justify-content: space-between;"> <span>MM / DD / YYYY</span> </div> </div>                              |  |  |
| Mailing Address 400 N Capitol St., NW<br>Suite 735                                                                                                                                                               |             |                                                                                | Amount<br><div style="border: 1px solid black; padding: 2px;"> <div style="display: flex; justify-content: space-between;"> <span>38.82</span> </div> </div>                                                                          |  |  |
| City<br>Washington                                                                                                                                                                                               | State<br>DC | Zip Code<br>20001                                                              | Transaction ID : <b>SE.35461</b><br>Date of Disbursement or Obligation<br><div style="border: 1px solid black; padding: 2px;"> <div style="display: flex; justify-content: space-between;"> <span>MM / DD / YYYY</span> </div> </div> |  |  |
| Purpose of Expenditure<br>IE-Birman-Email/Social Media/Printing                                                                                                                                                  |             | Category/<br>Type 004                                                          |                                                                                                                                                                                                                                       |  |  |
| Name of Federal Candidate<br>IGOR A BIRMAN                                                                                                                                                                       |             | <input checked="" type="checkbox"/> Support<br><input type="checkbox"/> Oppose | Office Sought: <input checked="" type="checkbox"/> House District: 07<br><input type="checkbox"/> President <input type="checkbox"/> Senate State: CA                                                                                 |  |  |
| Calendar Year-To-Date<br>Per Election for Office Sought<br><div style="border: 1px solid black; padding: 2px;"> <div style="display: flex; justify-content: space-between;"> <span>28447.13</span> </div> </div> |             |                                                                                | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶                                                                                     |  |  |

|                                                                                                                                                                                                                  |             |                                                                                |                                                                                                                                                                                                                                       |  |  |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|--------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|
| Full Name of Payee<br><b>Freedomworks, Inc.</b>                                                                                                                                                                  |             |                                                                                | Date of Public Distribution/Dissemination<br><div style="border: 1px solid black; padding: 2px;"> <div style="display: flex; justify-content: space-between;"> <span>MM / DD / YYYY</span> </div> </div>                              |  |  |
| Mailing Address 400 N Capitol St., NW<br>Suite 735                                                                                                                                                               |             |                                                                                | Amount<br><div style="border: 1px solid black; padding: 2px;"> <div style="display: flex; justify-content: space-between;"> <span>77.64</span> </div> </div>                                                                          |  |  |
| City<br>Washington                                                                                                                                                                                               | State<br>DC | Zip Code<br>20001                                                              | Transaction ID : <b>SE.35462</b><br>Date of Disbursement or Obligation<br><div style="border: 1px solid black; padding: 2px;"> <div style="display: flex; justify-content: space-between;"> <span>MM / DD / YYYY</span> </div> </div> |  |  |
| Purpose of Expenditure<br>IE-Loudermilk-Email/Social Media/Printing                                                                                                                                              |             | Category/<br>Type 004                                                          |                                                                                                                                                                                                                                       |  |  |
| Name of Federal Candidate<br>BARRY LOUDERMILK                                                                                                                                                                    |             | <input checked="" type="checkbox"/> Support<br><input type="checkbox"/> Oppose | Office Sought: <input checked="" type="checkbox"/> House District: 11<br><input type="checkbox"/> President <input type="checkbox"/> Senate State: GA                                                                                 |  |  |
| Calendar Year-To-Date<br>Per Election for Office Sought<br><div style="border: 1px solid black; padding: 2px;"> <div style="display: flex; justify-content: space-between;"> <span>10491.14</span> </div> </div> |             |                                                                                | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶                                                                                     |  |  |

|                                                                    |                                                                                                                                                     |
|--------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶    | <div style="border: 1px solid black; padding: 2px;"> <div style="display: flex; justify-content: space-between;"> <span>116.46</span> </div> </div> |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶ | <div style="border: 1px solid black; padding: 2px;"> <div style="display: flex; justify-content: space-between;"> <span></span> </div> </div>       |
| (c) <b>TOTAL</b> Independent Expenditures..... ▶                   | <div style="border: 1px solid black; padding: 2px;"> <div style="display: flex; justify-content: space-between;"> <span></span> </div> </div>       |

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

R. Russ Walker

[Electronically Filed]

Date

MM / DD / YYYY

Signature

|                                                                    |             |                                                                                                                                              |                                                                                                                                                             |
|--------------------------------------------------------------------|-------------|----------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Full Name of Payee<br>Freedomworks, Inc.                           |             | Date of Public Distribution/Dissemination<br>MM / DD / YYYY<br>05 / 14 / 2014                                                                |                                                                                                                                                             |
| Mailing Address<br>400 N Capitol St., NW<br>Suite 735              |             | Amount<br>38.82                                                                                                                              |                                                                                                                                                             |
| City<br>Washington                                                 | State<br>DC | Zip Code<br>20001                                                                                                                            | Transaction ID : SE.35464<br>Date of Disbursement or Obligation<br>MM / DD / YYYY<br>05 / 14 / 2014                                                         |
| Purpose of Expenditure<br>IE-Mathis-Email/Social Media/Printing    |             | Category/<br>Type<br>004                                                                                                                     |                                                                                                                                                             |
| Name of Federal Candidate<br>CHAD DR MATHIS                        |             | <input checked="" type="checkbox"/> Support<br><input type="checkbox"/> Oppose                                                               | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President<br><input type="checkbox"/> Senate<br>District: 06<br>State: AL |
| Calendar Year-To-Date<br>Per Election for Office Sought<br>2022.13 |             | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▶ |                                                                                                                                                             |

|                                                                  |   |        |
|------------------------------------------------------------------|---|--------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....    | ▶ | 116.46 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... | ▶ |        |
| (c) <b>TOTAL</b> Independent Expenditures.....                   | ▶ |        |

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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 FOR LINE 24 OF FORM 3X

|                                                                                                                                                                                                                                                                                                                                                             |  |                                                                                  |                                                                                                                                                                                                                                                 |                                                                                                                                                                                                                                          |                                                                                                                                                                           |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|----------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| NAME OF COMMITTEE (In Full)<br><b>FREEDOMWORKS FOR AMERICA</b>                                                                                                                                                                                                                                                                                              |  |                                                                                  | FEC IDENTIFICATION NUMBER ▼<br><b>C</b> C00499020                                                                                                                                                                                               |                                                                                                                                                                                                                                          |                                                                                                                                                                           |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>                                                                                            |  |                                                                                  |                                                                                                                                                                                                                                                 |                                                                                                                                                                                                                                          |                                                                                                                                                                           |
| Full Name of Payee<br><b>Freedomworks, Inc.</b>                                                                                                                                                                                                                                                                                                             |  |                                                                                  | Date of Public Distribution/Dissemination<br><span style="border: 1px solid black; padding: 2px;">05</span> / <span style="border: 1px solid black; padding: 2px;">15</span> / <span style="border: 1px solid black; padding: 2px;">2014</span> |                                                                                                                                                                                                                                          |                                                                                                                                                                           |
| Mailing Address<br>400 N Capitol St., NW<br>Suite 735                                                                                                                                                                                                                                                                                                       |  |                                                                                  | Amount<br><span style="border: 1px solid black; padding: 2px;">1015.03</span>                                                                                                                                                                   |                                                                                                                                                                                                                                          |                                                                                                                                                                           |
| City<br>Washington                                                                                                                                                                                                                                                                                                                                          |  | State<br>DC                                                                      | Zip Code<br>20001                                                                                                                                                                                                                               |                                                                                                                                                                                                                                          | Transaction ID : <b>SE.27235</b>                                                                                                                                          |
| Purpose of Expenditure<br>IE-Smith-Travel                                                                                                                                                                                                                                                                                                                   |  | Category/Type<br><span style="border: 1px solid black; padding: 2px;">002</span> |                                                                                                                                                                                                                                                 | Date of Disbursement or Obligation<br><span style="border: 1px solid black; padding: 2px;">05</span> / <span style="border: 1px solid black; padding: 2px;">15</span> / <span style="border: 1px solid black; padding: 2px;">2014</span> |                                                                                                                                                                           |
| Name of Federal Candidate<br>BRYAN SMITH                                                                                                                                                                                                                                                                                                                    |  |                                                                                  | <input checked="" type="checkbox"/> Support<br><input type="checkbox"/> Oppose                                                                                                                                                                  |                                                                                                                                                                                                                                          | Office Sought: <input checked="" type="checkbox"/> House    District: <u>02</u><br><input type="checkbox"/> President <input type="checkbox"/> Senate    State: <u>ID</u> |
| Calendar Year-To-Date<br>Per Election for Office Sought<br><span style="border: 1px solid black; padding: 2px;">32662.76</span>                                                                                                                                                                                                                             |  |                                                                                  | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶ _____                                                                                         |                                                                                                                                                                                                                                          |                                                                                                                                                                           |
| Full Name of Payee<br><b>Freedomworks, Inc.</b>                                                                                                                                                                                                                                                                                                             |  |                                                                                  | Date of Public Distribution/Dissemination<br><span style="border: 1px solid black; padding: 2px;">05</span> / <span style="border: 1px solid black; padding: 2px;">15</span> / <span style="border: 1px solid black; padding: 2px;">2014</span> |                                                                                                                                                                                                                                          |                                                                                                                                                                           |
| Mailing Address<br>400 N Capitol St., NW<br>Suite 735                                                                                                                                                                                                                                                                                                       |  |                                                                                  | Amount<br><span style="border: 1px solid black; padding: 2px;">723.77</span>                                                                                                                                                                    |                                                                                                                                                                                                                                          |                                                                                                                                                                           |
| City<br>Washington                                                                                                                                                                                                                                                                                                                                          |  | State<br>DC                                                                      | Zip Code<br>20001                                                                                                                                                                                                                               |                                                                                                                                                                                                                                          | Transaction ID : <b>SE.27236</b>                                                                                                                                          |
| Purpose of Expenditure<br>IE-Smith-Email/Social Media/Printing                                                                                                                                                                                                                                                                                              |  | Category/Type<br><span style="border: 1px solid black; padding: 2px;">004</span> |                                                                                                                                                                                                                                                 | Date of Disbursement or Obligation<br><span style="border: 1px solid black; padding: 2px;">05</span> / <span style="border: 1px solid black; padding: 2px;">15</span> / <span style="border: 1px solid black; padding: 2px;">2014</span> |                                                                                                                                                                           |
| Name of Federal Candidate<br>BRYAN SMITH                                                                                                                                                                                                                                                                                                                    |  |                                                                                  | <input checked="" type="checkbox"/> Support<br><input type="checkbox"/> Oppose                                                                                                                                                                  |                                                                                                                                                                                                                                          | Office Sought: <input checked="" type="checkbox"/> House    District: <u>02</u><br><input type="checkbox"/> President <input type="checkbox"/> Senate    State: <u>ID</u> |
| Calendar Year-To-Date<br>Per Election for Office Sought<br><span style="border: 1px solid black; padding: 2px;">33386.53</span>                                                                                                                                                                                                                             |  |                                                                                  | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶ _____                                                                                         |                                                                                                                                                                                                                                          |                                                                                                                                                                           |
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶                                                                                                                                                                                                                                                                                             |  |                                                                                  | <span style="border: 1px solid black; padding: 2px;">1738.80</span>                                                                                                                                                                             |                                                                                                                                                                                                                                          |                                                                                                                                                                           |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶                                                                                                                                                                                                                                                                                          |  |                                                                                  | <span style="border: 1px solid black; padding: 2px;"></span>                                                                                                                                                                                    |                                                                                                                                                                                                                                          |                                                                                                                                                                           |
| (c) <b>TOTAL</b> Independent Expenditures..... ▶                                                                                                                                                                                                                                                                                                            |  |                                                                                  | <span style="border: 1px solid black; padding: 2px;"></span>                                                                                                                                                                                    |                                                                                                                                                                                                                                          |                                                                                                                                                                           |
| 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. |  |                                                                                  |                                                                                                                                                                                                                                                 |                                                                                                                                                                                                                                          |                                                                                                                                                                           |
| Signature <u>R. Russ Walker</u><br><div style="text-align: right;">[Electronically Filed]</div>                                                                                                                                                                                                                                                             |  |                                                                                  | Date <span style="border: 1px solid black; padding: 2px;">06</span> / <span style="border: 1px solid black; padding: 2px;">20</span> / <span style="border: 1px solid black; padding: 2px;">2014</span>                                         |                                                                                                                                                                                                                                          |                                                                                                                                                                           |

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**PAGE 133 OF 207  
FOR LINE 24 OF FORM 3X

|                                                                                                                                                                                                                                                                                                                                                             |                    |                                                                                                                                                   |                                                                                                                                                                     |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------|---------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| NAME OF COMMITTEE (In Full)<br><b>FREEDOMWORKS FOR AMERICA</b>                                                                                                                                                                                                                                                                                              |                    | FEC IDENTIFICATION NUMBER ▼<br><b>C</b> C00499020                                                                                                 |                                                                                                                                                                     |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on                                                                                                                                                                                |                    | M M M / D D D / Y Y Y Y Y Y                                                                                                                       |                                                                                                                                                                     |
| Full Name of Payee<br><b>Freedomworks, Inc.</b>                                                                                                                                                                                                                                                                                                             |                    | Date of Public Distribution/Dissemination<br>M M M / D D D / Y Y Y Y Y Y<br><b>05 / 15 / 2014</b>                                                 |                                                                                                                                                                     |
| Mailing Address<br><b>400 N Capitol St., NW<br/>Suite 735</b>                                                                                                                                                                                                                                                                                               |                    | Amount<br><b>164.76</b>                                                                                                                           |                                                                                                                                                                     |
| City<br><b>Washington</b>                                                                                                                                                                                                                                                                                                                                   | State<br><b>DC</b> | Zip Code<br><b>20001</b>                                                                                                                          | Transaction ID : <b>SE.27257</b>                                                                                                                                    |
| Purpose of Expenditure<br><b>IE-Schultz-Email/Social Media/Printing</b>                                                                                                                                                                                                                                                                                     |                    | Category/<br>Type <b>004</b>                                                                                                                      | Date of Disbursement or Obligation<br>M M M / D D D / Y Y Y Y Y Y<br><b>05 / 15 / 2014</b>                                                                          |
| Name of Federal Candidate<br><b>MATTHEW DAVID SCHULTZ</b>                                                                                                                                                                                                                                                                                                   |                    | <input checked="" type="checkbox"/> Support<br><input type="checkbox"/> Oppose                                                                    | Office Sought: <input checked="" type="checkbox"/> House District: <b>03</b><br><input type="checkbox"/> President <input type="checkbox"/> Senate State: <b>IA</b> |
| Calendar Year-To-Date<br>Per Election for Office Sought<br><b>517.80</b>                                                                                                                                                                                                                                                                                    |                    | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶ |                                                                                                                                                                     |
| Full Name of Payee<br><b>Freedomworks, Inc.</b>                                                                                                                                                                                                                                                                                                             |                    | Date of Public Distribution/Dissemination<br>M M M / D D D / Y Y Y Y Y Y<br><b>05 / 15 / 2014</b>                                                 |                                                                                                                                                                     |
| Mailing Address<br><b>400 N Capitol St., NW<br/>Suite 735</b>                                                                                                                                                                                                                                                                                               |                    | Amount<br><b>9.49</b>                                                                                                                             |                                                                                                                                                                     |
| City<br><b>Washington</b>                                                                                                                                                                                                                                                                                                                                   | State<br><b>DC</b> | Zip Code<br><b>20001</b>                                                                                                                          | Transaction ID : <b>SE.27274</b>                                                                                                                                    |
| Purpose of Expenditure<br><b>IE-McConnell-Email/Social Media/Printing</b>                                                                                                                                                                                                                                                                                   |                    | Category/<br>Type <b>004</b>                                                                                                                      | Date of Disbursement or Obligation<br>M M M / D D D / Y Y Y Y Y Y<br><b>05 / 15 / 2014</b>                                                                          |
| Name of Federal Candidate<br><b>MITCH MCCONNELL</b>                                                                                                                                                                                                                                                                                                         |                    | <input type="checkbox"/> Support<br><input checked="" type="checkbox"/> Oppose                                                                    | Office Sought: <input type="checkbox"/> House District: <b>00</b><br><input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <b>KY</b> |
| Calendar Year-To-Date<br>Per Election for Office Sought<br><b>282753.84</b>                                                                                                                                                                                                                                                                                 |                    | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶ |                                                                                                                                                                     |
| (a) SUBTOTAL of Itemized Independent Expenditures..... ▶                                                                                                                                                                                                                                                                                                    |                    | <b>174.25</b>                                                                                                                                     |                                                                                                                                                                     |
| (b) SUBTOTAL of Unitemized Independent Expenditures ..... ▶                                                                                                                                                                                                                                                                                                 |                    |                                                                                                                                                   |                                                                                                                                                                     |
| (c) TOTAL Independent Expenditures..... ▶                                                                                                                                                                                                                                                                                                                   |                    |                                                                                                                                                   |                                                                                                                                                                     |
| Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. |                    |                                                                                                                                                   |                                                                                                                                                                     |
| Signature<br><b>R. Russ Walker</b>                                                                                                                                                                                                                                                                                                                          |                    | Date<br>M M M / D D D / Y Y Y Y Y Y<br><b>06 / 20 / 2014</b>                                                                                      |                                                                                                                                                                     |
|                                                                                                                                                                                                                                                                                                                                                             |                    | [Electronically Filed]                                                                                                                            |                                                                                                                                                                     |

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**PAGE 134 OF 207  
FOR LINE 24 OF FORM 3X

|                                                                                                                                                                                                                                                                                                                                                             |             |                                                                                      |                                                                                                                                                                     |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|--------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| NAME OF COMMITTEE (In Full)<br><b>FREEDOMWORKS FOR AMERICA</b>                                                                                                                                                                                                                                                                                              |             | FEC IDENTIFICATION NUMBER ▼<br><b>C</b> C00499020                                    |                                                                                                                                                                     |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on                                                                                                                                                                                |             | MM / DD / YYYY                                                                       |                                                                                                                                                                     |
| Full Name of Payee<br><b>Freedomworks, Inc.</b>                                                                                                                                                                                                                                                                                                             |             | Date of Public Distribution/Dissemination<br>MM / DD / YYYY<br><b>05 / 15 / 2014</b> |                                                                                                                                                                     |
| Mailing Address<br>400 N Capitol St., NW<br>Suite 735                                                                                                                                                                                                                                                                                                       |             | Amount<br><b>187.54</b>                                                              |                                                                                                                                                                     |
| City<br>Washington                                                                                                                                                                                                                                                                                                                                          | State<br>DC | Zip Code<br>20001                                                                    | Transaction ID : <b>SE.32505</b>                                                                                                                                    |
| Purpose of Expenditure<br>IE-McDaniel-Email/Social Media/Printing                                                                                                                                                                                                                                                                                           |             | Category/<br>Type <b>004</b>                                                         | Date of Disbursement or Obligation<br>MM / DD / YYYY<br><b>05 / 15 / 2014</b>                                                                                       |
| Name of Federal Candidate<br><b>CHRISTOPHER BRIAN MCDANIEL</b>                                                                                                                                                                                                                                                                                              |             | <input checked="" type="checkbox"/> Support<br><input type="checkbox"/> Oppose       | Office Sought: <input type="checkbox"/> House District: <b>00</b><br><input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <b>MS</b> |
| Calendar Year-To-Date<br>Per Election for Office Sought                                                                                                                                                                                                                                                                                                     |             | <b>258608.74</b>                                                                     | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶                   |
| Full Name of Payee<br><b>Freedomworks, Inc.</b>                                                                                                                                                                                                                                                                                                             |             | Date of Public Distribution/Dissemination<br>MM / DD / YYYY<br><b>05 / 15 / 2014</b> |                                                                                                                                                                     |
| Mailing Address<br>400 N Capitol St., NW<br>Suite 735                                                                                                                                                                                                                                                                                                       |             | Amount<br><b>155.27</b>                                                              |                                                                                                                                                                     |
| City<br>Washington                                                                                                                                                                                                                                                                                                                                          | State<br>DC | Zip Code<br>20001                                                                    | Transaction ID : <b>SE.35467</b>                                                                                                                                    |
| Purpose of Expenditure<br>IE-Shannon-Email/Social Media/Printing                                                                                                                                                                                                                                                                                            |             | Category/<br>Type <b>004</b>                                                         | Date of Disbursement or Obligation<br>MM / DD / YYYY<br><b>05 / 15 / 2014</b>                                                                                       |
| Name of Federal Candidate<br><b>T W SHANNON</b>                                                                                                                                                                                                                                                                                                             |             | <input checked="" type="checkbox"/> Support<br><input type="checkbox"/> Oppose       | Office Sought: <input type="checkbox"/> House District: <b>00</b><br><input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <b>OK</b> |
| Calendar Year-To-Date<br>Per Election for Office Sought                                                                                                                                                                                                                                                                                                     |             | <b>375.16</b>                                                                        | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶                   |
| (a) SUBTOTAL of Itemized Independent Expenditures..... ▶                                                                                                                                                                                                                                                                                                    |             | <b>342.81</b>                                                                        |                                                                                                                                                                     |
| (b) SUBTOTAL of Unitemized Independent Expenditures ..... ▶                                                                                                                                                                                                                                                                                                 |             |                                                                                      |                                                                                                                                                                     |
| (c) TOTAL Independent Expenditures..... ▶                                                                                                                                                                                                                                                                                                                   |             |                                                                                      |                                                                                                                                                                     |
| Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. |             |                                                                                      |                                                                                                                                                                     |
| Signature<br><br><i>R. Russ Walker</i>                                                                                                                                                                                                                                                                                                                      |             | Date<br>MM / DD / YYYY<br><b>06 / 20 / 2014</b>                                      |                                                                                                                                                                     |
|                                                                                                                                                                                                                                                                                                                                                             |             | [Electronically Filed]                                                               |                                                                                                                                                                     |

|                                                                     |             |                                                                                |                                                                                                                                                             |  |
|---------------------------------------------------------------------|-------------|--------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| Full Name of Payee<br>Freedomworks, Inc.                            |             |                                                                                | Date of Public Distribution/Dissemination<br>MM / DD / YYYY<br>05 / 15 / 2014                                                                               |  |
| Mailing Address<br>400 N Capitol St., NW<br>Suite 735               |             |                                                                                | Amount<br>28.90                                                                                                                                             |  |
| City<br>Washington                                                  | State<br>DC | Zip Code<br>20001                                                              | Transaction ID : SE.35469<br>Date of Disbursement or Obligation<br>MM / DD / YYYY<br>05 / 15 / 2014                                                         |  |
| Purpose of Expenditure<br>IE-Loudermilk-Email/Social Media/Printing |             | Category/<br>Type<br>004                                                       |                                                                                                                                                             |  |
| Name of Federal Candidate<br>BARRY LOUDERMILK                       |             | <input checked="" type="checkbox"/> Support<br><input type="checkbox"/> Oppose | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President<br><input type="checkbox"/> Senate<br>District: 11<br>State: GA |  |
| Calendar Year-To-Date<br>Per Election for Office Sought             |             | 10520.04                                                                       | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▶                |  |

|                                                                  |   |        |
|------------------------------------------------------------------|---|--------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....    | ▶ | 135.44 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... | ▶ |        |
| (c) <b>TOTAL</b> Independent Expenditures.....                   | ▶ |        |

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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 FOR LINE 24 OF FORM 3X

|                                                                                                                                                                                                                                                                                                                                                             |  |                       |                                                                                                                                                   |                                                                        |                           |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|-----------------------|---------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------|---------------------------|
| NAME OF COMMITTEE (In Full)<br><b>FREEDOMWORKS FOR AMERICA</b>                                                                                                                                                                                                                                                                                              |  |                       | FEC IDENTIFICATION NUMBER ▼<br><b>C</b> C00499020                                                                                                 |                                                                        |                           |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on                                                                                                                                                                                |  |                       | <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY</div> <div>MM / DD / YYYY</div> <div>MM / DD / YYYY</div> </div> |                                                                        |                           |
| Full Name of Payee<br><b>Freedomworks, Inc.</b>                                                                                                                                                                                                                                                                                                             |  |                       | Date of Public Distribution/Dissemination<br>MM / DD / YYYY<br>05 / 16 / 2014                                                                     |                                                                        |                           |
| Mailing Address<br>400 N Capitol St., NW<br>Suite 735                                                                                                                                                                                                                                                                                                       |  |                       | Amount<br>87.13                                                                                                                                   |                                                                        |                           |
| City<br>Washington                                                                                                                                                                                                                                                                                                                                          |  | State<br>DC           | Zip Code<br>20001                                                                                                                                 |                                                                        | Transaction ID : SE.27244 |
| Purpose of Expenditure<br>IE-Mathis-Email/Social Media/Printing                                                                                                                                                                                                                                                                                             |  | Category/<br>Type 004 |                                                                                                                                                   | Date of Disbursement or Obligation<br>MM / DD / YYYY<br>05 / 16 / 2014 |                           |
| Name of Federal Candidate<br>CHAD DR MATHIS                                                                                                                                                                                                                                                                                                                 |  |                       | <input checked="" type="checkbox"/> Support<br><input type="checkbox"/> Oppose                                                                    |                                                                        |                           |
| Office Sought:<br><input type="checkbox"/> President <input type="checkbox"/> Senate                                                                                                                                                                                                                                                                        |  |                       | <input checked="" type="checkbox"/> House District: 06<br>State: AL                                                                               |                                                                        |                           |
| Calendar Year-To-Date<br>Per Election for Office Sought                                                                                                                                                                                                                                                                                                     |  |                       | 20109.26                                                                                                                                          |                                                                        |                           |
| Disbursement For: 2014                                                                                                                                                                                                                                                                                                                                      |  |                       | <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▶                        |                                                                        |                           |
| Full Name of Payee<br><b>Freedomworks, Inc.</b>                                                                                                                                                                                                                                                                                                             |  |                       | Date of Public Distribution/Dissemination<br>MM / DD / YYYY<br>05 / 16 / 2014                                                                     |                                                                        |                           |
| Mailing Address<br>400 N Capitol St., NW<br>Suite 735                                                                                                                                                                                                                                                                                                       |  |                       | Amount<br>29.11                                                                                                                                   |                                                                        |                           |
| City<br>Washington                                                                                                                                                                                                                                                                                                                                          |  | State<br>DC           | Zip Code<br>20001                                                                                                                                 |                                                                        | Transaction ID : SE.27258 |
| Purpose of Expenditure<br>IE-Schultz-Email/Social Media/Printing                                                                                                                                                                                                                                                                                            |  | Category/<br>Type 004 |                                                                                                                                                   | Date of Disbursement or Obligation<br>MM / DD / YYYY<br>05 / 16 / 2014 |                           |
| Name of Federal Candidate<br>MATTHEW DAVID SCHULTZ                                                                                                                                                                                                                                                                                                          |  |                       | <input checked="" type="checkbox"/> Support<br><input type="checkbox"/> Oppose                                                                    |                                                                        |                           |
| Office Sought:<br><input type="checkbox"/> President <input type="checkbox"/> Senate                                                                                                                                                                                                                                                                        |  |                       | <input checked="" type="checkbox"/> House District: 03<br>State: IA                                                                               |                                                                        |                           |
| Calendar Year-To-Date<br>Per Election for Office Sought                                                                                                                                                                                                                                                                                                     |  |                       | 10546.91                                                                                                                                          |                                                                        |                           |
| Disbursement For: 2014                                                                                                                                                                                                                                                                                                                                      |  |                       | <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▶                        |                                                                        |                           |
| (a) SUBTOTAL of Itemized Independent Expenditures..... ▶                                                                                                                                                                                                                                                                                                    |  |                       | 116.24                                                                                                                                            |                                                                        |                           |
| (b) SUBTOTAL of Unitemized Independent Expenditures ..... ▶                                                                                                                                                                                                                                                                                                 |  |                       |                                                                                                                                                   |                                                                        |                           |
| (c) TOTAL Independent Expenditures..... ▶                                                                                                                                                                                                                                                                                                                   |  |                       |                                                                                                                                                   |                                                                        |                           |
| Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. |  |                       |                                                                                                                                                   |                                                                        |                           |
| Signature<br><br>R. Russ Walker                                                                                                                                                                                                                                                                                                                             |  |                       | Date<br>MM / DD / YYYY<br>06 / 20 / 2014                                                                                                          |                                                                        |                           |
| [Electronically Filed]                                                                                                                                                                                                                                                                                                                                      |  |                       |                                                                                                                                                   |                                                                        |                           |



**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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 FOR LINE 24 OF FORM 3X

|                                                                                                                                                                                                                                                                                                                                                                                 |  |                                                                                  |                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                   |                                  |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|----------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------|
| NAME OF COMMITTEE (In Full)<br><b>FREEDOMWORKS FOR AMERICA</b>                                                                                                                                                                                                                                                                                                                  |  |                                                                                  | FEC IDENTIFICATION NUMBER ▼<br><b>C</b> C00499020                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                                   |                                  |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">MM</span> / <span style="border: 1px solid black; padding: 2px;">DD</span> / <span style="border: 1px solid black; padding: 2px;">YYYY</span> |  |                                                                                  |                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                   |                                  |
| Full Name of Payee<br><b>Freedomworks, Inc.</b>                                                                                                                                                                                                                                                                                                                                 |  |                                                                                  | Date of Public Distribution/Dissemination<br><span style="border: 1px solid black; padding: 2px;">MM</span> / <span style="border: 1px solid black; padding: 2px;">DD</span> / <span style="border: 1px solid black; padding: 2px;">YYYY</span><br><b>05 / 16 / 2014</b> |                                                                                                                                                                                                                                                                   |                                  |
| Mailing Address<br>400 N Capitol St., NW<br>Suite 735                                                                                                                                                                                                                                                                                                                           |  |                                                                                  | Amount<br><span style="border: 1px solid black; padding: 2px;">2041.70</span>                                                                                                                                                                                            |                                                                                                                                                                                                                                                                   |                                  |
| City<br>Washington                                                                                                                                                                                                                                                                                                                                                              |  | State<br>DC                                                                      | Zip Code<br>20001                                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                                   | Transaction ID : <b>SE.27276</b> |
| Purpose of Expenditure<br>IE-McConnell-Travel                                                                                                                                                                                                                                                                                                                                   |  | Category/Type<br><span style="border: 1px solid black; padding: 2px;">002</span> |                                                                                                                                                                                                                                                                          | Date of Disbursement or Obligation<br><span style="border: 1px solid black; padding: 2px;">MM</span> / <span style="border: 1px solid black; padding: 2px;">DD</span> / <span style="border: 1px solid black; padding: 2px;">YYYY</span><br><b>05 / 16 / 2014</b> |                                  |
| Name of Federal Candidate<br>MITCH MCCONNELL                                                                                                                                                                                                                                                                                                                                    |  |                                                                                  | <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose<br>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate    District: <u>00</u><br><input type="checkbox"/> President    State: <u>KY</u>                 |                                                                                                                                                                                                                                                                   |                                  |
| Calendar Year-To-Date<br>Per Election for Office Sought<br><span style="border: 1px solid black; padding: 2px;">284795.54</span>                                                                                                                                                                                                                                                |  |                                                                                  | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶ _____                                                                                                                  |                                                                                                                                                                                                                                                                   |                                  |
| Full Name of Payee<br><b>Freedomworks, Inc.</b>                                                                                                                                                                                                                                                                                                                                 |  |                                                                                  | Date of Public Distribution/Dissemination<br><span style="border: 1px solid black; padding: 2px;">MM</span> / <span style="border: 1px solid black; padding: 2px;">DD</span> / <span style="border: 1px solid black; padding: 2px;">YYYY</span><br><b>05 / 16 / 2014</b> |                                                                                                                                                                                                                                                                   |                                  |
| Mailing Address<br>400 N Capitol St., NW<br>Suite 735                                                                                                                                                                                                                                                                                                                           |  |                                                                                  | Amount<br><span style="border: 1px solid black; padding: 2px;">102.83</span>                                                                                                                                                                                             |                                                                                                                                                                                                                                                                   |                                  |
| City<br>Washington                                                                                                                                                                                                                                                                                                                                                              |  | State<br>DC                                                                      | Zip Code<br>20001                                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                                   | Transaction ID : <b>SE.27283</b> |
| Purpose of Expenditure<br>IE-McConnell-Email/Social Media/Printing                                                                                                                                                                                                                                                                                                              |  | Category/Type<br><span style="border: 1px solid black; padding: 2px;">004</span> |                                                                                                                                                                                                                                                                          | Date of Disbursement or Obligation<br><span style="border: 1px solid black; padding: 2px;">MM</span> / <span style="border: 1px solid black; padding: 2px;">DD</span> / <span style="border: 1px solid black; padding: 2px;">YYYY</span><br><b>05 / 16 / 2014</b> |                                  |
| Name of Federal Candidate<br>MITCH MCCONNELL                                                                                                                                                                                                                                                                                                                                    |  |                                                                                  | <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose<br>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate    District: <u>00</u><br><input type="checkbox"/> President    State: <u>KY</u>                 |                                                                                                                                                                                                                                                                   |                                  |
| Calendar Year-To-Date<br>Per Election for Office Sought<br><span style="border: 1px solid black; padding: 2px;">284898.37</span>                                                                                                                                                                                                                                                |  |                                                                                  | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶ _____                                                                                                                  |                                                                                                                                                                                                                                                                   |                                  |
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶                                                                                                                                                                                                                                                                                                                 |  |                                                                                  | <span style="border: 1px solid black; padding: 2px;">2144.53</span>                                                                                                                                                                                                      |                                                                                                                                                                                                                                                                   |                                  |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶                                                                                                                                                                                                                                                                                                              |  |                                                                                  | <span style="border: 1px solid black; padding: 2px;"></span>                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                   |                                  |
| (c) <b>TOTAL</b> Independent Expenditures..... ▶                                                                                                                                                                                                                                                                                                                                |  |                                                                                  | <span style="border: 1px solid black; padding: 2px;"></span>                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                   |                                  |
| 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.                     |  |                                                                                  |                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                   |                                  |
| Signature <u>R. Russ Walker</u>                                                                                                                                                                                                                                                                                                                                                 |  |                                                                                  | Date <span style="border: 1px solid black; padding: 2px;">MM</span> / <span style="border: 1px solid black; padding: 2px;">DD</span> / <span style="border: 1px solid black; padding: 2px;">YYYY</span><br><b>06 / 20 / 2014</b>                                         |                                                                                                                                                                                                                                                                   |                                  |

[Electronically Filed]

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**PAGE 138 OF 207  
FOR LINE 24 OF FORM 3X

|                                                                                                                                                                                                                                                                                                                                                             |             |                                                                                      |                                                                                                                                                                     |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|--------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| NAME OF COMMITTEE (In Full)<br><b>FREEDOMWORKS FOR AMERICA</b>                                                                                                                                                                                                                                                                                              |             | FEC IDENTIFICATION NUMBER ▼<br><b>C</b> C00499020                                    |                                                                                                                                                                     |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on                                                                                                                                                                                |             | MM / DD / YYYY                                                                       |                                                                                                                                                                     |
| Full Name of Payee<br><b>Freedomworks, Inc.</b>                                                                                                                                                                                                                                                                                                             |             | Date of Public Distribution/Dissemination<br>MM / DD / YYYY<br><b>05 / 16 / 2014</b> |                                                                                                                                                                     |
| Mailing Address<br>400 N Capitol St., NW<br>Suite 735                                                                                                                                                                                                                                                                                                       |             | Amount<br><b>807.46</b>                                                              |                                                                                                                                                                     |
| City<br>Washington                                                                                                                                                                                                                                                                                                                                          | State<br>DC | Zip Code<br>20001                                                                    | Transaction ID : <b>SE.27286</b>                                                                                                                                    |
| Purpose of Expenditure<br>IE-Smith-Email/Social Media/Printing                                                                                                                                                                                                                                                                                              |             | Category/<br>Type <b>004</b>                                                         | Date of Disbursement or Obligation<br>MM / DD / YYYY<br><b>05 / 16 / 2014</b>                                                                                       |
| Name of Federal Candidate<br>BRYAN SMITH                                                                                                                                                                                                                                                                                                                    |             | <input checked="" type="checkbox"/> Support<br><input type="checkbox"/> Oppose       | Office Sought: <input checked="" type="checkbox"/> House District: <b>02</b><br><input type="checkbox"/> President <input type="checkbox"/> Senate State: <b>ID</b> |
| Calendar Year-To-Date<br>Per Election for Office Sought                                                                                                                                                                                                                                                                                                     |             | <b>34193.99</b>                                                                      | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶                   |
| Full Name of Payee<br><b>Freedomworks, Inc.</b>                                                                                                                                                                                                                                                                                                             |             | Date of Public Distribution/Dissemination<br>MM / DD / YYYY<br><b>05 / 16 / 2014</b> |                                                                                                                                                                     |
| Mailing Address<br>400 N Capitol St., NW<br>Suite 735                                                                                                                                                                                                                                                                                                       |             | Amount<br><b>314.14</b>                                                              |                                                                                                                                                                     |
| City<br>Washington                                                                                                                                                                                                                                                                                                                                          | State<br>DC | Zip Code<br>20001                                                                    | Transaction ID : <b>SE.27288</b>                                                                                                                                    |
| Purpose of Expenditure<br>IE-Smith-Travel                                                                                                                                                                                                                                                                                                                   |             | Category/<br>Type <b>002</b>                                                         | Date of Disbursement or Obligation<br>MM / DD / YYYY<br><b>05 / 16 / 2014</b>                                                                                       |
| Name of Federal Candidate<br>BRYAN SMITH                                                                                                                                                                                                                                                                                                                    |             | <input checked="" type="checkbox"/> Support<br><input type="checkbox"/> Oppose       | Office Sought: <input checked="" type="checkbox"/> House District: <b>02</b><br><input type="checkbox"/> President <input type="checkbox"/> Senate State: <b>ID</b> |
| Calendar Year-To-Date<br>Per Election for Office Sought                                                                                                                                                                                                                                                                                                     |             | <b>34514.20</b>                                                                      | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶                   |
| (a) SUBTOTAL of Itemized Independent Expenditures.....▶                                                                                                                                                                                                                                                                                                     |             | <b>1121.60</b>                                                                       |                                                                                                                                                                     |
| (b) SUBTOTAL of Unitemized Independent Expenditures.....▶                                                                                                                                                                                                                                                                                                   |             |                                                                                      |                                                                                                                                                                     |
| (c) TOTAL Independent Expenditures.....▶                                                                                                                                                                                                                                                                                                                    |             |                                                                                      |                                                                                                                                                                     |
| Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. |             |                                                                                      |                                                                                                                                                                     |
| Signature<br><br><i>R. Russ Walker</i>                                                                                                                                                                                                                                                                                                                      |             | Date<br>MM / DD / YYYY<br><b>06 / 20 / 2014</b>                                      |                                                                                                                                                                     |
|                                                                                                                                                                                                                                                                                                                                                             |             | [Electronically Filed]                                                               |                                                                                                                                                                     |

|                                                                     |             |                                                                                                                                              |                                                                                                                                                             |
|---------------------------------------------------------------------|-------------|----------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Full Name of Payee<br><b>Freedomworks, Inc.</b>                     |             | Date of Public Distribution/Dissemination<br>MM / DD / YYYY<br>05 / 17 / 2015                                                                |                                                                                                                                                             |
| Mailing Address<br>400 N Capitol St., NW<br>Suite 735               |             | Amount<br>119.15                                                                                                                             |                                                                                                                                                             |
| City<br>Washington                                                  | State<br>DC | Zip Code<br>20001                                                                                                                            | Transaction ID : <b>SE.32495</b><br>Date of Disbursement or Obligation<br>MM / DD / YYYY<br>05 / 17 / 2014                                                  |
| Purpose of Expenditure<br>IE-Smith-Travel                           |             | Category/<br>Type<br>002                                                                                                                     |                                                                                                                                                             |
| Name of Federal Candidate<br>BRYAN SMITH                            |             | <input checked="" type="checkbox"/> Support<br><input type="checkbox"/> Oppose                                                               | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President<br><input type="checkbox"/> Senate<br>District: 02<br>State: ID |
| Calendar Year-To-Date<br>Per Election for Office Sought<br>34633.35 |             | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▶ |                                                                                                                                                             |

|                                                                  |   |        |
|------------------------------------------------------------------|---|--------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....    | ▶ | 358.27 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... | ▶ |        |
| (c) <b>TOTAL</b> Independent Expenditures.....                   | ▶ |        |

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**PAGE 140 OF 207  
FOR LINE 24 OF FORM 3X

|                                                                                                                                                                                                                                                                                                                                                             |             |                                                                                      |                                                                                                                                                                     |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|--------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| NAME OF COMMITTEE (In Full)<br><b>FREEDOMWORKS FOR AMERICA</b>                                                                                                                                                                                                                                                                                              |             | FEC IDENTIFICATION NUMBER ▼<br><b>C</b> C00499020                                    |                                                                                                                                                                     |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on                                                                                                                                                                                |             | MM / DD / YYYY                                                                       |                                                                                                                                                                     |
| Full Name of Payee<br><b>Freedomworks, Inc.</b>                                                                                                                                                                                                                                                                                                             |             | Date of Public Distribution/Dissemination<br>MM / DD / YYYY<br><b>05 / 17 / 2014</b> |                                                                                                                                                                     |
| Mailing Address<br>400 N Capitol St., NW<br>Suite 735                                                                                                                                                                                                                                                                                                       |             | Amount<br><b>25.00</b>                                                               |                                                                                                                                                                     |
| City<br>Washington                                                                                                                                                                                                                                                                                                                                          | State<br>DC | Zip Code<br>20001                                                                    | Transaction ID : <b>SE.35558</b>                                                                                                                                    |
| Purpose of Expenditure<br>IE-McConnell-Travel                                                                                                                                                                                                                                                                                                               |             | Category/<br>Type <b>002</b>                                                         | Date of Disbursement or Obligation<br>MM / DD / YYYY<br><b>05 / 17 / 2014</b>                                                                                       |
| Name of Federal Candidate<br>MITCH MCCONNELL                                                                                                                                                                                                                                                                                                                |             | <input type="checkbox"/> Support<br><input checked="" type="checkbox"/> Oppose       | Office Sought: <input type="checkbox"/> House District: <b>00</b><br><input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <b>KY</b> |
| Calendar Year-To-Date<br>Per Election for Office Sought                                                                                                                                                                                                                                                                                                     |             | <b>284923.37</b>                                                                     | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶                   |
| Full Name of Payee<br><b>Freedomworks, Inc.</b>                                                                                                                                                                                                                                                                                                             |             | Date of Public Distribution/Dissemination<br>MM / DD / YYYY<br><b>05 / 18 / 2014</b> |                                                                                                                                                                     |
| Mailing Address<br>400 N Capitol St., NW<br>Suite 735                                                                                                                                                                                                                                                                                                       |             | Amount<br><b>621.09</b>                                                              |                                                                                                                                                                     |
| City<br>Washington                                                                                                                                                                                                                                                                                                                                          | State<br>DC | Zip Code<br>20001                                                                    | Transaction ID : <b>SE.32496</b>                                                                                                                                    |
| Purpose of Expenditure<br>IE-Smith-Travel                                                                                                                                                                                                                                                                                                                   |             | Category/<br>Type <b>002</b>                                                         | Date of Disbursement or Obligation<br>MM / DD / YYYY<br><b>05 / 18 / 2014</b>                                                                                       |
| Name of Federal Candidate<br>BRYAN SMITH                                                                                                                                                                                                                                                                                                                    |             | <input checked="" type="checkbox"/> Support<br><input type="checkbox"/> Oppose       | Office Sought: <input checked="" type="checkbox"/> House District: <b>02</b><br><input type="checkbox"/> President <input type="checkbox"/> Senate State: <b>ID</b> |
| Calendar Year-To-Date<br>Per Election for Office Sought                                                                                                                                                                                                                                                                                                     |             | <b>35254.44</b>                                                                      | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶                   |
| (a) SUBTOTAL of Itemized Independent Expenditures.....▶                                                                                                                                                                                                                                                                                                     |             | <b>646.09</b>                                                                        |                                                                                                                                                                     |
| (b) SUBTOTAL of Unitemized Independent Expenditures .....▶                                                                                                                                                                                                                                                                                                  |             |                                                                                      |                                                                                                                                                                     |
| (c) TOTAL Independent Expenditures.....▶                                                                                                                                                                                                                                                                                                                    |             |                                                                                      |                                                                                                                                                                     |
| Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. |             |                                                                                      |                                                                                                                                                                     |
| Signature<br><br><i>R. Russ Walker</i>                                                                                                                                                                                                                                                                                                                      |             | Date<br>MM / DD / YYYY<br><b>06 / 20 / 2014</b>                                      |                                                                                                                                                                     |
|                                                                                                                                                                                                                                                                                                                                                             |             | [Electronically Filed]                                                               |                                                                                                                                                                     |

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 141 OF 207  
 FOR LINE 24 OF FORM 3X

|                                                                                                                                                                              |  |  |                                                                                                                                                   |  |  |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|---------------------------------------------------------------------------------------------------------------------------------------------------|--|--|
| NAME OF COMMITTEE (In Full)<br><b>FREEDOMWORKS FOR AMERICA</b>                                                                                                               |  |  | FEC IDENTIFICATION NUMBER ▼<br><b>C</b> C00499020                                                                                                 |  |  |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on |  |  | <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY</div> <div>MM / DD / YYYY</div> <div>MM / DD / YYYY</div> </div> |  |  |

  

|                                                                     |             |                                                                                |                                                                                                                                                       |  |  |
|---------------------------------------------------------------------|-------------|--------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|
| Full Name of Payee<br><b>Freedomworks, Inc.</b>                     |             |                                                                                | Date of Public Distribution/Dissemination<br>MM / DD / YYYY<br>05 / 19 / 2014                                                                         |  |  |
| Mailing Address<br>400 N Capitol St., NW<br>Suite 735               |             |                                                                                | Amount<br>1085.65                                                                                                                                     |  |  |
| City<br>Washington                                                  | State<br>DC | Zip Code<br>20001                                                              | Transaction ID : SE.32497                                                                                                                             |  |  |
| Purpose of Expenditure<br>IE-Smith-Email/Social Media/Printing      |             | Category/Type<br>002                                                           | Date of Disbursement or Obligation<br>MM / DD / YYYY<br>05 / 19 / 2014                                                                                |  |  |
| Name of Federal Candidate<br>BRYAN SMITH                            |             | <input checked="" type="checkbox"/> Support<br><input type="checkbox"/> Oppose | Office Sought: <input checked="" type="checkbox"/> House District: 02<br><input type="checkbox"/> President <input type="checkbox"/> Senate State: ID |  |  |
| Calendar Year-To-Date<br>Per Election for Office Sought<br>36340.09 |             |                                                                                | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶     |  |  |

  

|                                                                      |             |                                                                                |                                                                                                                                                       |  |  |
|----------------------------------------------------------------------|-------------|--------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|
| Full Name of Payee<br><b>Freedomworks, Inc.</b>                      |             |                                                                                | Date of Public Distribution/Dissemination<br>MM / DD / YYYY<br>05 / 19 / 2014                                                                         |  |  |
| Mailing Address<br>400 N Capitol St., NW<br>Suite 735                |             |                                                                                | Amount<br>5.73                                                                                                                                        |  |  |
| City<br>Washington                                                   | State<br>DC | Zip Code<br>20001                                                              | Transaction ID : SE.32507                                                                                                                             |  |  |
| Purpose of Expenditure<br>IE-McDaniel-Travel                         |             | Category/Type<br>002                                                           | Date of Disbursement or Obligation<br>MM / DD / YYYY<br>05 / 19 / 2014                                                                                |  |  |
| Name of Federal Candidate<br>CHRISTOPHER BRIAN MCDANIEL              |             | <input checked="" type="checkbox"/> Support<br><input type="checkbox"/> Oppose | Office Sought: <input type="checkbox"/> House District: 00<br><input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: MS |  |  |
| Calendar Year-To-Date<br>Per Election for Office Sought<br>258853.59 |             |                                                                                | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶     |  |  |

  

|                                                                    |         |
|--------------------------------------------------------------------|---------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶    | 1091.38 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶ |         |
| (c) <b>TOTAL</b> Independent Expenditures..... ▶                   |         |

  

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

R. Russ Walker

Signature \_\_\_\_\_

[Electronically Filed]

Date

MM / DD / YYYY

06 / 20 / 2014

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 142 OF 207  
 FOR LINE 24 OF FORM 3X

|                                                                                                                                                                              |  |  |                                                                                                                                                   |  |  |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|---------------------------------------------------------------------------------------------------------------------------------------------------|--|--|
| NAME OF COMMITTEE (In Full)<br><b>FREEDOMWORKS FOR AMERICA</b>                                                                                                               |  |  | FEC IDENTIFICATION NUMBER ▼<br><b>C</b> C00499020                                                                                                 |  |  |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on |  |  | <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY</div> <div>MM / DD / YYYY</div> <div>MM / DD / YYYY</div> </div> |  |  |

  

|                                                                   |             |                                                                                |                                                                                                                                                       |  |  |
|-------------------------------------------------------------------|-------------|--------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|
| Full Name of Payee<br><b>Freedomworks, Inc.</b>                   |             |                                                                                | Date of Public Distribution/Dissemination<br>MM / DD / YYYY<br>05 / 19 / 2014                                                                         |  |  |
| Mailing Address<br>400 N Capitol St., NW<br>Suite 735             |             |                                                                                | Amount<br>223.80                                                                                                                                      |  |  |
| City<br>Washington                                                | State<br>DC | Zip Code<br>20001                                                              | Transaction ID : SE.32510                                                                                                                             |  |  |
| Purpose of Expenditure<br>IE-McDaniel-Email/Social Media/Printing |             | Category/<br>Type 004                                                          | Date of Disbursement or Obligation<br>MM / DD / YYYY<br>05 / 19 / 2014                                                                                |  |  |
| Name of Federal Candidate<br>CHRISTOPHER BRIAN MCDANIEL           |             | <input checked="" type="checkbox"/> Support<br><input type="checkbox"/> Oppose | Office Sought: <input type="checkbox"/> House District: 00<br><input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: MS |  |  |
| Calendar Year-To-Date<br>Per Election for Office Sought 259112.94 |             |                                                                                | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶     |  |  |

  

|                                                                    |             |                                                                                |                                                                                                                                                       |  |  |
|--------------------------------------------------------------------|-------------|--------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|
| Full Name of Payee<br><b>Freedomworks, Inc.</b>                    |             |                                                                                | Date of Public Distribution/Dissemination<br>MM / DD / YYYY<br>05 / 19 / 2014                                                                         |  |  |
| Mailing Address<br>400 N Capitol St., NW<br>Suite 735              |             |                                                                                | Amount<br>115.28                                                                                                                                      |  |  |
| City<br>Washington                                                 | State<br>DC | Zip Code<br>20001                                                              | Transaction ID : SE.35472                                                                                                                             |  |  |
| Purpose of Expenditure<br>IE-McConnell-Email/Social Media/Printing |             | Category/<br>Type 004                                                          | Date of Disbursement or Obligation<br>MM / DD / YYYY<br>05 / 19 / 2014                                                                                |  |  |
| Name of Federal Candidate<br>MITCH MCCONNELL                       |             | <input type="checkbox"/> Support<br><input checked="" type="checkbox"/> Oppose | Office Sought: <input type="checkbox"/> House District: 00<br><input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: KY |  |  |
| Calendar Year-To-Date<br>Per Election for Office Sought 285038.65  |             |                                                                                | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶     |  |  |

  

|                                                                    |        |
|--------------------------------------------------------------------|--------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶    | 339.08 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶ |        |
| (c) <b>TOTAL</b> Independent Expenditures..... ▶                   |        |

  

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

R. Russ Walker

Signature \_\_\_\_\_

[Electronically Filed]

Date

MM / DD / YYYY  
06 / 20 / 2014

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**PAGE 143 OF 207  
FOR LINE 24 OF FORM 3X

|                                                                                                                                                                                                                                                                                                                                                                                                                                                          |  |                                                                                |                                                                                                                                                                                                                                                                                                                                                                         |  |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| NAME OF COMMITTEE (In Full)<br><b>FREEDOMWORKS FOR AMERICA</b>                                                                                                                                                                                                                                                                                                                                                                                           |  |                                                                                | <b>FEC IDENTIFICATION NUMBER ▼</b><br><div style="border: 1px solid black; padding: 2px; display: inline-block;"><b>C</b> C00499020</div>                                                                                                                                                                                                                               |  |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 80px;"></div> |  |                                                                                |                                                                                                                                                                                                                                                                                                                                                                         |  |
| Full Name of Payee<br><b>Freedomworks, Inc.</b>                                                                                                                                                                                                                                                                                                                                                                                                          |  |                                                                                | Date of Public Distribution/Dissemination<br><div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 80px;"></div><br>05 / 19 / 2014                              |  |
| Mailing Address<br>400 N Capitol St., NW<br>Suite 735                                                                                                                                                                                                                                                                                                                                                                                                    |  |                                                                                | Amount<br><div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div> 133.40                                                                                                                                                                                                                                                               |  |
| City<br>Washington                                                                                                                                                                                                                                                                                                                                                                                                                                       |  | State<br>DC                                                                    | Zip Code<br>20001                                                                                                                                                                                                                                                                                                                                                       |  |
| Purpose of Expenditure<br>IE-Perdue-Email/Social Media/Printing                                                                                                                                                                                                                                                                                                                                                                                          |  | Category/<br>Type                                                              | Transaction ID : <b>SE.35473</b><br>Date of Disbursement or Obligation<br><div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 80px;"></div><br>05 / 19 / 2014 |  |
| Name of Federal Candidate<br>DAVID PERDUE                                                                                                                                                                                                                                                                                                                                                                                                                |  | <input type="checkbox"/> Support<br><input checked="" type="checkbox"/> Oppose | Office Sought: <input type="checkbox"/> House District: 00<br><input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: GA                                                                                                                                                                                                                   |  |
| Calendar Year-To-Date<br>Per Election for Office Sought<br><div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div> 133.40                                                                                                                                                                                                                                                                                               |  |                                                                                | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶                                                                                                                                                                                                                       |  |
| Full Name of Payee<br><b>Freedomworks, Inc.</b>                                                                                                                                                                                                                                                                                                                                                                                                          |  |                                                                                | Date of Public Distribution/Dissemination<br><div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 80px;"></div><br>05 / 19 / 2014                              |  |
| Mailing Address<br>400 N Capitol St., NW<br>Suite 735                                                                                                                                                                                                                                                                                                                                                                                                    |  |                                                                                | Amount<br><div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div> 64.70                                                                                                                                                                                                                                                                |  |
| City<br>Washington                                                                                                                                                                                                                                                                                                                                                                                                                                       |  | State<br>DC                                                                    | Zip Code<br>20001                                                                                                                                                                                                                                                                                                                                                       |  |
| Purpose of Expenditure<br>IE-Birman-Email/Social Media/Printing                                                                                                                                                                                                                                                                                                                                                                                          |  | Category/<br>Type                                                              | Transaction ID : <b>SE.35476</b><br>Date of Disbursement or Obligation<br><div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 80px;"></div><br>05 / 19 / 2014 |  |
| Name of Federal Candidate<br>IGOR A BIRMAN                                                                                                                                                                                                                                                                                                                                                                                                               |  | <input checked="" type="checkbox"/> Support<br><input type="checkbox"/> Oppose | Office Sought: <input checked="" type="checkbox"/> House District: 07<br><input type="checkbox"/> President <input type="checkbox"/> Senate State: CA                                                                                                                                                                                                                   |  |
| Calendar Year-To-Date<br>Per Election for Office Sought<br><div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div> 28618.37                                                                                                                                                                                                                                                                                             |  |                                                                                | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶                                                                                                                                                                                                                       |  |
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶                                                                                                                                                                                                                                                                                                                                                                                          |  |                                                                                | <div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div> 198.10                                                                                                                                                                                                                                                                         |  |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶                                                                                                                                                                                                                                                                                                                                                                                       |  |                                                                                | <div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div>                                                                                                                                                                                                                                                                                |  |
| (c) <b>TOTAL</b> Independent Expenditures..... ▶                                                                                                                                                                                                                                                                                                                                                                                                         |  |                                                                                | <div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div>                                                                                                                                                                                                                                                                                |  |
| Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.                                                                                              |  |                                                                                |                                                                                                                                                                                                                                                                                                                                                                         |  |
| Signature<br><br>R. Russ Walker                                                                                                                                                                                                                                                                                                                                                                                                                          |  |                                                                                | Date<br><div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 80px;"></div><br>06 / 20 / 2014                                                                   |  |
| [Electronically Filed]                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |                                                                                |                                                                                                                                                                                                                                                                                                                                                                         |  |

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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 FOR LINE 24 OF FORM 3X

|                                                                                                                                                                                                                                                                                                                                                             |             |                                                                                                                                                   |                                                                                                                                                                           |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|---------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| NAME OF COMMITTEE (In Full)<br><b>FREEDOMWORKS FOR AMERICA</b>                                                                                                                                                                                                                                                                                              |             | <b>FEC IDENTIFICATION NUMBER ▼</b><br><div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00499020       </div> |                                                                                                                                                                           |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on                                                                                                                                                                                |             |                                                                                                                                                   |                                                                                                                                                                           |
| Full Name of Payee<br><b>Freedomworks, Inc.</b>                                                                                                                                                                                                                                                                                                             |             | Date of Public Distribution/Dissemination<br>MM / DD / YYYY<br>05 / 19 / 2014                                                                     |                                                                                                                                                                           |
| Mailing Address<br>400 N Capitol St., NW<br>Suite 735                                                                                                                                                                                                                                                                                                       |             | Amount<br><div style="border: 1px solid black; padding: 2px; display: inline-block;">115.28</div>                                                 |                                                                                                                                                                           |
| City<br>Washington                                                                                                                                                                                                                                                                                                                                          | State<br>DC | Zip Code<br>20001                                                                                                                                 | Transaction ID : <b>SE.35477</b>                                                                                                                                          |
| Purpose of Expenditure<br>IE-Loudermilk-Email/Social Media/Printing                                                                                                                                                                                                                                                                                         |             | Category/<br>Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>                                            | Date of Disbursement or Obligation<br>MM / DD / YYYY<br>05 / 19 / 2014                                                                                                    |
| Name of Federal Candidate<br><b>BARRY LOUDERMILK</b>                                                                                                                                                                                                                                                                                                        |             | <input checked="" type="checkbox"/> Support<br><input type="checkbox"/> Oppose                                                                    | Office Sought: <input checked="" type="checkbox"/> House    District: <u>11</u><br><input type="checkbox"/> President <input type="checkbox"/> Senate    State: <u>GA</u> |
| Calendar Year-To-Date<br>Per Election for Office Sought<br><div style="border: 1px solid black; padding: 2px; display: inline-block;">10635.32</div>                                                                                                                                                                                                        |             | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶ |                                                                                                                                                                           |
| Full Name of Payee<br><b>Freedomworks, Inc.</b>                                                                                                                                                                                                                                                                                                             |             | Date of Public Distribution/Dissemination<br>MM / DD / YYYY<br>05 / 19 / 2014                                                                     |                                                                                                                                                                           |
| Mailing Address<br>400 N Capitol St., NW<br>Suite 735                                                                                                                                                                                                                                                                                                       |             | Amount<br><div style="border: 1px solid black; padding: 2px; display: inline-block;">37.65</div>                                                  |                                                                                                                                                                           |
| City<br>Washington                                                                                                                                                                                                                                                                                                                                          | State<br>DC | Zip Code<br>20001                                                                                                                                 | Transaction ID : <b>SE.35478</b>                                                                                                                                          |
| Purpose of Expenditure<br>IE-Moll-Email/Social Media/Printing                                                                                                                                                                                                                                                                                               |             | Category/<br>Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>                                            | Date of Disbursement or Obligation<br>MM / DD / YYYY<br>05 / 19 / 2014                                                                                                    |
| Name of Federal Candidate<br><b>THOMAS MOLL</b>                                                                                                                                                                                                                                                                                                             |             | <input checked="" type="checkbox"/> Support<br><input type="checkbox"/> Oppose                                                                    | Office Sought: <input checked="" type="checkbox"/> House    District: <u>04</u><br><input type="checkbox"/> President <input type="checkbox"/> Senate    State: <u>AR</u> |
| Calendar Year-To-Date<br>Per Election for Office Sought<br><div style="border: 1px solid black; padding: 2px; display: inline-block;">308.74</div>                                                                                                                                                                                                          |             | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶ |                                                                                                                                                                           |
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶                                                                                                                                                                                                                                                                                             |             | <div style="border: 1px solid black; padding: 2px; display: inline-block;">152.93</div>                                                           |                                                                                                                                                                           |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶                                                                                                                                                                                                                                                                                          |             | <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>                                                                 |                                                                                                                                                                           |
| (c) <b>TOTAL</b> Independent Expenditures..... ▶                                                                                                                                                                                                                                                                                                            |             | <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>                                                                 |                                                                                                                                                                           |
| Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. |             |                                                                                                                                                   |                                                                                                                                                                           |
| Signature <u>R. Russ Walker</u>                                                                                                                                                                                                                                                                                                                             |             | Date <div style="border: 1px solid black; padding: 2px; display: inline-block;">06 / 20 / 2014</div>                                              |                                                                                                                                                                           |

[Electronically Filed]



|                                                                  |             |                                                                                                                                                                           |                                                                                                                                |
|------------------------------------------------------------------|-------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------|
| Full Name of Payee<br><b>Freedomworks, Inc.</b>                  |             | Date of Public Distribution/Dissemination<br>MM / DD / YYYY<br>05 / 19 / 2014                                                                                             |                                                                                                                                |
| Mailing Address<br>400 N Capitol St., NW<br>Suite 735            |             | Amount<br>76.46                                                                                                                                                           |                                                                                                                                |
| City<br>Washington                                               | State<br>DC | Zip Code<br>20001                                                                                                                                                         | Transaction ID : <b>SE.35480</b><br>Date of Disbursement or Obligation<br>MM / DD / YYYY<br>05 / 19 / 2014                     |
| Purpose of Expenditure<br>IE-Johnson-Email/Social Media/Printing |             | Category/<br>Type<br>004                                                                                                                                                  |                                                                                                                                |
| Name of Federal Candidate<br>ROBERT EUGENE MD JOHNSON            |             | <input checked="" type="checkbox"/> Support<br><input type="checkbox"/> Oppose                                                                                            | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President<br><input type="checkbox"/> Senate |
| Calendar Year-To-Date<br>Per Election for Office Sought<br>90.30 |             | District: 01<br>State: GA<br>Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▶ |                                                                                                                                |

|                                                                  |   |        |
|------------------------------------------------------------------|---|--------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....    | ▶ | 134.69 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... | ▶ |        |
| (c) <b>TOTAL</b> Independent Expenditures.....                   | ▶ |        |

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 146 OF 207  
 FOR LINE 24 OF FORM 3X

|                                                                                                                                                                              |  |  |                                                                                                                                                   |  |  |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|---------------------------------------------------------------------------------------------------------------------------------------------------|--|--|
| NAME OF COMMITTEE (In Full)<br><b>FREEDOMWORKS FOR AMERICA</b>                                                                                                               |  |  | FEC IDENTIFICATION NUMBER ▼<br><b>C</b> C00499020                                                                                                 |  |  |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on |  |  | <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY</div> <div>MM / DD / YYYY</div> <div>MM / DD / YYYY</div> </div> |  |  |

  

|                                                                  |             |                                                                                |                                                                                                                                                       |  |  |
|------------------------------------------------------------------|-------------|--------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|
| Full Name of Payee<br><b>Freedomworks, Inc.</b>                  |             |                                                                                | Date of Public Distribution/Dissemination<br>MM / DD / YYYY<br>05 / 19 / 2014                                                                         |  |  |
| Mailing Address<br>400 N Capitol St., NW<br>Suite 735            |             |                                                                                | Amount<br>38.82                                                                                                                                       |  |  |
| City<br>Washington                                               | State<br>DC | Zip Code<br>20001                                                              | Transaction ID : SE.35533                                                                                                                             |  |  |
| Purpose of Expenditure<br>IE-Mathis-Email/Social Media/Printing  |             | Category/<br>Type 004                                                          | Date of Disbursement or Obligation<br>MM / DD / YYYY<br>05 / 19 / 2014                                                                                |  |  |
| Name of Federal Candidate<br>CHAD DR MATHIS                      |             | <input checked="" type="checkbox"/> Support<br><input type="checkbox"/> Oppose | Office Sought: <input checked="" type="checkbox"/> House District: 06<br><input type="checkbox"/> President <input type="checkbox"/> Senate State: AL |  |  |
| Calendar Year-To-Date<br>Per Election for Office Sought 20148.08 |             |                                                                                | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶     |  |  |

  

|                                                                   |             |                                                                                |                                                                                                                                                       |  |  |
|-------------------------------------------------------------------|-------------|--------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|
| Full Name of Payee<br><b>Freedomworks, Inc.</b>                   |             |                                                                                | Date of Public Distribution/Dissemination<br>MM / DD / YYYY<br>05 / 20 / 2014                                                                         |  |  |
| Mailing Address<br>400 N Capitol St., NW<br>Suite 735             |             |                                                                                | Amount<br>232.91                                                                                                                                      |  |  |
| City<br>Washington                                                | State<br>DC | Zip Code<br>20001                                                              | Transaction ID : SE.32519                                                                                                                             |  |  |
| Purpose of Expenditure<br>IE-McDaniel-Email/Social Media/Printing |             | Category/<br>Type 004                                                          | Date of Disbursement or Obligation<br>MM / DD / YYYY<br>05 / 20 / 2014                                                                                |  |  |
| Name of Federal Candidate<br>CHRISTOPHER BRIAN MCDANIEL           |             | <input checked="" type="checkbox"/> Support<br><input type="checkbox"/> Oppose | Office Sought: <input type="checkbox"/> House District: 00<br><input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: MS |  |  |
| Calendar Year-To-Date<br>Per Election for Office Sought 263238.78 |             |                                                                                | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶     |  |  |

  

|                                                                    |        |
|--------------------------------------------------------------------|--------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶    | 271.73 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶ |        |
| (c) <b>TOTAL</b> Independent Expenditures..... ▶                   |        |

  

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

R. Russ Walker

Signature \_\_\_\_\_

[Electronically Filed]

Date MM / DD / YYYY  
06 / 20 / 2014

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 147 OF 207  
 FOR LINE 24 OF FORM 3X

|                                                                                                                                                                                                                                                                                                                                                                                 |  |                                                                                  |                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                   |                                  |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|----------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------|
| NAME OF COMMITTEE (In Full)<br><b>FREEDOMWORKS FOR AMERICA</b>                                                                                                                                                                                                                                                                                                                  |  |                                                                                  | FEC IDENTIFICATION NUMBER ▼<br><b>C</b> C00499020                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                                   |                                  |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">MM</span> / <span style="border: 1px solid black; padding: 2px;">DD</span> / <span style="border: 1px solid black; padding: 2px;">YYYY</span> |  |                                                                                  |                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                   |                                  |
| Full Name of Payee<br><b>Freedomworks, Inc.</b>                                                                                                                                                                                                                                                                                                                                 |  |                                                                                  | Date of Public Distribution/Dissemination<br><span style="border: 1px solid black; padding: 2px;">MM</span> / <span style="border: 1px solid black; padding: 2px;">DD</span> / <span style="border: 1px solid black; padding: 2px;">YYYY</span><br><b>05 / 20 / 2014</b> |                                                                                                                                                                                                                                                                   |                                  |
| Mailing Address<br>400 N Capitol St., NW<br>Suite 735                                                                                                                                                                                                                                                                                                                           |  |                                                                                  | Amount<br><span style="border: 1px solid black; padding: 2px;">332.24</span>                                                                                                                                                                                             |                                                                                                                                                                                                                                                                   |                                  |
| City<br>Washington                                                                                                                                                                                                                                                                                                                                                              |  | State<br>DC                                                                      | Zip Code<br>20001                                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                                   | Transaction ID : <b>SE.35481</b> |
| Purpose of Expenditure<br>IE-McConnell-Email/Social Media/Printing                                                                                                                                                                                                                                                                                                              |  | Category/Type<br><span style="border: 1px solid black; padding: 2px;">004</span> |                                                                                                                                                                                                                                                                          | Date of Disbursement or Obligation<br><span style="border: 1px solid black; padding: 2px;">MM</span> / <span style="border: 1px solid black; padding: 2px;">DD</span> / <span style="border: 1px solid black; padding: 2px;">YYYY</span><br><b>05 / 20 / 2014</b> |                                  |
| Name of Federal Candidate<br>MITCH MCCONNELL                                                                                                                                                                                                                                                                                                                                    |  |                                                                                  | <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose<br>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate    District: <u>00</u><br><input type="checkbox"/> President    State: <u>KY</u>                 |                                                                                                                                                                                                                                                                   |                                  |
| Calendar Year-To-Date<br>Per Election for Office Sought<br><span style="border: 1px solid black; padding: 2px;">285370.89</span>                                                                                                                                                                                                                                                |  |                                                                                  | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶                                                                                                                        |                                                                                                                                                                                                                                                                   |                                  |
| Full Name of Payee<br><b>Freedomworks, Inc.</b>                                                                                                                                                                                                                                                                                                                                 |  |                                                                                  | Date of Public Distribution/Dissemination<br><span style="border: 1px solid black; padding: 2px;">MM</span> / <span style="border: 1px solid black; padding: 2px;">DD</span> / <span style="border: 1px solid black; padding: 2px;">YYYY</span><br><b>05 / 20 / 2014</b> |                                                                                                                                                                                                                                                                   |                                  |
| Mailing Address<br>400 N Capitol St., NW<br>Suite 735                                                                                                                                                                                                                                                                                                                           |  |                                                                                  | Amount<br><span style="border: 1px solid black; padding: 2px;">2.28</span>                                                                                                                                                                                               |                                                                                                                                                                                                                                                                   |                                  |
| City<br>Washington                                                                                                                                                                                                                                                                                                                                                              |  | State<br>DC                                                                      | Zip Code<br>20001                                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                                   | Transaction ID : <b>SE.35482</b> |
| Purpose of Expenditure<br>IE-Perdue-Email/Social Media/Printing                                                                                                                                                                                                                                                                                                                 |  | Category/Type<br><span style="border: 1px solid black; padding: 2px;">004</span> |                                                                                                                                                                                                                                                                          | Date of Disbursement or Obligation<br><span style="border: 1px solid black; padding: 2px;">MM</span> / <span style="border: 1px solid black; padding: 2px;">DD</span> / <span style="border: 1px solid black; padding: 2px;">YYYY</span><br><b>05 / 20 / 2014</b> |                                  |
| Name of Federal Candidate<br>DAVID PERDUE                                                                                                                                                                                                                                                                                                                                       |  |                                                                                  | <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose<br>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate    District: <u>00</u><br><input type="checkbox"/> President    State: <u>GA</u>                 |                                                                                                                                                                                                                                                                   |                                  |
| Calendar Year-To-Date<br>Per Election for Office Sought<br><span style="border: 1px solid black; padding: 2px;">135.68</span>                                                                                                                                                                                                                                                   |  |                                                                                  | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶                                                                                                                        |                                                                                                                                                                                                                                                                   |                                  |
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶                                                                                                                                                                                                                                                                                                                 |  |                                                                                  | <span style="border: 1px solid black; padding: 2px;">334.52</span>                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                   |                                  |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶                                                                                                                                                                                                                                                                                                              |  |                                                                                  | <span style="border: 1px solid black; padding: 2px;"></span>                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                   |                                  |
| (c) <b>TOTAL</b> Independent Expenditures..... ▶                                                                                                                                                                                                                                                                                                                                |  |                                                                                  | <span style="border: 1px solid black; padding: 2px;"></span>                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                   |                                  |
| 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.                     |  |                                                                                  |                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                   |                                  |
| Signature <u>R. Russ Walker</u>                                                                                                                                                                                                                                                                                                                                                 |  |                                                                                  | Date <span style="border: 1px solid black; padding: 2px;">MM</span> / <span style="border: 1px solid black; padding: 2px;">DD</span> / <span style="border: 1px solid black; padding: 2px;">YYYY</span><br><b>06 / 20 / 2014</b>                                         |                                                                                                                                                                                                                                                                   |                                  |

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**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 148 OF 207  
 FOR LINE 24 OF FORM 3X

|                                                                                                                                                                              |  |  |                                                                                                                                                   |  |  |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|---------------------------------------------------------------------------------------------------------------------------------------------------|--|--|
| NAME OF COMMITTEE (In Full)<br><b>FREEDOMWORKS FOR AMERICA</b>                                                                                                               |  |  | FEC IDENTIFICATION NUMBER ▼<br><b>C</b> C00499020                                                                                                 |  |  |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on |  |  | <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY</div> <div>MM / DD / YYYY</div> <div>MM / DD / YYYY</div> </div> |  |  |

  

|                                                                     |             |                                                                                |                                                                                                                                                   |  |  |
|---------------------------------------------------------------------|-------------|--------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------|--|--|
| Full Name of Payee<br><b>Freedomworks, Inc.</b>                     |             |                                                                                | Date of Public Distribution/Dissemination<br>MM / DD / YYYY<br>05 / 20 / 2014                                                                     |  |  |
| Mailing Address<br>400 N Capitol St., NW<br>Suite 735               |             |                                                                                | Amount<br>809.74                                                                                                                                  |  |  |
| City<br>Washington                                                  | State<br>DC | Zip Code<br>20001                                                              | Transaction ID : SE.35483                                                                                                                         |  |  |
| Purpose of Expenditure<br>IE-Smith-Email/Social Media/Printing      |             | Category/Type<br>004                                                           | Date of Disbursement or Obligation<br>MM / DD / YYYY<br>05 / 20 / 2014                                                                            |  |  |
| Name of Federal Candidate<br>BRYAN SMITH                            |             | <input checked="" type="checkbox"/> Support<br><input type="checkbox"/> Oppose | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate<br>District: 02<br>State: ID                             |  |  |
| Calendar Year-To-Date<br>Per Election for Office Sought<br>37149.83 |             |                                                                                | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶ |  |  |

  

|                                                                     |             |                                                                                |                                                                                                                                                   |  |  |
|---------------------------------------------------------------------|-------------|--------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------|--|--|
| Full Name of Payee<br><b>Freedomworks, Inc.</b>                     |             |                                                                                | Date of Public Distribution/Dissemination<br>MM / DD / YYYY<br>05 / 20 / 2014                                                                     |  |  |
| Mailing Address<br>400 N Capitol St., NW<br>Suite 735               |             |                                                                                | Amount<br>79.92                                                                                                                                   |  |  |
| City<br>Washington                                                  | State<br>DC | Zip Code<br>20001                                                              | Transaction ID : SE.35484                                                                                                                         |  |  |
| Purpose of Expenditure<br>IE-Loudermilk-Email/Social Media/Printing |             | Category/Type<br>004                                                           | Date of Disbursement or Obligation<br>MM / DD / YYYY<br>05 / 20 / 2014                                                                            |  |  |
| Name of Federal Candidate<br>BARRY LOUDERMILK                       |             | <input checked="" type="checkbox"/> Support<br><input type="checkbox"/> Oppose | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate<br>District: 11<br>State: GA                             |  |  |
| Calendar Year-To-Date<br>Per Election for Office Sought<br>10715.24 |             |                                                                                | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶ |  |  |

  

|                                                                    |        |
|--------------------------------------------------------------------|--------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶    | 889.66 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶ |        |
| (c) <b>TOTAL</b> Independent Expenditures..... ▶                   |        |

  

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

R. Russ Walker

Signature \_\_\_\_\_

[Electronically Filed]

Date

MM / DD / YYYY  
06 / 20 / 2014

|                                                                     |             |                                                                                                                                              |                                                                                                                                                             |
|---------------------------------------------------------------------|-------------|----------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Full Name of Payee<br><b>Freedomworks, Inc.</b>                     |             | Date of Public Distribution/Dissemination<br>MM / DD / YYYY<br>05 / 20 / 2014                                                                |                                                                                                                                                             |
| Mailing Address<br>400 N Capitol St., NW<br>Suite 735               |             | Amount<br>38.82                                                                                                                              |                                                                                                                                                             |
| City<br>Washington                                                  | State<br>DC | Zip Code<br>20001                                                                                                                            | Transaction ID : <b>SE.35486</b><br>Date of Disbursement or Obligation<br>MM / DD / YYYY<br>05 / 20 / 2014                                                  |
| Purpose of Expenditure<br>IE-Schultz-Email/Social Media/Printing    |             | Category/<br>Type<br>004                                                                                                                     |                                                                                                                                                             |
| Name of Federal Candidate<br>MATTHEW DAVID SCHULTZ                  |             | <input checked="" type="checkbox"/> Support<br><input type="checkbox"/> Oppose                                                               | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President<br><input type="checkbox"/> Senate<br>District: 03<br>State: IA |
| Calendar Year-To-Date<br>Per Election for Office Sought<br>10643.96 |             | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▶ |                                                                                                                                                             |

|                                                                  |   |       |
|------------------------------------------------------------------|---|-------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....    | ▶ | 41.10 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... | ▶ |       |
| (c) <b>TOTAL</b> Independent Expenditures.....                   | ▶ |       |

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 150 OF 207  
 FOR LINE 24 OF FORM 3X

|                                                                                                                                                                              |  |  |                                                                                                                                                   |  |  |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|---------------------------------------------------------------------------------------------------------------------------------------------------|--|--|
| NAME OF COMMITTEE (In Full)<br><b>FREEDOMWORKS FOR AMERICA</b>                                                                                                               |  |  | FEC IDENTIFICATION NUMBER ▼<br><b>C</b> C00499020                                                                                                 |  |  |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on |  |  | <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY</div> <div>MM / DD / YYYY</div> <div>MM / DD / YYYY</div> </div> |  |  |

  

|                                                                  |             |                                                                                |                                                                                                                                                   |  |  |
|------------------------------------------------------------------|-------------|--------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------|--|--|
| Full Name of Payee<br><b>Freedomworks, Inc.</b>                  |             |                                                                                | Date of Public Distribution/Dissemination<br>MM / DD / YYYY<br>05 / 20 / 2014                                                                     |  |  |
| Mailing Address<br>400 N Capitol St., NW<br>Suite 735            |             |                                                                                | Amount<br>2.28                                                                                                                                    |  |  |
| City<br>Washington                                               | State<br>DC | Zip Code<br>20001                                                              | Transaction ID : SE.35487                                                                                                                         |  |  |
| Purpose of Expenditure<br>IE-Johnson-Email/Social Media/Printing |             | Category/<br>Type 004                                                          | Date of Disbursement or Obligation<br>MM / DD / YYYY<br>05 / 20 / 2014                                                                            |  |  |
| Name of Federal Candidate<br>ROBERT EUGENE MD JOHNSON            |             | <input checked="" type="checkbox"/> Support<br><input type="checkbox"/> Oppose | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate<br>District: 01<br>State: GA                             |  |  |
| Calendar Year-To-Date<br>Per Election for Office Sought 92.58    |             |                                                                                | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶ |  |  |

  

|                                                                  |             |                                                                                |                                                                                                                                                   |  |  |
|------------------------------------------------------------------|-------------|--------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------|--|--|
| Full Name of Payee<br><b>Freedomworks, Inc.</b>                  |             |                                                                                | Date of Public Distribution/Dissemination<br>MM / DD / YYYY<br>05 / 20 / 2014                                                                     |  |  |
| Mailing Address<br>400 N Capitol St., NW<br>Suite 735            |             |                                                                                | Amount<br>38.82                                                                                                                                   |  |  |
| City<br>Washington                                               | State<br>DC | Zip Code<br>20001                                                              | Transaction ID : SE.35534                                                                                                                         |  |  |
| Purpose of Expenditure<br>IE-Mathis-Email/Social Media/Printing  |             | Category/<br>Type 004                                                          | Date of Disbursement or Obligation<br>MM / DD / YYYY<br>05 / 20 / 2014                                                                            |  |  |
| Name of Federal Candidate<br>CHAD DR MATHIS                      |             | <input checked="" type="checkbox"/> Support<br><input type="checkbox"/> Oppose | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate<br>District: 06<br>State: AL                             |  |  |
| Calendar Year-To-Date<br>Per Election for Office Sought 20186.90 |             |                                                                                | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶ |  |  |

  

|                                                                    |       |
|--------------------------------------------------------------------|-------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶    | 41.10 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶ |       |
| (c) <b>TOTAL</b> Independent Expenditures..... ▶                   |       |

  

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

R. Russ Walker

[Electronically Filed]

Signature

Date

MM / DD / YYYY  
06 / 20 / 2014

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 151 OF 207  
 FOR LINE 24 OF FORM 3X

|                                                                                                                                                                                                                                                                                                                                                                                 |  |                                                                                  |                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                   |                                  |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|----------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------|
| NAME OF COMMITTEE (In Full)<br><b>FREEDOMWORKS FOR AMERICA</b>                                                                                                                                                                                                                                                                                                                  |  |                                                                                  | FEC IDENTIFICATION NUMBER ▼<br><b>C</b> C00499020                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                                   |                                  |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">MM</span> / <span style="border: 1px solid black; padding: 2px;">DD</span> / <span style="border: 1px solid black; padding: 2px;">YYYY</span> |  |                                                                                  |                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                   |                                  |
| Full Name of Payee<br><b>Freedomworks, Inc.</b>                                                                                                                                                                                                                                                                                                                                 |  |                                                                                  | Date of Public Distribution/Dissemination<br><span style="border: 1px solid black; padding: 2px;">MM</span> / <span style="border: 1px solid black; padding: 2px;">DD</span> / <span style="border: 1px solid black; padding: 2px;">YYYY</span><br><b>05 / 20 / 2014</b> |                                                                                                                                                                                                                                                                   |                                  |
| Mailing Address<br>400 N Capitol St., NW<br>Suite 735                                                                                                                                                                                                                                                                                                                           |  |                                                                                  | Amount<br><span style="border: 1px solid black; padding: 2px;">438.86</span>                                                                                                                                                                                             |                                                                                                                                                                                                                                                                   |                                  |
| City<br>Washington                                                                                                                                                                                                                                                                                                                                                              |  | State<br>DC                                                                      | Zip Code<br>20001                                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                                   | Transaction ID : <b>SE.35555</b> |
| Purpose of Expenditure<br>IE-Smith-Travel                                                                                                                                                                                                                                                                                                                                       |  | Category/Type<br><span style="border: 1px solid black; padding: 2px;">002</span> |                                                                                                                                                                                                                                                                          | Date of Disbursement or Obligation<br><span style="border: 1px solid black; padding: 2px;">MM</span> / <span style="border: 1px solid black; padding: 2px;">DD</span> / <span style="border: 1px solid black; padding: 2px;">YYYY</span><br><b>05 / 20 / 2014</b> |                                  |
| Name of Federal Candidate<br>BRYAN SMITH                                                                                                                                                                                                                                                                                                                                        |  |                                                                                  | <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose<br>Office Sought: <input checked="" type="checkbox"/> House    District: <u>02</u><br><input type="checkbox"/> President <input type="checkbox"/> Senate    State: <u>ID</u>                 |                                                                                                                                                                                                                                                                   |                                  |
| Calendar Year-To-Date<br>Per Election for Office Sought<br><span style="border: 1px solid black; padding: 2px;">37588.69</span>                                                                                                                                                                                                                                                 |  |                                                                                  | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶ _____                                                                                                                  |                                                                                                                                                                                                                                                                   |                                  |
| Full Name of Payee<br><b>Freedomworks, Inc.</b>                                                                                                                                                                                                                                                                                                                                 |  |                                                                                  | Date of Public Distribution/Dissemination<br><span style="border: 1px solid black; padding: 2px;">MM</span> / <span style="border: 1px solid black; padding: 2px;">DD</span> / <span style="border: 1px solid black; padding: 2px;">YYYY</span><br><b>05 / 21 / 2014</b> |                                                                                                                                                                                                                                                                   |                                  |
| Mailing Address<br>400 N Capitol St., NW<br>Suite 735                                                                                                                                                                                                                                                                                                                           |  |                                                                                  | Amount<br><span style="border: 1px solid black; padding: 2px;">252.32</span>                                                                                                                                                                                             |                                                                                                                                                                                                                                                                   |                                  |
| City<br>Washington                                                                                                                                                                                                                                                                                                                                                              |  | State<br>DC                                                                      | Zip Code<br>20001                                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                                   | Transaction ID : <b>SE.32524</b> |
| Purpose of Expenditure<br>IE-McDaniel-Email/Social Media/Printing                                                                                                                                                                                                                                                                                                               |  | Category/Type<br><span style="border: 1px solid black; padding: 2px;">004</span> |                                                                                                                                                                                                                                                                          | Date of Disbursement or Obligation<br><span style="border: 1px solid black; padding: 2px;">MM</span> / <span style="border: 1px solid black; padding: 2px;">DD</span> / <span style="border: 1px solid black; padding: 2px;">YYYY</span><br><b>05 / 21 / 2014</b> |                                  |
| Name of Federal Candidate<br>CHRISTOPHER BRIAN MCDANIEL                                                                                                                                                                                                                                                                                                                         |  |                                                                                  | <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose<br>Office Sought: <input type="checkbox"/> House    District: <u>00</u><br><input type="checkbox"/> President <input checked="" type="checkbox"/> Senate    State: <u>MS</u>                 |                                                                                                                                                                                                                                                                   |                                  |
| Calendar Year-To-Date<br>Per Election for Office Sought<br><span style="border: 1px solid black; padding: 2px;">263491.10</span>                                                                                                                                                                                                                                                |  |                                                                                  | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶ _____                                                                                                                  |                                                                                                                                                                                                                                                                   |                                  |
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶                                                                                                                                                                                                                                                                                                                 |  |                                                                                  | <span style="border: 1px solid black; padding: 2px;">691.18</span>                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                   |                                  |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶                                                                                                                                                                                                                                                                                                              |  |                                                                                  | <span style="border: 1px solid black; padding: 2px;"></span>                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                   |                                  |
| (c) <b>TOTAL</b> Independent Expenditures..... ▶                                                                                                                                                                                                                                                                                                                                |  |                                                                                  | <span style="border: 1px solid black; padding: 2px;"></span>                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                   |                                  |
| 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.                     |  |                                                                                  |                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                   |                                  |
| Signature <u>R. Russ Walker</u><br><div style="text-align: right;">[Electronically Filed]</div>                                                                                                                                                                                                                                                                                 |  |                                                                                  | Date <span style="border: 1px solid black; padding: 2px;">MM</span> / <span style="border: 1px solid black; padding: 2px;">DD</span> / <span style="border: 1px solid black; padding: 2px;">YYYY</span><br><b>06 / 20 / 2014</b>                                         |                                                                                                                                                                                                                                                                   |                                  |

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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 FOR LINE 24 OF FORM 3X

|                                                                                                                                                                              |  |  |                                                                                                                                                   |  |  |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|---------------------------------------------------------------------------------------------------------------------------------------------------|--|--|
| NAME OF COMMITTEE (In Full)<br><b>FREEDOMWORKS FOR AMERICA</b>                                                                                                               |  |  | FEC IDENTIFICATION NUMBER ▼<br><b>C</b> C00499020                                                                                                 |  |  |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on |  |  | <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY</div> <div>MM / DD / YYYY</div> <div>MM / DD / YYYY</div> </div> |  |  |

  

|                                                                |             |                                                                                |                                                                                                                                                       |  |  |
|----------------------------------------------------------------|-------------|--------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|
| Full Name of Payee<br><b>Freedomworks, Inc.</b>                |             |                                                                                | Date of Public Distribution/Dissemination<br>MM / DD / YYYY<br>05 / 21 / 2014                                                                         |  |  |
| Mailing Address 400 N Capitol St., NW<br>Suite 735             |             |                                                                                | Amount<br>807.46                                                                                                                                      |  |  |
| City<br>Washington                                             | State<br>DC | Zip Code<br>20001                                                              | Transaction ID : SE.35488                                                                                                                             |  |  |
| Purpose of Expenditure<br>IE-Smith-Email/Social Media/Printing |             | Category/<br>Type 004                                                          | Date of Disbursement or Obligation<br>MM / DD / YYYY<br>05 / 21 / 2014                                                                                |  |  |
| Name of Federal Candidate<br>BRYAN SMITH                       |             | <input checked="" type="checkbox"/> Support<br><input type="checkbox"/> Oppose | Office Sought: <input checked="" type="checkbox"/> House District: 02<br><input type="checkbox"/> President <input type="checkbox"/> Senate State: ID |  |  |
| Calendar Year-To-Date<br>Per Election for Office Sought 807.46 |             |                                                                                | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶     |  |  |

  

|                                                                  |             |                                                                                |                                                                                                                                                       |  |  |
|------------------------------------------------------------------|-------------|--------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|
| Full Name of Payee<br><b>Freedomworks, Inc.</b>                  |             |                                                                                | Date of Public Distribution/Dissemination<br>MM / DD / YYYY<br>05 / 21 / 2014                                                                         |  |  |
| Mailing Address 400 N Capitol St., NW<br>Suite 735               |             |                                                                                | Amount<br>38.82                                                                                                                                       |  |  |
| City<br>Washington                                               | State<br>DC | Zip Code<br>20001                                                              | Transaction ID : SE.35489                                                                                                                             |  |  |
| Purpose of Expenditure<br>IE-Birman-Email/Social Media/Printing  |             | Category/<br>Type 004                                                          | Date of Disbursement or Obligation<br>MM / DD / YYYY<br>05 / 21 / 2014                                                                                |  |  |
| Name of Federal Candidate<br>IGOR A BIRMAN                       |             | <input checked="" type="checkbox"/> Support<br><input type="checkbox"/> Oppose | Office Sought: <input checked="" type="checkbox"/> House District: 07<br><input type="checkbox"/> President <input type="checkbox"/> Senate State: CA |  |  |
| Calendar Year-To-Date<br>Per Election for Office Sought 28657.19 |             |                                                                                | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶     |  |  |

  

|                                                             |        |
|-------------------------------------------------------------|--------|
| (a) SUBTOTAL of Itemized Independent Expenditures..... ▶    | 846.28 |
| (b) SUBTOTAL of Unitemized Independent Expenditures ..... ▶ |        |
| (c) TOTAL Independent Expenditures..... ▶                   |        |

  

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

R. Russ Walker

Signature \_\_\_\_\_

[Electronically Filed]

Date MM / DD / YYYY  
06 / 20 / 2014



**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 153 OF 207  
 FOR LINE 24 OF FORM 3X

|                                                                                                                                                                                                                                                                                                                                                             |  |                                                                                  |                                                                                                                                                                                                                                                          |                                                                                                                                    |                                  |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|----------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------|----------------------------------|
| NAME OF COMMITTEE (In Full)<br><b>FREEDOMWORKS FOR AMERICA</b>                                                                                                                                                                                                                                                                                              |  |                                                                                  | FEC IDENTIFICATION NUMBER ▼<br><b>C</b> C00499020                                                                                                                                                                                                        |                                                                                                                                    |                                  |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span>                                                                                                     |  |                                                                                  |                                                                                                                                                                                                                                                          |                                                                                                                                    |                                  |
| Full Name of Payee<br><b>Freedomworks, Inc.</b>                                                                                                                                                                                                                                                                                                             |  |                                                                                  | Date of Public Distribution/Dissemination<br><span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span><br>05 / 21 / 2014                                                                                                                |                                                                                                                                    |                                  |
| Mailing Address<br>400 N Capitol St., NW<br>Suite 735                                                                                                                                                                                                                                                                                                       |  |                                                                                  | Amount<br><span style="border: 1px solid black; padding: 2px;">4.56</span>                                                                                                                                                                               |                                                                                                                                    |                                  |
| City<br>Washington                                                                                                                                                                                                                                                                                                                                          |  | State<br>DC                                                                      | Zip Code<br>20001                                                                                                                                                                                                                                        |                                                                                                                                    | Transaction ID : <b>SE.35490</b> |
| Purpose of Expenditure<br>IE-Loudermilk-Email/Social Media/Printing                                                                                                                                                                                                                                                                                         |  | Category/Type<br><span style="border: 1px solid black; padding: 2px;">004</span> |                                                                                                                                                                                                                                                          | Date of Disbursement or Obligation<br><span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span><br>05 / 21 / 2014 |                                  |
| Name of Federal Candidate<br><b>BARRY LOUDERMILK</b>                                                                                                                                                                                                                                                                                                        |  |                                                                                  | <input checked="" type="checkbox"/> Support    Office Sought: <input checked="" type="checkbox"/> House    District: <u>11</u><br><input type="checkbox"/> Oppose <input type="checkbox"/> President <input type="checkbox"/> Senate    State: <u>GA</u> |                                                                                                                                    |                                  |
| Calendar Year-To-Date<br>Per Election for Office Sought<br><span style="border: 1px solid black; padding: 2px;">4.56</span>                                                                                                                                                                                                                                 |  |                                                                                  | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶                                                                                                        |                                                                                                                                    |                                  |
| Full Name of Payee<br><b>Freedomworks, Inc.</b>                                                                                                                                                                                                                                                                                                             |  |                                                                                  | Date of Public Distribution/Dissemination<br><span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span><br>05 / 21 / 2014                                                                                                                |                                                                                                                                    |                                  |
| Mailing Address<br>400 N Capitol St., NW<br>Suite 735                                                                                                                                                                                                                                                                                                       |  |                                                                                  | Amount<br><span style="border: 1px solid black; padding: 2px;">24.46</span>                                                                                                                                                                              |                                                                                                                                    |                                  |
| City<br>Washington                                                                                                                                                                                                                                                                                                                                          |  | State<br>DC                                                                      | Zip Code<br>20001                                                                                                                                                                                                                                        |                                                                                                                                    | Transaction ID : <b>SE.35491</b> |
| Purpose of Expenditure<br>IE-Rosendale-Email/Social Media/Printing                                                                                                                                                                                                                                                                                          |  | Category/Type<br><span style="border: 1px solid black; padding: 2px;">004</span> |                                                                                                                                                                                                                                                          | Date of Disbursement or Obligation<br><span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span><br>05 / 21 / 2014 |                                  |
| Name of Federal Candidate<br><b>MATT ROSENDALE</b>                                                                                                                                                                                                                                                                                                          |  |                                                                                  | <input checked="" type="checkbox"/> Support    Office Sought: <input checked="" type="checkbox"/> House    District: <u>00</u><br><input type="checkbox"/> Oppose <input type="checkbox"/> President <input type="checkbox"/> Senate    State: <u>MT</u> |                                                                                                                                    |                                  |
| Calendar Year-To-Date<br>Per Election for Office Sought<br><span style="border: 1px solid black; padding: 2px;">24.46</span>                                                                                                                                                                                                                                |  |                                                                                  | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶                                                                                                        |                                                                                                                                    |                                  |
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶                                                                                                                                                                                                                                                                                             |  |                                                                                  | <span style="border: 1px solid black; padding: 2px;">29.02</span>                                                                                                                                                                                        |                                                                                                                                    |                                  |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶                                                                                                                                                                                                                                                                                          |  |                                                                                  | <span style="border: 1px solid black; padding: 2px;"></span>                                                                                                                                                                                             |                                                                                                                                    |                                  |
| (c) <b>TOTAL</b> Independent Expenditures..... ▶                                                                                                                                                                                                                                                                                                            |  |                                                                                  | <span style="border: 1px solid black; padding: 2px;"></span>                                                                                                                                                                                             |                                                                                                                                    |                                  |
| 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. |  |                                                                                  |                                                                                                                                                                                                                                                          |                                                                                                                                    |                                  |
| Signature <u>R. Russ Walker</u>                                                                                                                                                                                                                                                                                                                             |  |                                                                                  | Date <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span><br>06 / 20 / 2014                                                                                                                                                        |                                                                                                                                    |                                  |

[Electronically Filed]

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 154 OF 207  
 FOR LINE 24 OF FORM 3X

|                                                                                                                                                                              |  |                                                   |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|---------------------------------------------------|
| NAME OF COMMITTEE (In Full)<br><b>FREEDOMWORKS FOR AMERICA</b>                                                                                                               |  | FEC IDENTIFICATION NUMBER ▼<br><b>C</b> C00499020 |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on |  | MM / DD / YYYY                                    |

|                                                                 |                             |                                                                                                                                                   |                                                                                                                                                                     |
|-----------------------------------------------------------------|-----------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Full Name of Payee<br><b>Freedomworks, Inc.</b>                 |                             | Date of Public Distribution/Dissemination<br>MM / DD / YYYY<br><b>05 / 21 / 2014</b>                                                              |                                                                                                                                                                     |
| Mailing Address<br>400 N Capitol St., NW<br>Suite 735           |                             | Amount<br><b>38.82</b>                                                                                                                            |                                                                                                                                                                     |
| City<br>Washington                                              | State<br>DC                 | Zip Code<br>20001                                                                                                                                 | Transaction ID : <b>SE.35535</b>                                                                                                                                    |
| Purpose of Expenditure<br>IE-Mathis-Email/Social Media/Printing | Category/Type<br><b>004</b> | Date of Disbursement or Obligation<br>MM / DD / YYYY<br><b>05 / 21 / 2014</b>                                                                     |                                                                                                                                                                     |
| Name of Federal Candidate<br>CHAD DR MATHIS                     |                             | <input checked="" type="checkbox"/> Support<br><input type="checkbox"/> Oppose                                                                    | Office Sought: <input checked="" type="checkbox"/> House District: <b>06</b><br><input type="checkbox"/> President <input type="checkbox"/> Senate State: <b>AL</b> |
| Calendar Year-To-Date<br>Per Election for Office Sought         |                             | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶ |                                                                                                                                                                     |
|                                                                 |                             | <b>20225.72</b>                                                                                                                                   |                                                                                                                                                                     |

|                                                         |                             |                                                                                                                                                   |                                                                                                                                                                     |
|---------------------------------------------------------|-----------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Full Name of Payee<br><b>Freedomworks, Inc.</b>         |                             | Date of Public Distribution/Dissemination<br>MM / DD / YYYY<br><b>05 / 20 / 2014</b>                                                              |                                                                                                                                                                     |
| Mailing Address<br>400 N Capitol St., NW<br>Suite 735   |                             | Amount<br><b>241.56</b>                                                                                                                           |                                                                                                                                                                     |
| City<br>Washington                                      | State<br>DC                 | Zip Code<br>20001                                                                                                                                 | Transaction ID : <b>SE.35556</b>                                                                                                                                    |
| Purpose of Expenditure<br>IE-Smith-Travel               | Category/Type<br><b>002</b> | Date of Disbursement or Obligation<br>MM / DD / YYYY<br><b>05 / 21 / 2014</b>                                                                     |                                                                                                                                                                     |
| Name of Federal Candidate<br>BRYAN SMITH                |                             | <input checked="" type="checkbox"/> Support<br><input type="checkbox"/> Oppose                                                                    | Office Sought: <input checked="" type="checkbox"/> House District: <b>02</b><br><input type="checkbox"/> President <input type="checkbox"/> Senate State: <b>ID</b> |
| Calendar Year-To-Date<br>Per Election for Office Sought |                             | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶ |                                                                                                                                                                     |
|                                                         |                             | <b>37830.25</b>                                                                                                                                   |                                                                                                                                                                     |

|                                                           |               |
|-----------------------------------------------------------|---------------|
| (a) SUBTOTAL of Itemized Independent Expenditures.....▶   | <b>280.38</b> |
| (b) SUBTOTAL of Unitemized Independent Expenditures.....▶ |               |
| (c) TOTAL Independent Expenditures.....▶                  |               |

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

R. Russ Walker

[Electronically Filed]

Date

MM / DD / YYYY  
**06 / 20 / 2014**

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 155 OF 207  
 FOR LINE 24 OF FORM 3X

|                                                                                                                                                                                                                                                                                                                                                                                         |             |                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                           |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| NAME OF COMMITTEE (In Full)<br><b>FREEDOMWORKS FOR AMERICA</b>                                                                                                                                                                                                                                                                                                                          |             | <b>FEC IDENTIFICATION NUMBER ▼</b><br><div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00499020       </div>                                                                                                                                |                                                                                                                                                                                                                                                                           |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 0 5px;">MM</span> / <span style="border: 1px solid black; padding: 0 5px;">DD</span> / <span style="border: 1px solid black; padding: 0 5px;">YYYYYY</span> |             |                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                           |
| Full Name of Payee<br><b>Freedomworks, Inc.</b>                                                                                                                                                                                                                                                                                                                                         |             | Date of Public Distribution/Dissemination<br><span style="border: 1px solid black; padding: 0 5px;">MM</span> / <span style="border: 1px solid black; padding: 0 5px;">DD</span> / <span style="border: 1px solid black; padding: 0 5px;">YYYYYY</span><br><b>05 / 21 / 2014</b> |                                                                                                                                                                                                                                                                           |
| Mailing Address<br>400 N Capitol St., NW<br>Suite 735                                                                                                                                                                                                                                                                                                                                   |             | Amount<br><span style="border: 1px solid black; padding: 0 5px;">4.56</span>                                                                                                                                                                                                     |                                                                                                                                                                                                                                                                           |
| City<br>Washington                                                                                                                                                                                                                                                                                                                                                                      | State<br>DC | Zip Code<br>20001                                                                                                                                                                                                                                                                | Transaction ID : <b>SE.35567</b>                                                                                                                                                                                                                                          |
| Purpose of Expenditure<br>IE-Loudermilk-Email/Social Media/Printing                                                                                                                                                                                                                                                                                                                     |             | Category/Type<br><span style="border: 1px solid black; padding: 0 5px;">004</span>                                                                                                                                                                                               | Date of Disbursement or Obligation<br><span style="border: 1px solid black; padding: 0 5px;">MM</span> / <span style="border: 1px solid black; padding: 0 5px;">DD</span> / <span style="border: 1px solid black; padding: 0 5px;">YYYYYY</span><br><b>05 / 21 / 2014</b> |
| Name of Federal Candidate<br><b>BARRY LOUDERMILK</b>                                                                                                                                                                                                                                                                                                                                    |             | <input checked="" type="checkbox"/> Support<br><input type="checkbox"/> Oppose                                                                                                                                                                                                   | Office Sought: <input checked="" type="checkbox"/> House    District: <u>11</u><br><input type="checkbox"/> President <input type="checkbox"/> Senate    State: <u>GA</u>                                                                                                 |
| Calendar Year-To-Date<br>Per Election for Office Sought<br><span style="border: 1px solid black; padding: 0 5px;">9.12</span>                                                                                                                                                                                                                                                           |             | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶ _____                                                                                                                          |                                                                                                                                                                                                                                                                           |
| Full Name of Payee<br><b>Freedomworks, Inc.</b>                                                                                                                                                                                                                                                                                                                                         |             | Date of Public Distribution/Dissemination<br><span style="border: 1px solid black; padding: 0 5px;">MM</span> / <span style="border: 1px solid black; padding: 0 5px;">DD</span> / <span style="border: 1px solid black; padding: 0 5px;">YYYYYY</span><br><b>05 / 22 / 2014</b> |                                                                                                                                                                                                                                                                           |
| Mailing Address<br>400 N Capitol St., NW<br>Suite 735                                                                                                                                                                                                                                                                                                                                   |             | Amount<br><span style="border: 1px solid black; padding: 0 5px;">99.04</span>                                                                                                                                                                                                    |                                                                                                                                                                                                                                                                           |
| City<br>Washington                                                                                                                                                                                                                                                                                                                                                                      | State<br>DC | Zip Code<br>20001                                                                                                                                                                                                                                                                | Transaction ID : <b>SE.32525</b>                                                                                                                                                                                                                                          |
| Purpose of Expenditure<br>IE-McDaniel-Travel                                                                                                                                                                                                                                                                                                                                            |             | Category/Type<br><span style="border: 1px solid black; padding: 0 5px;">002</span>                                                                                                                                                                                               | Date of Disbursement or Obligation<br><span style="border: 1px solid black; padding: 0 5px;">MM</span> / <span style="border: 1px solid black; padding: 0 5px;">DD</span> / <span style="border: 1px solid black; padding: 0 5px;">YYYYYY</span><br><b>05 / 22 / 2014</b> |
| Name of Federal Candidate<br><b>CHRISTOPHER BRIAN MCDANIEL</b>                                                                                                                                                                                                                                                                                                                          |             | <input checked="" type="checkbox"/> Support<br><input type="checkbox"/> Oppose                                                                                                                                                                                                   | Office Sought: <input type="checkbox"/> House    District: <u>00</u><br><input type="checkbox"/> President <input checked="" type="checkbox"/> Senate    State: <u>MS</u>                                                                                                 |
| Calendar Year-To-Date<br>Per Election for Office Sought<br><span style="border: 1px solid black; padding: 0 5px;">263590.14</span>                                                                                                                                                                                                                                                      |             | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶ _____                                                                                                                          |                                                                                                                                                                                                                                                                           |
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶                                                                                                                                                                                                                                                                                                                         |             | <span style="border: 1px solid black; padding: 0 5px;">103.60</span>                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                           |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶                                                                                                                                                                                                                                                                                                                      |             | <span style="border: 1px solid black; padding: 0 5px;"></span>                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                           |
| (c) <b>TOTAL</b> Independent Expenditures..... ▶                                                                                                                                                                                                                                                                                                                                        |             | <span style="border: 1px solid black; padding: 0 5px;"></span>                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                           |
| 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.                             |             |                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                           |
| Signature <u>R. Russ Walker</u><br><div style="text-align: right;">[Electronically Filed]</div>                                                                                                                                                                                                                                                                                         |             | Date <span style="border: 1px solid black; padding: 0 5px;">MM</span> / <span style="border: 1px solid black; padding: 0 5px;">DD</span> / <span style="border: 1px solid black; padding: 0 5px;">YYYYYY</span><br><b>06 / 20 / 2014</b>                                         |                                                                                                                                                                                                                                                                           |

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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 FOR LINE 24 OF FORM 3X

|                                                                                                                                                                                                                                                                                                                                                                                 |  |                                                                                  |                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                   |                                  |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|----------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------|
| NAME OF COMMITTEE (In Full)<br><b>FREEDOMWORKS FOR AMERICA</b>                                                                                                                                                                                                                                                                                                                  |  |                                                                                  | FEC IDENTIFICATION NUMBER ▼<br><b>C</b> C00499020                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                                   |                                  |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">MM</span> / <span style="border: 1px solid black; padding: 2px;">DD</span> / <span style="border: 1px solid black; padding: 2px;">YYYY</span> |  |                                                                                  |                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                   |                                  |
| Full Name of Payee<br><b>Freedomworks, Inc.</b>                                                                                                                                                                                                                                                                                                                                 |  |                                                                                  | Date of Public Distribution/Dissemination<br><span style="border: 1px solid black; padding: 2px;">MM</span> / <span style="border: 1px solid black; padding: 2px;">DD</span> / <span style="border: 1px solid black; padding: 2px;">YYYY</span><br><b>05 / 22 / 2014</b> |                                                                                                                                                                                                                                                                   |                                  |
| Mailing Address<br>400 N Capitol St., NW<br>Suite 735                                                                                                                                                                                                                                                                                                                           |  |                                                                                  | Amount<br><span style="border: 1px solid black; padding: 2px;">2.74</span>                                                                                                                                                                                               |                                                                                                                                                                                                                                                                   |                                  |
| City<br>Washington                                                                                                                                                                                                                                                                                                                                                              |  | State<br>DC                                                                      | Zip Code<br>20001                                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                                   | Transaction ID : <b>SE.35493</b> |
| Purpose of Expenditure<br>IE-McConnell-Email/Social Media/Printing                                                                                                                                                                                                                                                                                                              |  | Category/Type<br><span style="border: 1px solid black; padding: 2px;">004</span> |                                                                                                                                                                                                                                                                          | Date of Disbursement or Obligation<br><span style="border: 1px solid black; padding: 2px;">MM</span> / <span style="border: 1px solid black; padding: 2px;">DD</span> / <span style="border: 1px solid black; padding: 2px;">YYYY</span><br><b>05 / 22 / 2014</b> |                                  |
| Name of Federal Candidate<br>MITCH MCCONNELL                                                                                                                                                                                                                                                                                                                                    |  |                                                                                  | <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose<br>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate    District: <u>00</u><br><input type="checkbox"/> President    State: <u>KY</u>                 |                                                                                                                                                                                                                                                                   |                                  |
| Calendar Year-To-Date<br>Per Election for Office Sought<br><span style="border: 1px solid black; padding: 2px;">2.74</span>                                                                                                                                                                                                                                                     |  |                                                                                  | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶                                                                                                                        |                                                                                                                                                                                                                                                                   |                                  |
| Full Name of Payee<br><b>Freedomworks, Inc.</b>                                                                                                                                                                                                                                                                                                                                 |  |                                                                                  | Date of Public Distribution/Dissemination<br><span style="border: 1px solid black; padding: 2px;">MM</span> / <span style="border: 1px solid black; padding: 2px;">DD</span> / <span style="border: 1px solid black; padding: 2px;">YYYY</span><br><b>05 / 22 / 2014</b> |                                                                                                                                                                                                                                                                   |                                  |
| Mailing Address<br>400 N Capitol St., NW<br>Suite 735                                                                                                                                                                                                                                                                                                                           |  |                                                                                  | Amount<br><span style="border: 1px solid black; padding: 2px;">2.74</span>                                                                                                                                                                                               |                                                                                                                                                                                                                                                                   |                                  |
| City<br>Washington                                                                                                                                                                                                                                                                                                                                                              |  | State<br>DC                                                                      | Zip Code<br>20001                                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                                   | Transaction ID : <b>SE.35494</b> |
| Purpose of Expenditure<br>IE-Smith-Email/Social Media/Printing                                                                                                                                                                                                                                                                                                                  |  | Category/Type<br><span style="border: 1px solid black; padding: 2px;">004</span> |                                                                                                                                                                                                                                                                          | Date of Disbursement or Obligation<br><span style="border: 1px solid black; padding: 2px;">MM</span> / <span style="border: 1px solid black; padding: 2px;">DD</span> / <span style="border: 1px solid black; padding: 2px;">YYYY</span><br><b>05 / 22 / 2014</b> |                                  |
| Name of Federal Candidate<br>BRYAN SMITH                                                                                                                                                                                                                                                                                                                                        |  |                                                                                  | <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose<br>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate    District: <u>02</u><br><input type="checkbox"/> President    State: <u>ID</u>                 |                                                                                                                                                                                                                                                                   |                                  |
| Calendar Year-To-Date<br>Per Election for Office Sought<br><span style="border: 1px solid black; padding: 2px;">810.20</span>                                                                                                                                                                                                                                                   |  |                                                                                  | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶                                                                                                                        |                                                                                                                                                                                                                                                                   |                                  |
| (a) SUBTOTAL of Itemized Independent Expenditures..... ▶                                                                                                                                                                                                                                                                                                                        |  |                                                                                  | <span style="border: 1px solid black; padding: 2px;">5.48</span>                                                                                                                                                                                                         |                                                                                                                                                                                                                                                                   |                                  |
| (b) SUBTOTAL of Unitemized Independent Expenditures ..... ▶                                                                                                                                                                                                                                                                                                                     |  |                                                                                  | <span style="border: 1px solid black; padding: 2px;"></span>                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                   |                                  |
| (c) TOTAL Independent Expenditures..... ▶                                                                                                                                                                                                                                                                                                                                       |  |                                                                                  | <span style="border: 1px solid black; padding: 2px;"></span>                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                   |                                  |
| 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.                     |  |                                                                                  |                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                   |                                  |
| Signature <u>R. Russ Walker</u><br><div style="text-align: right;">[Electronically Filed]</div>                                                                                                                                                                                                                                                                                 |  |                                                                                  | Date <span style="border: 1px solid black; padding: 2px;">MM</span> / <span style="border: 1px solid black; padding: 2px;">DD</span> / <span style="border: 1px solid black; padding: 2px;">YYYY</span><br><b>06 / 20 / 2014</b>                                         |                                                                                                                                                                                                                                                                   |                                  |

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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 FOR LINE 24 OF FORM 3X

|                                                                                                                                                                              |  |                                                                                                                                      |  |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--------------------------------------------------------------------------------------------------------------------------------------|--|
| NAME OF COMMITTEE (In Full)<br><b>FREEDOMWORKS FOR AMERICA</b>                                                                                                               |  | FEC IDENTIFICATION NUMBER ▼<br><b>C</b> C00499020                                                                                    |  |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on |  | <div style="border: 1px solid black; padding: 2px;">             M M / D D / Y Y Y Y Y Y<br/>             . . . . .           </div> |  |

|                                                                     |             |                                                                                                                                                                                        |                                                                                                                                                                                 |
|---------------------------------------------------------------------|-------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Full Name of Payee<br><b>Freedomworks, Inc.</b>                     |             | Date of Public Distribution/Dissemination<br><div style="border: 1px solid black; padding: 2px;">             M M / D D / Y Y Y Y Y Y<br/>             05 / 22 / 2014           </div> |                                                                                                                                                                                 |
| Mailing Address<br>400 N Capitol St., NW<br>Suite 735               |             | Amount<br><div style="border: 1px solid black; padding: 2px;">             . . . . . 92.61           </div>                                                                            |                                                                                                                                                                                 |
| City<br>Washington                                                  | State<br>DC | Zip Code<br>20001                                                                                                                                                                      | Transaction ID : <b>SE.35495</b>                                                                                                                                                |
| Purpose of Expenditure<br>IE-Loudermilk-Email/Social Media/Printing |             | Category/<br>Type 004                                                                                                                                                                  | Date of Disbursement or Obligation<br><div style="border: 1px solid black; padding: 2px;">             M M / D D / Y Y Y Y Y Y<br/>             05 / 22 / 2014           </div> |
| Name of Federal Candidate<br>BARRY LOUDERMILK                       |             | <input checked="" type="checkbox"/> Support<br><input type="checkbox"/> Oppose                                                                                                         | Office Sought: <input checked="" type="checkbox"/> House District: 11<br><input type="checkbox"/> President <input type="checkbox"/> Senate State: GA                           |
| Calendar Year-To-Date<br>Per Election for Office Sought             |             | <div style="border: 1px solid black; padding: 2px;">             . . . . . 101.73           </div>                                                                                     | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶                               |

|                                                               |             |                                                                                                                                                                                        |                                                                                                                                                                                 |
|---------------------------------------------------------------|-------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Full Name of Payee<br><b>Freedomworks, Inc.</b>               |             | Date of Public Distribution/Dissemination<br><div style="border: 1px solid black; padding: 2px;">             M M / D D / Y Y Y Y Y Y<br/>             05 / 22 / 2014           </div> |                                                                                                                                                                                 |
| Mailing Address<br>400 N Capitol St., NW<br>Suite 735         |             | Amount<br><div style="border: 1px solid black; padding: 2px;">             . . . . . 2.74           </div>                                                                             |                                                                                                                                                                                 |
| City<br>Washington                                            | State<br>DC | Zip Code<br>20001                                                                                                                                                                      | Transaction ID : <b>SE.35496</b>                                                                                                                                                |
| Purpose of Expenditure<br>IE-Moll-Email/Social Media/Printing |             | Category/<br>Type 004                                                                                                                                                                  | Date of Disbursement or Obligation<br><div style="border: 1px solid black; padding: 2px;">             M M / D D / Y Y Y Y Y Y<br/>             05 / 22 / 2014           </div> |
| Name of Federal Candidate<br>THOMAS MOLL                      |             | <input checked="" type="checkbox"/> Support<br><input type="checkbox"/> Oppose                                                                                                         | Office Sought: <input checked="" type="checkbox"/> House District: 04<br><input type="checkbox"/> President <input type="checkbox"/> Senate State: AR                           |
| Calendar Year-To-Date<br>Per Election for Office Sought       |             | <div style="border: 1px solid black; padding: 2px;">             . . . . . 2.74           </div>                                                                                       | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶                               |

|                                                            |                                                                                                   |
|------------------------------------------------------------|---------------------------------------------------------------------------------------------------|
| (a) SUBTOTAL of Itemized Independent Expenditures.....▶    | <div style="border: 1px solid black; padding: 2px;">             . . . . . 95.35           </div> |
| (b) SUBTOTAL of Unitemized Independent Expenditures .....▶ | <div style="border: 1px solid black; padding: 2px;">             . . . . .           </div>       |
| (c) TOTAL Independent Expenditures.....▶                   | <div style="border: 1px solid black; padding: 2px;">             . . . . .           </div>       |

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

R. Russ Walker

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y  
 06 / 20 / 2014

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 158 OF 207  
 FOR LINE 24 OF FORM 3X

|                                                                                                                                                                              |  |  |                                                                                                                                                   |  |  |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|---------------------------------------------------------------------------------------------------------------------------------------------------|--|--|
| NAME OF COMMITTEE (In Full)<br><b>FREEDOMWORKS FOR AMERICA</b>                                                                                                               |  |  | FEC IDENTIFICATION NUMBER ▼<br><b>C</b> C00499020                                                                                                 |  |  |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on |  |  | <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY</div> <div>MM / DD / YYYY</div> <div>MM / DD / YYYY</div> </div> |  |  |

  

|                                                                  |             |                                                                                |                                                                                                                                                       |  |  |
|------------------------------------------------------------------|-------------|--------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|
| Full Name of Payee<br><b>Freedomworks, Inc.</b>                  |             |                                                                                | Date of Public Distribution/Dissemination<br>MM / DD / YYYY<br>05 / 22 / 2014                                                                         |  |  |
| Mailing Address<br>400 N Capitol St., NW<br>Suite 735            |             |                                                                                | Amount<br>38.82                                                                                                                                       |  |  |
| City<br>Washington                                               | State<br>DC | Zip Code<br>20001                                                              | Transaction ID : SE.35497                                                                                                                             |  |  |
| Purpose of Expenditure<br>IE-Schultz-Email/Social Media/Printing |             | Category/<br>Type 004                                                          | Date of Disbursement or Obligation<br>MM / DD / YYYY<br>05 / 22 / 2014                                                                                |  |  |
| Name of Federal Candidate<br>MATTHEW DAVID SCHULTZ               |             | <input checked="" type="checkbox"/> Support<br><input type="checkbox"/> Oppose | Office Sought: <input checked="" type="checkbox"/> House District: 03<br><input type="checkbox"/> President <input type="checkbox"/> Senate State: IA |  |  |
| Calendar Year-To-Date<br>Per Election for Office Sought 10682.78 |             |                                                                                | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶     |  |  |

  

|                                                                  |             |                                                                                |                                                                                                                                                       |  |  |
|------------------------------------------------------------------|-------------|--------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|
| Full Name of Payee<br><b>Freedomworks, Inc.</b>                  |             |                                                                                | Date of Public Distribution/Dissemination<br>MM / DD / YYYY<br>05 / 22 / 2014                                                                         |  |  |
| Mailing Address<br>400 N Capitol St., NW<br>Suite 735            |             |                                                                                | Amount<br>14.98                                                                                                                                       |  |  |
| City<br>Washington                                               | State<br>DC | Zip Code<br>20001                                                              | Transaction ID : SE.35498                                                                                                                             |  |  |
| Purpose of Expenditure<br>IE-Johnson-Email/Social Media/Printing |             | Category/<br>Type 004                                                          | Date of Disbursement or Obligation<br>MM / DD / YYYY<br>05 / 22 / 2014                                                                                |  |  |
| Name of Federal Candidate<br>ROBERT EUGENE MD JOHNSON            |             | <input checked="" type="checkbox"/> Support<br><input type="checkbox"/> Oppose | Office Sought: <input checked="" type="checkbox"/> House District: 01<br><input type="checkbox"/> President <input type="checkbox"/> Senate State: GA |  |  |
| Calendar Year-To-Date<br>Per Election for Office Sought 14.98    |             |                                                                                | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶     |  |  |

  

|                                                             |       |
|-------------------------------------------------------------|-------|
| (a) SUBTOTAL of Itemized Independent Expenditures..... ▶    | 53.80 |
| (b) SUBTOTAL of Unitemized Independent Expenditures ..... ▶ |       |
| (c) TOTAL Independent Expenditures..... ▶                   |       |

  

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

R. Russ Walker

Signature \_\_\_\_\_

[Electronically Filed]

Date

MM / DD / YYYY

06 / 20 / 2014

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 159 OF 207  
 FOR LINE 24 OF FORM 3X

|                                                                                                                                                                              |  |                                                                                                                                                   |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|---------------------------------------------------------------------------------------------------------------------------------------------------|
| NAME OF COMMITTEE (In Full)<br><b>FREEDOMWORKS FOR AMERICA</b>                                                                                                               |  | <b>FEC IDENTIFICATION NUMBER ▼</b><br><div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00499020       </div> |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on |  |                                                                                                                                                   |

|                                                                 |                       |                                                                                                                                                                                                                                            |                                  |
|-----------------------------------------------------------------|-----------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------|
| Full Name of Payee<br><b>Freedomworks, Inc.</b>                 |                       | Date of Public Distribution/Dissemination<br>MM / DD / YYYY<br>05 / 22 / 2014                                                                                                                                                              |                                  |
| Mailing Address<br>400 N Capitol St., NW<br>Suite 735           |                       | Amount<br>5.49                                                                                                                                                                                                                             |                                  |
| City<br>Washington                                              | State<br>DC           | Zip Code<br>20001                                                                                                                                                                                                                          | Transaction ID : <b>SE.35536</b> |
| Purpose of Expenditure<br>IE-Mathis-Email/Social Media/Printing | Category/<br>Type 004 | Date of Disbursement or Obligation<br>MM / DD / YYYY<br>05 / 22 / 2014                                                                                                                                                                     |                                  |
| Name of Federal Candidate<br>CHAD DR MATHIS                     |                       | <input checked="" type="checkbox"/> Support    Office Sought: <input checked="" type="checkbox"/> House    District: 06<br><input type="checkbox"/> Oppose <input type="checkbox"/> President <input type="checkbox"/> Senate    State: AL |                                  |
| Calendar Year-To-Date<br>Per Election for Office Sought         |                       | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶                                                                                          |                                  |

|                                                                   |                       |                                                                                                                                                                                                                                            |                                  |
|-------------------------------------------------------------------|-----------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------|
| Full Name of Payee<br><b>Freedomworks, Inc.</b>                   |                       | Date of Public Distribution/Dissemination<br>MM / DD / YYYY<br>05 / 22 / 2014                                                                                                                                                              |                                  |
| Mailing Address<br>400 N Capitol St., NW<br>Suite 735             |                       | Amount<br>236.28                                                                                                                                                                                                                           |                                  |
| City<br>Washington                                                | State<br>DC           | Zip Code<br>20001                                                                                                                                                                                                                          | Transaction ID : <b>SE.35565</b> |
| Purpose of Expenditure<br>IE-McDaniel-Email/Social Media/Printing | Category/<br>Type 004 | Date of Disbursement or Obligation<br>MM / DD / YYYY<br>05 / 22 / 2014                                                                                                                                                                     |                                  |
| Name of Federal Candidate<br>CHRISTOPHER BRIAN MCDANIEL           |                       | <input checked="" type="checkbox"/> Support    Office Sought: <input type="checkbox"/> House    District: 00<br><input type="checkbox"/> Oppose <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate    State: MS |                                  |
| Calendar Year-To-Date<br>Per Election for Office Sought           |                       | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶                                                                                          |                                  |

|                                                                    |        |
|--------------------------------------------------------------------|--------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶    | 241.77 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶ |        |
| (c) <b>TOTAL</b> Independent Expenditures..... ▶                   |        |

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

R. Russ Walker

[Electronically Filed]

Date

MM / DD / YYYY  
06 / 20 / 2014

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**PAGE 160 OF 207  
FOR LINE 24 OF FORM 3X

|                                                                                                                                                                                                                                                                                                                                                             |             |                                                                                      |                                                                                                                                                                     |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|--------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| NAME OF COMMITTEE (In Full)<br><b>FREEDOMWORKS FOR AMERICA</b>                                                                                                                                                                                                                                                                                              |             | FEC IDENTIFICATION NUMBER ▼<br><b>C</b> C00499020                                    |                                                                                                                                                                     |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on                                                                                                                                                                                |             | MM / DD / YYYY                                                                       |                                                                                                                                                                     |
| Full Name of Payee<br><b>Freedomworks, Inc.</b>                                                                                                                                                                                                                                                                                                             |             | Date of Public Distribution/Dissemination<br>MM / DD / YYYY<br><b>05 / 23 / 2014</b> |                                                                                                                                                                     |
| Mailing Address<br>400 N Capitol St., NW<br>Suite 735                                                                                                                                                                                                                                                                                                       |             | Amount<br><b>206.95</b>                                                              |                                                                                                                                                                     |
| City<br>Washington                                                                                                                                                                                                                                                                                                                                          | State<br>DC | Zip Code<br>20001                                                                    | Transaction ID : <b>SE.32526</b>                                                                                                                                    |
| Purpose of Expenditure<br>IE-McDaniel-Email/Social Media/Printing                                                                                                                                                                                                                                                                                           |             | Category/<br>Type <b>004</b>                                                         | Date of Disbursement or Obligation<br>MM / DD / YYYY<br><b>05 / 23 / 2014</b>                                                                                       |
| Name of Federal Candidate<br><b>CHRISTOPHER BRIAN MCDANIEL</b>                                                                                                                                                                                                                                                                                              |             | <input checked="" type="checkbox"/> Support<br><input type="checkbox"/> Oppose       | Office Sought: <input type="checkbox"/> House District: <b>00</b><br><input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <b>MS</b> |
| Calendar Year-To-Date<br>Per Election for Office Sought                                                                                                                                                                                                                                                                                                     |             | <b>264033.37</b>                                                                     | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶                   |
| Full Name of Payee<br><b>Freedomworks, Inc.</b>                                                                                                                                                                                                                                                                                                             |             | Date of Public Distribution/Dissemination<br>MM / DD / YYYY<br><b>05 / 23 / 2014</b> |                                                                                                                                                                     |
| Mailing Address<br>400 N Capitol St., NW<br>Suite 735                                                                                                                                                                                                                                                                                                       |             | Amount<br><b>19.41</b>                                                               |                                                                                                                                                                     |
| City<br>Washington                                                                                                                                                                                                                                                                                                                                          | State<br>DC | Zip Code<br>20001                                                                    | Transaction ID : <b>SE.35499</b>                                                                                                                                    |
| Purpose of Expenditure<br>IE-Loudermilk-Email/Social Media/Printing                                                                                                                                                                                                                                                                                         |             | Category/<br>Type <b>004</b>                                                         | Date of Disbursement or Obligation<br>MM / DD / YYYY<br><b>05 / 23 / 2014</b>                                                                                       |
| Name of Federal Candidate<br><b>BARRY LOUDERMILK</b>                                                                                                                                                                                                                                                                                                        |             | <input checked="" type="checkbox"/> Support<br><input type="checkbox"/> Oppose       | Office Sought: <input checked="" type="checkbox"/> House District: <b>11</b><br><input type="checkbox"/> President <input type="checkbox"/> Senate State: <b>GA</b> |
| Calendar Year-To-Date<br>Per Election for Office Sought                                                                                                                                                                                                                                                                                                     |             | <b>121.14</b>                                                                        | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶                   |
| (a) SUBTOTAL of Itemized Independent Expenditures.....                                                                                                                                                                                                                                                                                                      |             | <b>226.36</b>                                                                        |                                                                                                                                                                     |
| (b) SUBTOTAL of Unitemized Independent Expenditures .....                                                                                                                                                                                                                                                                                                   |             |                                                                                      |                                                                                                                                                                     |
| (c) TOTAL Independent Expenditures.....                                                                                                                                                                                                                                                                                                                     |             |                                                                                      |                                                                                                                                                                     |
| Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. |             |                                                                                      |                                                                                                                                                                     |
| Signature<br><br><i>R. Russ Walker</i>                                                                                                                                                                                                                                                                                                                      |             | Date<br>MM / DD / YYYY<br><b>06 / 20 / 2014</b>                                      |                                                                                                                                                                     |
|                                                                                                                                                                                                                                                                                                                                                             |             | [Electronically Filed]                                                               |                                                                                                                                                                     |



**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**PAGE 161 OF 207  
FOR LINE 24 OF FORM 3X

|                                                                                                                                                                                                                                                                                                                                                             |             |                                                                                      |                                                                                                                                                                     |  |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|--------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| NAME OF COMMITTEE (In Full)<br><b>FREEDOMWORKS FOR AMERICA</b>                                                                                                                                                                                                                                                                                              |             |                                                                                      | FEC IDENTIFICATION NUMBER ▼<br><b>C</b> C00499020                                                                                                                   |  |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on                                                                                                                                                                                |             |                                                                                      | MM / DD / YYYY                                                                                                                                                      |  |
| Full Name of Payee<br><b>Freedomworks, Inc.</b>                                                                                                                                                                                                                                                                                                             |             | Date of Public Distribution/Dissemination<br>MM / DD / YYYY<br><b>05 / 23 / 2014</b> |                                                                                                                                                                     |  |
| Mailing Address<br>400 N Capitol St., NW<br>Suite 735                                                                                                                                                                                                                                                                                                       |             | Amount<br><b>38.82</b>                                                               |                                                                                                                                                                     |  |
| City<br>Washington                                                                                                                                                                                                                                                                                                                                          | State<br>DC | Zip Code<br>20001                                                                    | Transaction ID : <b>SE.35500</b>                                                                                                                                    |  |
| Purpose of Expenditure<br>IE-Schultz-Email/Social Media/Printing                                                                                                                                                                                                                                                                                            |             | Category/<br>Type <b>004</b>                                                         | Date of Disbursement or Obligation<br>MM / DD / YYYY<br><b>05 / 23 / 2014</b>                                                                                       |  |
| Name of Federal Candidate<br><b>MATTHEW DAVID SCHULTZ</b>                                                                                                                                                                                                                                                                                                   |             | <input checked="" type="checkbox"/> Support<br><input type="checkbox"/> Oppose       | Office Sought: <input checked="" type="checkbox"/> House District: <b>03</b><br><input type="checkbox"/> President <input type="checkbox"/> Senate State: <b>IA</b> |  |
| Calendar Year-To-Date<br>Per Election for Office Sought                                                                                                                                                                                                                                                                                                     |             | <b>10721.60</b>                                                                      | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶                   |  |
| Full Name of Payee<br><b>Freedomworks, Inc.</b>                                                                                                                                                                                                                                                                                                             |             | Date of Public Distribution/Dissemination<br>MM / DD / YYYY<br><b>05 / 23 / 2014</b> |                                                                                                                                                                     |  |
| Mailing Address<br>400 N Capitol St., NW<br>Suite 735                                                                                                                                                                                                                                                                                                       |             | Amount<br><b>48.31</b>                                                               |                                                                                                                                                                     |  |
| City<br>Washington                                                                                                                                                                                                                                                                                                                                          | State<br>DC | Zip Code<br>20001                                                                    | Transaction ID : <b>SE.35537</b>                                                                                                                                    |  |
| Purpose of Expenditure<br>IE-Mathis-Email/Social Media/Printing                                                                                                                                                                                                                                                                                             |             | Category/<br>Type <b>004</b>                                                         | Date of Disbursement or Obligation<br>MM / DD / YYYY<br><b>05 / 23 / 2014</b>                                                                                       |  |
| Name of Federal Candidate<br><b>CHAD DR MATHIS</b>                                                                                                                                                                                                                                                                                                          |             | <input checked="" type="checkbox"/> Support<br><input type="checkbox"/> Oppose       | Office Sought: <input checked="" type="checkbox"/> House District: <b>06</b><br><input type="checkbox"/> President <input type="checkbox"/> Senate State: <b>AL</b> |  |
| Calendar Year-To-Date<br>Per Election for Office Sought                                                                                                                                                                                                                                                                                                     |             | <b>20279.52</b>                                                                      | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶                   |  |
| (a) SUBTOTAL of Itemized Independent Expenditures.....                                                                                                                                                                                                                                                                                                      |             | <b>87.13</b>                                                                         |                                                                                                                                                                     |  |
| (b) SUBTOTAL of Unitemized Independent Expenditures .....                                                                                                                                                                                                                                                                                                   |             |                                                                                      |                                                                                                                                                                     |  |
| (c) TOTAL Independent Expenditures.....                                                                                                                                                                                                                                                                                                                     |             |                                                                                      |                                                                                                                                                                     |  |
| Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. |             |                                                                                      |                                                                                                                                                                     |  |
| Signature<br><br><i>R. Russ Walker</i>                                                                                                                                                                                                                                                                                                                      |             | Date<br>MM / DD / YYYY<br><b>06 / 20 / 2014</b>                                      |                                                                                                                                                                     |  |
| [Electronically Filed]                                                                                                                                                                                                                                                                                                                                      |             |                                                                                      |                                                                                                                                                                     |  |

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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 FOR LINE 24 OF FORM 3X

|                                                                                                                                                                                                                                                                                                                                                             |  |                      |                                                                                                                                                   |                                                                        |                           |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|----------------------|---------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------|---------------------------|
| NAME OF COMMITTEE (In Full)<br><b>FREEDOMWORKS FOR AMERICA</b>                                                                                                                                                                                                                                                                                              |  |                      | FEC IDENTIFICATION NUMBER ▼<br><b>C</b> C00499020                                                                                                 |                                                                        |                           |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on                                                                                                                                                                                |  |                      | <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY</div> <div>MM / DD / YYYY</div> <div>MM / DD / YYYY</div> </div> |                                                                        |                           |
| Full Name of Payee<br><b>Freedomworks, Inc.</b>                                                                                                                                                                                                                                                                                                             |  |                      | Date of Public Distribution/Dissemination<br>MM / DD / YYYY<br>05 / 27 / 2014                                                                     |                                                                        |                           |
| Mailing Address<br>400 N Capitol St., NW<br>Suite 735                                                                                                                                                                                                                                                                                                       |  |                      | Amount<br>180.17                                                                                                                                  |                                                                        |                           |
| City<br>Washington                                                                                                                                                                                                                                                                                                                                          |  | State<br>DC          | Zip Code<br>20001                                                                                                                                 |                                                                        | Transaction ID : SE.32527 |
| Purpose of Expenditure<br>IE-McDaniel-Email/Social Media/Printing                                                                                                                                                                                                                                                                                           |  | Category/Type<br>004 |                                                                                                                                                   | Date of Disbursement or Obligation<br>MM / DD / YYYY<br>05 / 27 / 2014 |                           |
| Name of Federal Candidate<br>CHRISTOPHER BRIAN MCDANIEL                                                                                                                                                                                                                                                                                                     |  |                      | <input checked="" type="checkbox"/> Support<br><input type="checkbox"/> Oppose                                                                    |                                                                        |                           |
| Office Sought:<br><input type="checkbox"/> House <input checked="" type="checkbox"/> Senate                                                                                                                                                                                                                                                                 |  |                      | District: 00<br>State: MS                                                                                                                         |                                                                        |                           |
| Calendar Year-To-Date<br>Per Election for Office Sought                                                                                                                                                                                                                                                                                                     |  |                      | 264213.54                                                                                                                                         |                                                                        |                           |
| Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General                                                                                                                                                                                                                                                              |  |                      | 2014 <input type="checkbox"/> Other (specify) ▶                                                                                                   |                                                                        |                           |
| Full Name of Payee<br><b>Freedomworks, Inc.</b>                                                                                                                                                                                                                                                                                                             |  |                      | Date of Public Distribution/Dissemination<br>MM / DD / YYYY<br>05 / 27 / 2014                                                                     |                                                                        |                           |
| Mailing Address<br>400 N Capitol St., NW<br>Suite 735                                                                                                                                                                                                                                                                                                       |  |                      | Amount<br>21.81                                                                                                                                   |                                                                        |                           |
| City<br>Washington                                                                                                                                                                                                                                                                                                                                          |  | State<br>DC          | Zip Code<br>20001                                                                                                                                 |                                                                        | Transaction ID : SE.35501 |
| Purpose of Expenditure<br>IE-Begich-Email/Social Media/Printing                                                                                                                                                                                                                                                                                             |  | Category/Type<br>004 |                                                                                                                                                   | Date of Disbursement or Obligation<br>MM / DD / YYYY<br>05 / 27 / 2014 |                           |
| Name of Federal Candidate<br>MARK BEGICH                                                                                                                                                                                                                                                                                                                    |  |                      | <input type="checkbox"/> Support<br><input checked="" type="checkbox"/> Oppose                                                                    |                                                                        |                           |
| Office Sought:<br><input type="checkbox"/> House <input checked="" type="checkbox"/> Senate                                                                                                                                                                                                                                                                 |  |                      | District: 00<br>State: AK                                                                                                                         |                                                                        |                           |
| Calendar Year-To-Date<br>Per Election for Office Sought                                                                                                                                                                                                                                                                                                     |  |                      | 909.41                                                                                                                                            |                                                                        |                           |
| Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General                                                                                                                                                                                                                                                              |  |                      | 2014 <input type="checkbox"/> Other (specify) ▶                                                                                                   |                                                                        |                           |
| (a) SUBTOTAL of Itemized Independent Expenditures..... ▶                                                                                                                                                                                                                                                                                                    |  |                      | 201.98                                                                                                                                            |                                                                        |                           |
| (b) SUBTOTAL of Unitemized Independent Expenditures ..... ▶                                                                                                                                                                                                                                                                                                 |  |                      |                                                                                                                                                   |                                                                        |                           |
| (c) TOTAL Independent Expenditures..... ▶                                                                                                                                                                                                                                                                                                                   |  |                      |                                                                                                                                                   |                                                                        |                           |
| Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. |  |                      |                                                                                                                                                   |                                                                        |                           |
| Signature<br><br>R. Russ Walker                                                                                                                                                                                                                                                                                                                             |  |                      | Date<br>MM / DD / YYYY<br>06 / 20 / 2014                                                                                                          |                                                                        |                           |
| [Electronically Filed]                                                                                                                                                                                                                                                                                                                                      |  |                      |                                                                                                                                                   |                                                                        |                           |

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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|                                                                                                                                                                              |  |                                                                                                                                                             |  |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|-------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| NAME OF COMMITTEE (In Full)<br><b>FREEDOMWORKS FOR AMERICA</b>                                                                                                               |  | FEC IDENTIFICATION NUMBER ▼<br><b>C</b> C00499020                                                                                                           |  |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on |  | <div style="border: 1px solid black; padding: 2px;"> <div style="display: flex; justify-content: space-between;"> <span>MM / DD / YYYY</span> </div> </div> |  |

|                                                                        |             |                                                                                |                                                                                                                                                                     |  |
|------------------------------------------------------------------------|-------------|--------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| Full Name of Payee<br><b>Freedomworks, Inc.</b>                        |             |                                                                                | Date of Public Distribution/Dissemination<br>MM / DD / YYYY<br><b>05 / 27 / 2014</b>                                                                                |  |
| Mailing Address 400 N Capitol St., NW<br>Suite 735                     |             |                                                                                | Amount<br><b>5.49</b>                                                                                                                                               |  |
| City<br>Washington                                                     | State<br>DC | Zip Code<br>20001                                                              | Transaction ID : <b>SE.35502</b>                                                                                                                                    |  |
| Purpose of Expenditure<br>IE-Pryor-Email/Social Media/Printing         |             | Category/Type<br><b>004</b>                                                    | Date of Disbursement or Obligation<br>MM / DD / YYYY<br><b>05 / 27 / 2014</b>                                                                                       |  |
| Name of Federal Candidate<br><b>MARK LUNSFORD PRYOR</b>                |             | <input type="checkbox"/> Support<br><input checked="" type="checkbox"/> Oppose | Office Sought: <input type="checkbox"/> House District: <b>00</b><br><input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <b>AR</b> |  |
| Calendar Year-To-Date<br>Per Election for Office Sought<br><b>5.49</b> |             |                                                                                | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶                   |  |

|                                                                           |             |                                                                                |                                                                                                                                                                     |  |
|---------------------------------------------------------------------------|-------------|--------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| Full Name of Payee<br><b>Freedomworks, Inc.</b>                           |             |                                                                                | Date of Public Distribution/Dissemination<br>MM / DD / YYYY<br><b>05 / 27 / 2014</b>                                                                                |  |
| Mailing Address 400 N Capitol St., NW<br>Suite 735                        |             |                                                                                | Amount<br><b>21.81</b>                                                                                                                                              |  |
| City<br>Washington                                                        | State<br>DC | Zip Code<br>20001                                                              | Transaction ID : <b>SE.35503</b>                                                                                                                                    |  |
| Purpose of Expenditure<br>IE-Landreiu-Email/Social Media/Printing         |             | Category/Type<br><b>004</b>                                                    | Date of Disbursement or Obligation<br>MM / DD / YYYY<br><b>05 / 27 / 2014</b>                                                                                       |  |
| Name of Federal Candidate<br><b>MARY L LANDRIEU</b>                       |             | <input type="checkbox"/> Support<br><input checked="" type="checkbox"/> Oppose | Office Sought: <input type="checkbox"/> House District: <b>00</b><br><input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <b>LA</b> |  |
| Calendar Year-To-Date<br>Per Election for Office Sought<br><b>7915.22</b> |             |                                                                                | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶                   |  |

|                                                             |              |
|-------------------------------------------------------------|--------------|
| (a) SUBTOTAL of Itemized Independent Expenditures..... ▶    | <b>27.30</b> |
| (b) SUBTOTAL of Unitemized Independent Expenditures ..... ▶ |              |
| (c) TOTAL Independent Expenditures..... ▶                   |              |

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

R. Russ Walker

[Electronically Filed]

Date

 MM / DD / YYYY  
**06 / 20 / 2014**

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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|                                                                                                                                                                                                                                                                                                                                                                                 |  |                                                                                   |                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                       |  |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|-----------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| NAME OF COMMITTEE (In Full)<br><b>FREEDOMWORKS FOR AMERICA</b>                                                                                                                                                                                                                                                                                                                  |  |                                                                                   | FEC IDENTIFICATION NUMBER ▼<br><b>C</b> C00499020                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                                                                       |  |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">MM</span> / <span style="border: 1px solid black; padding: 2px;">DD</span> / <span style="border: 1px solid black; padding: 2px;">YYYY</span> |  |                                                                                   |                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                       |  |
| Full Name of Payee<br><b>Freedomworks, Inc.</b>                                                                                                                                                                                                                                                                                                                                 |  |                                                                                   | Date of Public Distribution/Dissemination<br><span style="border: 1px solid black; padding: 2px;">MM</span> / <span style="border: 1px solid black; padding: 2px;">DD</span> / <span style="border: 1px solid black; padding: 2px;">YYYY</span><br><b>05 / 27 / 2014</b> |                                                                                                                                                                                                                                                                                                       |  |
| Mailing Address<br>400 N Capitol St., NW<br>Suite 735                                                                                                                                                                                                                                                                                                                           |  |                                                                                   | Amount<br><span style="border: 1px solid black; padding: 2px;">21.81</span>                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                       |  |
| City<br>Washington                                                                                                                                                                                                                                                                                                                                                              |  | State<br>DC                                                                       | Zip Code<br>20001                                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                                                                       |  |
| Purpose of Expenditure<br>IE-Hagan-Email/Social Media/Printing                                                                                                                                                                                                                                                                                                                  |  | Category/<br>Type <span style="border: 1px solid black; padding: 2px;">004</span> |                                                                                                                                                                                                                                                                          | Transaction ID : <b>SE.35504</b><br>Date of Disbursement or Obligation<br><span style="border: 1px solid black; padding: 2px;">MM</span> / <span style="border: 1px solid black; padding: 2px;">DD</span> / <span style="border: 1px solid black; padding: 2px;">YYYY</span><br><b>05 / 27 / 2014</b> |  |
| Name of Federal Candidate<br>KAY R HAGAN                                                                                                                                                                                                                                                                                                                                        |  |                                                                                   | <input type="checkbox"/> Support<br><input checked="" type="checkbox"/> Oppose<br>Office Sought: <input type="checkbox"/> House District: <u>00</u><br><input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>NC</u>                    |                                                                                                                                                                                                                                                                                                       |  |
| Calendar Year-To-Date<br>Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">265.76</span>                                                                                                                                                                                                                                                      |  |                                                                                   | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶                                                                                                                        |                                                                                                                                                                                                                                                                                                       |  |
| Full Name of Payee<br><b>Freedomworks, Inc.</b>                                                                                                                                                                                                                                                                                                                                 |  |                                                                                   | Date of Public Distribution/Dissemination<br><span style="border: 1px solid black; padding: 2px;">MM</span> / <span style="border: 1px solid black; padding: 2px;">DD</span> / <span style="border: 1px solid black; padding: 2px;">YYYY</span><br><b>05 / 28 / 2014</b> |                                                                                                                                                                                                                                                                                                       |  |
| Mailing Address<br>400 N Capitol St., NW<br>Suite 735                                                                                                                                                                                                                                                                                                                           |  |                                                                                   | Amount<br><span style="border: 1px solid black; padding: 2px;">975.63</span>                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                       |  |
| City<br>Washington                                                                                                                                                                                                                                                                                                                                                              |  | State<br>DC                                                                       | Zip Code<br>20001                                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                                                                       |  |
| Purpose of Expenditure<br>IE-McDaniel-Travel                                                                                                                                                                                                                                                                                                                                    |  | Category/<br>Type <span style="border: 1px solid black; padding: 2px;">002</span> |                                                                                                                                                                                                                                                                          | Transaction ID : <b>SE.32528</b><br>Date of Disbursement or Obligation<br><span style="border: 1px solid black; padding: 2px;">MM</span> / <span style="border: 1px solid black; padding: 2px;">DD</span> / <span style="border: 1px solid black; padding: 2px;">YYYY</span><br><b>05 / 28 / 2014</b> |  |
| Name of Federal Candidate<br>CHRISTOPHER BRIAN MCDANIEL                                                                                                                                                                                                                                                                                                                         |  |                                                                                   | <input checked="" type="checkbox"/> Support<br><input type="checkbox"/> Oppose<br>Office Sought: <input type="checkbox"/> House District: <u>00</u><br><input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>MS</u>                    |                                                                                                                                                                                                                                                                                                       |  |
| Calendar Year-To-Date<br>Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">265189.17</span>                                                                                                                                                                                                                                                   |  |                                                                                   | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶                                                                                                                        |                                                                                                                                                                                                                                                                                                       |  |
| (a) SUBTOTAL of Itemized Independent Expenditures..... ▶                                                                                                                                                                                                                                                                                                                        |  |                                                                                   | <span style="border: 1px solid black; padding: 2px;">997.44</span>                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                       |  |
| (b) SUBTOTAL of Unitemized Independent Expenditures ..... ▶                                                                                                                                                                                                                                                                                                                     |  |                                                                                   | <span style="border: 1px solid black; padding: 2px;"></span>                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                       |  |
| (c) TOTAL Independent Expenditures..... ▶                                                                                                                                                                                                                                                                                                                                       |  |                                                                                   | <span style="border: 1px solid black; padding: 2px;"></span>                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                       |  |
| 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.                     |  |                                                                                   |                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                       |  |
| Signature<br><br><i>R. Russ Walker</i>                                                                                                                                                                                                                                                                                                                                          |  |                                                                                   | Date <span style="border: 1px solid black; padding: 2px;">MM</span> / <span style="border: 1px solid black; padding: 2px;">DD</span> / <span style="border: 1px solid black; padding: 2px;">YYYY</span><br><b>06 / 20 / 2014</b>                                         |                                                                                                                                                                                                                                                                                                       |  |

[Electronically Filed]

|                                                                   |             |                                                                                                                                              |                                                                                                                                                       |
|-------------------------------------------------------------------|-------------|----------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------|
| Full Name of Payee<br><b>Freedomworks, Inc.</b>                   |             | Date of Public Distribution/Dissemination<br>MM / DD / YYYY<br>05 / 28 / 2014                                                                |                                                                                                                                                       |
| Mailing Address<br>400 N Capitol St., NW<br>Suite 735             |             | Amount<br>2.74                                                                                                                               |                                                                                                                                                       |
| City<br>Washington                                                | State<br>DC | Zip Code<br>20001                                                                                                                            | Transaction ID : <b>SE.35505</b><br>Date of Disbursement or Obligation<br>MM / DD / YYYY<br>05 / 28 / 2014                                            |
| Purpose of Expenditure<br>IE-Begich-Email/Social Media/Printing   |             | Category/<br>Type<br>004                                                                                                                     |                                                                                                                                                       |
| Name of Federal Candidate<br>MARK BEGICH                          |             | <input type="checkbox"/> Support<br><input checked="" type="checkbox"/> Oppose                                                               | Office Sought: <input type="checkbox"/> House District: 00<br><input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: AK |
| Calendar Year-To-Date<br>Per Election for Office Sought<br>912.15 |             | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ► |                                                                                                                                                       |

|                                                                  |        |
|------------------------------------------------------------------|--------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....    | 249.78 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... |        |
| (c) <b>TOTAL</b> Independent Expenditures.....                   |        |

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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|                                                                                                                                                                                                                                                                                                                                                             |  |                                                                                  |                                                                                                                                                                                                                                         |                                                                                                                                    |                                  |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|----------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------|----------------------------------|
| NAME OF COMMITTEE (In Full)<br><b>FREEDOMWORKS FOR AMERICA</b>                                                                                                                                                                                                                                                                                              |  |                                                                                  | FEC IDENTIFICATION NUMBER ▼<br><b>C</b> C00499020                                                                                                                                                                                       |                                                                                                                                    |                                  |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span>                                                                                                     |  |                                                                                  |                                                                                                                                                                                                                                         |                                                                                                                                    |                                  |
| Full Name of Payee<br><b>Freedomworks, Inc.</b>                                                                                                                                                                                                                                                                                                             |  |                                                                                  | Date of Public Distribution/Dissemination<br><span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span><br>05 / 28 / 2014                                                                                               |                                                                                                                                    |                                  |
| Mailing Address<br>400 N Capitol St., NW<br>Suite 735                                                                                                                                                                                                                                                                                                       |  |                                                                                  | Amount<br><span style="border: 1px solid black; padding: 2px;">2.74</span>                                                                                                                                                              |                                                                                                                                    |                                  |
| City<br>Washington                                                                                                                                                                                                                                                                                                                                          |  | State<br>DC                                                                      | Zip Code<br>20001                                                                                                                                                                                                                       |                                                                                                                                    | Transaction ID : <b>SE.35506</b> |
| Purpose of Expenditure<br>IE-Pryor-Email/Social Media/Printing                                                                                                                                                                                                                                                                                              |  | Category/Type<br><span style="border: 1px solid black; padding: 2px;">004</span> |                                                                                                                                                                                                                                         | Date of Disbursement or Obligation<br><span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span><br>05 / 28 / 2014 |                                  |
| Name of Federal Candidate<br>MARK LUNSFORD PRYOR                                                                                                                                                                                                                                                                                                            |  |                                                                                  | <input type="checkbox"/> Support<br><input checked="" type="checkbox"/> Oppose<br>Office Sought: <input type="checkbox"/> House District: 00<br><input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: AR |                                                                                                                                    |                                  |
| Calendar Year-To-Date<br>Per Election for Office Sought<br><span style="border: 1px solid black; padding: 2px;">8.23</span>                                                                                                                                                                                                                                 |  |                                                                                  | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶                                                                                       |                                                                                                                                    |                                  |
| Full Name of Payee<br><b>Freedomworks, Inc.</b>                                                                                                                                                                                                                                                                                                             |  |                                                                                  | Date of Public Distribution/Dissemination<br><span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span><br>05 / 28 / 2014                                                                                               |                                                                                                                                    |                                  |
| Mailing Address<br>400 N Capitol St., NW<br>Suite 735                                                                                                                                                                                                                                                                                                       |  |                                                                                  | Amount<br><span style="border: 1px solid black; padding: 2px;">2.74</span>                                                                                                                                                              |                                                                                                                                    |                                  |
| City<br>Washington                                                                                                                                                                                                                                                                                                                                          |  | State<br>DC                                                                      | Zip Code<br>20001                                                                                                                                                                                                                       |                                                                                                                                    | Transaction ID : <b>SE.35507</b> |
| Purpose of Expenditure<br>IE-Landrieu-Email/Social Media/Printing                                                                                                                                                                                                                                                                                           |  | Category/Type<br><span style="border: 1px solid black; padding: 2px;">004</span> |                                                                                                                                                                                                                                         | Date of Disbursement or Obligation<br><span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span><br>05 / 28 / 2014 |                                  |
| Name of Federal Candidate<br>MARY L LANDRIEU                                                                                                                                                                                                                                                                                                                |  |                                                                                  | <input type="checkbox"/> Support<br><input checked="" type="checkbox"/> Oppose<br>Office Sought: <input type="checkbox"/> House District: 00<br><input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: LA |                                                                                                                                    |                                  |
| Calendar Year-To-Date<br>Per Election for Office Sought<br><span style="border: 1px solid black; padding: 2px;">7917.96</span>                                                                                                                                                                                                                              |  |                                                                                  | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶                                                                                       |                                                                                                                                    |                                  |
| (a) SUBTOTAL of Itemized Independent Expenditures..... ▶                                                                                                                                                                                                                                                                                                    |  |                                                                                  | <span style="border: 1px solid black; padding: 2px;">5.48</span>                                                                                                                                                                        |                                                                                                                                    |                                  |
| (b) SUBTOTAL of Unitemized Independent Expenditures ..... ▶                                                                                                                                                                                                                                                                                                 |  |                                                                                  | <span style="border: 1px solid black; padding: 2px;"></span>                                                                                                                                                                            |                                                                                                                                    |                                  |
| (c) TOTAL Independent Expenditures..... ▶                                                                                                                                                                                                                                                                                                                   |  |                                                                                  | <span style="border: 1px solid black; padding: 2px;"></span>                                                                                                                                                                            |                                                                                                                                    |                                  |
| 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. |  |                                                                                  |                                                                                                                                                                                                                                         |                                                                                                                                    |                                  |
| Signature <u>R. Russ Walker</u><br><div style="text-align: right;">[Electronically Filed]</div>                                                                                                                                                                                                                                                             |  |                                                                                  | Date <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span><br>06 / 20 / 2014                                                                                                                                       |                                                                                                                                    |                                  |

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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 FOR LINE 24 OF FORM 3X

|                                                                                                                                                                                                                                                                                                                                                             |  |                                                                                  |                                                                                                                                                                                                                                                          |                                                                                                                                    |                                  |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|----------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------|----------------------------------|
| NAME OF COMMITTEE (In Full)<br><b>FREEDOMWORKS FOR AMERICA</b>                                                                                                                                                                                                                                                                                              |  |                                                                                  | FEC IDENTIFICATION NUMBER ▼<br><b>C</b> C00499020                                                                                                                                                                                                        |                                                                                                                                    |                                  |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span>                                                                                                     |  |                                                                                  |                                                                                                                                                                                                                                                          |                                                                                                                                    |                                  |
| Full Name of Payee<br><b>Freedomworks, Inc.</b>                                                                                                                                                                                                                                                                                                             |  |                                                                                  | Date of Public Distribution/Dissemination<br><span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span><br>05 / 28 / 2014                                                                                                                |                                                                                                                                    |                                  |
| Mailing Address<br>400 N Capitol St., NW<br>Suite 735                                                                                                                                                                                                                                                                                                       |  |                                                                                  | Amount<br><span style="border: 1px solid black; padding: 2px;">2.74</span>                                                                                                                                                                               |                                                                                                                                    |                                  |
| City<br>Washington                                                                                                                                                                                                                                                                                                                                          |  | State<br>DC                                                                      | Zip Code<br>20001                                                                                                                                                                                                                                        |                                                                                                                                    | Transaction ID : <b>SE.35508</b> |
| Purpose of Expenditure<br>IE-Hagan-Email/Social Media/Printing                                                                                                                                                                                                                                                                                              |  | Category/Type<br><span style="border: 1px solid black; padding: 2px;">004</span> |                                                                                                                                                                                                                                                          | Date of Disbursement or Obligation<br><span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span><br>05 / 28 / 2014 |                                  |
| Name of Federal Candidate<br>KAY R HAGAN                                                                                                                                                                                                                                                                                                                    |  |                                                                                  | <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose<br>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate    District: <u>00</u><br><input type="checkbox"/> President    State: <u>NC</u> |                                                                                                                                    |                                  |
| Calendar Year-To-Date<br>Per Election for Office Sought<br><span style="border: 1px solid black; padding: 2px;">268.50</span>                                                                                                                                                                                                                               |  |                                                                                  | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶ _____                                                                                                  |                                                                                                                                    |                                  |
| Full Name of Payee<br><b>Freedomworks, Inc.</b>                                                                                                                                                                                                                                                                                                             |  |                                                                                  | Date of Public Distribution/Dissemination<br><span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span><br>05 / 29 / 2014                                                                                                                |                                                                                                                                    |                                  |
| Mailing Address<br>400 N Capitol St., NW<br>Suite 735                                                                                                                                                                                                                                                                                                       |  |                                                                                  | Amount<br><span style="border: 1px solid black; padding: 2px;">103.91</span>                                                                                                                                                                             |                                                                                                                                    |                                  |
| City<br>Washington                                                                                                                                                                                                                                                                                                                                          |  | State<br>DC                                                                      | Zip Code<br>20001                                                                                                                                                                                                                                        |                                                                                                                                    | Transaction ID : <b>SE.35509</b> |
| Purpose of Expenditure<br>IE-Birman-Email/Social Media/Printing                                                                                                                                                                                                                                                                                             |  | Category/Type<br><span style="border: 1px solid black; padding: 2px;">004</span> |                                                                                                                                                                                                                                                          | Date of Disbursement or Obligation<br><span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span><br>05 / 29 / 2014 |                                  |
| Name of Federal Candidate<br>IGOR A BIRMAN                                                                                                                                                                                                                                                                                                                  |  |                                                                                  | <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose<br>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate    District: <u>07</u><br><input type="checkbox"/> President    State: <u>CA</u> |                                                                                                                                    |                                  |
| Calendar Year-To-Date<br>Per Election for Office Sought<br><span style="border: 1px solid black; padding: 2px;">28761.10</span>                                                                                                                                                                                                                             |  |                                                                                  | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶ _____                                                                                                  |                                                                                                                                    |                                  |
| (a) SUBTOTAL of Itemized Independent Expenditures..... ▶                                                                                                                                                                                                                                                                                                    |  |                                                                                  | <span style="border: 1px solid black; padding: 2px;">106.65</span>                                                                                                                                                                                       |                                                                                                                                    |                                  |
| (b) SUBTOTAL of Unitemized Independent Expenditures ..... ▶                                                                                                                                                                                                                                                                                                 |  |                                                                                  | <span style="border: 1px solid black; padding: 2px;"></span>                                                                                                                                                                                             |                                                                                                                                    |                                  |
| (c) TOTAL Independent Expenditures..... ▶                                                                                                                                                                                                                                                                                                                   |  |                                                                                  | <span style="border: 1px solid black; padding: 2px;"></span>                                                                                                                                                                                             |                                                                                                                                    |                                  |
| 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. |  |                                                                                  |                                                                                                                                                                                                                                                          |                                                                                                                                    |                                  |
| Signature <u>R. Russ Walker</u><br><div style="text-align: right;">[Electronically Filed]</div>                                                                                                                                                                                                                                                             |  |                                                                                  | Date <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span><br>06 / 20 / 2014                                                                                                                                                        |                                                                                                                                    |                                  |

|                                                                    |             |                                                                                                                                              |                                                                                                                                                       |
|--------------------------------------------------------------------|-------------|----------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------|
| Full Name of Payee<br><b>Freedomworks, Inc.</b>                    |             | Date of Public Distribution/Dissemination<br>MM / DD / YYYY<br>05 / 19 / 2014                                                                |                                                                                                                                                       |
| Mailing Address<br>400 N Capitol St., NW<br>Suite 735              |             | Amount<br>45.69                                                                                                                              |                                                                                                                                                       |
| City<br>Washington                                                 | State<br>DC | Zip Code<br>20001                                                                                                                            | Transaction ID : <b>SE.35511</b><br>Date of Disbursement or Obligation<br>MM / DD / YYYY<br>05 / 29 / 2014                                            |
| Purpose of Expenditure<br>IE-Rosendale-Email/Social Media/Printing |             | Category/<br>Type<br>004                                                                                                                     |                                                                                                                                                       |
| Name of Federal Candidate<br>MATT ROSENDALE                        |             | <input checked="" type="checkbox"/> Support<br><input type="checkbox"/> Oppose                                                               | Office Sought: <input checked="" type="checkbox"/> House District: 00<br><input type="checkbox"/> President <input type="checkbox"/> Senate State: MT |
| Calendar Year-To-Date<br>Per Election for Office Sought<br>70.15   |             | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▶ |                                                                                                                                                       |

|                                                                  |       |
|------------------------------------------------------------------|-------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....    | 71.97 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... |       |
| (c) <b>TOTAL</b> Independent Expenditures.....                   |       |



**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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 FOR LINE 24 OF FORM 3X

|                                                                                                                                                                              |  |                                                                                                                                                   |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|---------------------------------------------------------------------------------------------------------------------------------------------------|
| NAME OF COMMITTEE (In Full)<br><b>FREEDOMWORKS FOR AMERICA</b>                                                                                                               |  | <b>FEC IDENTIFICATION NUMBER ▼</b><br><div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00499020       </div> |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on |  |                                                                                                                                                   |

|                                                                   |                       |                                                                                                                                                                                                                                            |                                  |
|-------------------------------------------------------------------|-----------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------|
| Full Name of Payee<br><b>Freedomworks, Inc.</b>                   |                       | Date of Public Distribution/Dissemination<br>MM / DD / YYYY<br>05 / 29 / 2014                                                                                                                                                              |                                  |
| Mailing Address<br>400 N Capitol St., NW<br>Suite 735             |                       | Amount<br>544.16                                                                                                                                                                                                                           |                                  |
| City<br>Washington                                                | State<br>DC           | Zip Code<br>20001                                                                                                                                                                                                                          | Transaction ID : <b>SE.35531</b> |
| Purpose of Expenditure<br>IE-McDaniel-Email/Social Media/Printing | Category/<br>Type 004 | Date of Disbursement or Obligation<br>MM / DD / YYYY<br>05 / 29 / 2014                                                                                                                                                                     |                                  |
| Name of Federal Candidate<br>CHRISTOPHER BRIAN MCDANIEL           |                       | <input checked="" type="checkbox"/> Support    Office Sought: <input type="checkbox"/> House    District: 00<br><input type="checkbox"/> Oppose <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate    State: MS |                                  |
| Calendar Year-To-Date<br>Per Election for Office Sought           |                       | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶                                                                                          |                                  |

|                                                         |                       |                                                                                                                                                                                                                                            |                                  |
|---------------------------------------------------------|-----------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------|
| Full Name of Payee<br><b>Freedomworks, Inc.</b>         |                       | Date of Public Distribution/Dissemination<br>MM / DD / YYYY<br>05 / 29 / 2014                                                                                                                                                              |                                  |
| Mailing Address<br>400 N Capitol St., NW<br>Suite 735   |                       | Amount<br>1360.83                                                                                                                                                                                                                          |                                  |
| City<br>Washington                                      | State<br>DC           | Zip Code<br>20001                                                                                                                                                                                                                          | Transaction ID : <b>SE.35532</b> |
| Purpose of Expenditure<br>IE-McDaniel-Travel            | Category/<br>Type 002 | Date of Disbursement or Obligation<br>MM / DD / YYYY<br>05 / 29 / 2014                                                                                                                                                                     |                                  |
| Name of Federal Candidate<br>CHRISTOPHER BRIAN MCDANIEL |                       | <input checked="" type="checkbox"/> Support    Office Sought: <input type="checkbox"/> House    District: 00<br><input type="checkbox"/> Oppose <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate    State: MS |                                  |
| Calendar Year-To-Date<br>Per Election for Office Sought |                       | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶                                                                                          |                                  |

|                                                                    |         |
|--------------------------------------------------------------------|---------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶    | 1904.99 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶ |         |
| (c) <b>TOTAL</b> Independent Expenditures..... ▶                   |         |

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

R. Russ Walker

[Electronically Filed]

Date

MM / DD / YYYY  
06 / 20 / 2014

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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 FOR LINE 24 OF FORM 3X

|                                                                                                                                                                              |  |                                                                                                                                                   |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|---------------------------------------------------------------------------------------------------------------------------------------------------|
| NAME OF COMMITTEE (In Full)<br><b>FREEDOMWORKS FOR AMERICA</b>                                                                                                               |  | <b>FEC IDENTIFICATION NUMBER ▼</b><br><div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00499020       </div> |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on |  |                                                                                                                                                   |

|                                                                 |                   |                                                                                                                                                   |                                                                                                                                                             |
|-----------------------------------------------------------------|-------------------|---------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Full Name of Payee<br><b>Freedomworks, Inc.</b>                 |                   | Date of Public Distribution/Dissemination<br>MM / DD / YYYY<br>05 / 29 / 2014                                                                     |                                                                                                                                                             |
| Mailing Address<br>400 N Capitol St., NW<br>Suite 735           |                   | Amount<br><div style="border: 1px solid black; padding: 2px; display: inline-block;">103.91</div>                                                 |                                                                                                                                                             |
| City<br>Washington                                              | State<br>DC       | Zip Code<br>20001                                                                                                                                 | Transaction ID : <b>SE.35538</b>                                                                                                                            |
| Purpose of Expenditure<br>IE-Mathis-Email/Social Media/Printing | Category/<br>Type | <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>                                                              | Date of Disbursement or Obligation<br>MM / DD / YYYY<br>05 / 29 / 2014                                                                                      |
| Name of Federal Candidate<br>CHAD DR MATHIS                     |                   | <input checked="" type="checkbox"/> Support<br><input type="checkbox"/> Oppose                                                                    | Office Sought: <input checked="" type="checkbox"/> House    District: 06<br><input type="checkbox"/> President <input type="checkbox"/> Senate    State: AL |
| Calendar Year-To-Date<br>Per Election for Office Sought         |                   | <div style="border: 1px solid black; padding: 2px; display: inline-block;">20383.43</div>                                                         |                                                                                                                                                             |
|                                                                 |                   | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶ |                                                                                                                                                             |

|                                                                   |                   |                                                                                                                                                   |                                                                                                                                                             |
|-------------------------------------------------------------------|-------------------|---------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Full Name of Payee<br><b>Freedomworks, Inc.</b>                   |                   | Date of Public Distribution/Dissemination<br>MM / DD / YYYY<br>05 / 30 / 2014                                                                     |                                                                                                                                                             |
| Mailing Address<br>400 N Capitol St., NW<br>Suite 735             |                   | Amount<br><div style="border: 1px solid black; padding: 2px; display: inline-block;">352.87</div>                                                 |                                                                                                                                                             |
| City<br>Washington                                                | State<br>DC       | Zip Code<br>20001                                                                                                                                 | Transaction ID : <b>SE.32543</b>                                                                                                                            |
| Purpose of Expenditure<br>IE-McDaniel-Email/Social Media/Printing | Category/<br>Type | <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>                                                              | Date of Disbursement or Obligation<br>MM / DD / YYYY<br>05 / 30 / 2014                                                                                      |
| Name of Federal Candidate<br>CHRISTOPHER BRIAN MCDANIEL           |                   | <input checked="" type="checkbox"/> Support<br><input type="checkbox"/> Oppose                                                                    | Office Sought: <input type="checkbox"/> House    District: 00<br><input type="checkbox"/> President <input checked="" type="checkbox"/> Senate    State: MS |
| Calendar Year-To-Date<br>Per Election for Office Sought           |                   | <div style="border: 1px solid black; padding: 2px; display: inline-block;">317694.07</div>                                                        |                                                                                                                                                             |
|                                                                   |                   | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶ |                                                                                                                                                             |

|                                                                    |                                                                                         |
|--------------------------------------------------------------------|-----------------------------------------------------------------------------------------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶    | <div style="border: 1px solid black; padding: 2px; display: inline-block;">456.78</div> |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶ | <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>       |
| (c) <b>TOTAL</b> Independent Expenditures..... ▶                   | <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>       |

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

R. Russ Walker

[Electronically Filed]

Date

 MM / DD / YYYY  
 06 / 20 / 2014

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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 FOR LINE 24 OF FORM 3X

|                                                                                                                                                                              |  |                                                                                                                                                             |  |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|-------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| NAME OF COMMITTEE (In Full)<br><b>FREEDOMWORKS FOR AMERICA</b>                                                                                                               |  | FEC IDENTIFICATION NUMBER ▼<br><b>C</b> C00499020                                                                                                           |  |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on |  | <div style="border: 1px solid black; padding: 2px;"> <div style="display: flex; justify-content: space-between;"> <span>MM / DD / YYYY</span> </div> </div> |  |

|                                                         |                      |                                                                                                                                                   |                                                                                                                                                       |
|---------------------------------------------------------|----------------------|---------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------|
| Full Name of Payee<br><b>Freedomworks, Inc.</b>         |                      | Date of Public Distribution/Dissemination<br>MM / DD / YYYY<br>05 / 30 / 2014                                                                     |                                                                                                                                                       |
| Mailing Address 400 N Capitol St., NW<br>Suite 735      |                      | Amount<br>384.21                                                                                                                                  |                                                                                                                                                       |
| City Washington                                         | State DC             | Zip Code 20001                                                                                                                                    | Transaction ID : SE.32544                                                                                                                             |
| Purpose of Expenditure<br>IE-McDaniel-Travel            | Category/Type<br>002 | Date of Disbursement or Obligation<br>MM / DD / YYYY<br>05 / 30 / 2014                                                                            |                                                                                                                                                       |
| Name of Federal Candidate<br>CHRISTOPHER BRIAN MCDANIEL |                      | <input checked="" type="checkbox"/> Support<br><input type="checkbox"/> Oppose                                                                    | Office Sought: <input type="checkbox"/> House District: 00<br><input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: MS |
| Calendar Year-To-Date<br>Per Election for Office Sought |                      | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶ |                                                                                                                                                       |

|                                                                 |                      |                                                                                                                                                   |                                                                                                                                                       |
|-----------------------------------------------------------------|----------------------|---------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------|
| Full Name of Payee<br><b>Freedomworks, Inc.</b>                 |                      | Date of Public Distribution/Dissemination<br>MM / DD / YYYY<br>05 / 30 / 2014                                                                     |                                                                                                                                                       |
| Mailing Address 400 N Capitol St., NW<br>Suite 735              |                      | Amount<br>165.32                                                                                                                                  |                                                                                                                                                       |
| City Washington                                                 | State DC             | Zip Code 20001                                                                                                                                    | Transaction ID : SE.35512                                                                                                                             |
| Purpose of Expenditure<br>IE-Birman-Email/Social Media/Printing | Category/Type<br>004 | Date of Disbursement or Obligation<br>MM / DD / YYYY<br>05 / 30 / 2014                                                                            |                                                                                                                                                       |
| Name of Federal Candidate<br>IGOR A BIRMAN                      |                      | <input checked="" type="checkbox"/> Support<br><input type="checkbox"/> Oppose                                                                    | Office Sought: <input checked="" type="checkbox"/> House District: 07<br><input type="checkbox"/> President <input type="checkbox"/> Senate State: CA |
| Calendar Year-To-Date<br>Per Election for Office Sought         |                      | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶ |                                                                                                                                                       |

|                                                           |        |
|-----------------------------------------------------------|--------|
| (a) SUBTOTAL of Itemized Independent Expenditures.....▶   | 549.53 |
| (b) SUBTOTAL of Unitemized Independent Expenditures.....▶ |        |
| (c) TOTAL Independent Expenditures.....▶                  |        |

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

R. Russ Walker

[Electronically Filed]

Date

 MM / DD / YYYY  
 06 / 20 / 2014

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 172 OF 207  
 FOR LINE 24 OF FORM 3X

|                                                                                                                                                                              |  |  |                                                                                                                                                   |  |  |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|---------------------------------------------------------------------------------------------------------------------------------------------------|--|--|
| NAME OF COMMITTEE (In Full)<br><b>FREEDOMWORKS FOR AMERICA</b>                                                                                                               |  |  | FEC IDENTIFICATION NUMBER ▼<br><b>C</b> C00499020                                                                                                 |  |  |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on |  |  | <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY</div> <div>MM / DD / YYYY</div> <div>MM / DD / YYYY</div> </div> |  |  |

  

|                                                                  |             |                                                                                |                                                                                                                                                       |  |  |
|------------------------------------------------------------------|-------------|--------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|
| Full Name of Payee<br><b>Freedomworks, Inc.</b>                  |             |                                                                                | Date of Public Distribution/Dissemination<br>MM / DD / YYYY<br>05 / 30 / 2014                                                                         |  |  |
| Mailing Address<br>400 N Capitol St., NW<br>Suite 735            |             |                                                                                | Amount<br>107.09                                                                                                                                      |  |  |
| City<br>Washington                                               | State<br>DC | Zip Code<br>20001                                                              | Transaction ID : SE.35513                                                                                                                             |  |  |
| Purpose of Expenditure<br>IE-Schultz-Email/Social Media/Printing |             | Category/<br>Type 004                                                          | Date of Disbursement or Obligation<br>MM / DD / YYYY<br>05 / 30 / 2014                                                                                |  |  |
| Name of Federal Candidate<br>MATTHEW DAVID SCHULTZ               |             | <input checked="" type="checkbox"/> Support<br><input type="checkbox"/> Oppose | Office Sought: <input checked="" type="checkbox"/> House District: 03<br><input type="checkbox"/> President <input type="checkbox"/> Senate State: IA |  |  |
| Calendar Year-To-Date<br>Per Election for Office Sought 10854.97 |             |                                                                                | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶     |  |  |

  

|                                                                  |             |                                                                                |                                                                                                                                                       |  |  |
|------------------------------------------------------------------|-------------|--------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|
| Full Name of Payee<br><b>Freedomworks, Inc.</b>                  |             |                                                                                | Date of Public Distribution/Dissemination<br>MM / DD / YYYY<br>05 / 30 / 2014                                                                         |  |  |
| Mailing Address<br>400 N Capitol St., NW<br>Suite 735            |             |                                                                                | Amount<br>184.73                                                                                                                                      |  |  |
| City<br>Washington                                               | State<br>DC | Zip Code<br>20001                                                              | Transaction ID : SE.35514                                                                                                                             |  |  |
| Purpose of Expenditure<br>IE-Mathis-Email/Social Media/Printing  |             | Category/<br>Type 004                                                          | Date of Disbursement or Obligation<br>MM / DD / YYYY<br>05 / 30 / 2014                                                                                |  |  |
| Name of Federal Candidate<br>CHAD DR MATHIS                      |             | <input checked="" type="checkbox"/> Support<br><input type="checkbox"/> Oppose | Office Sought: <input checked="" type="checkbox"/> House District: 06<br><input type="checkbox"/> President <input type="checkbox"/> Senate State: AL |  |  |
| Calendar Year-To-Date<br>Per Election for Office Sought 30568.16 |             |                                                                                | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶     |  |  |

  

|                                                                   |        |
|-------------------------------------------------------------------|--------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....▶    | 291.82 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....▶ |        |
| (c) <b>TOTAL</b> Independent Expenditures.....▶                   |        |

  

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

R. Russ Walker

Signature \_\_\_\_\_

[Electronically Filed]

Date MM / DD / YYYY  
06 / 20 / 2014

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 173 OF 207  
 FOR LINE 24 OF FORM 3X

|                                                                                                                                                                              |  |                                                                                                                                                   |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|---------------------------------------------------------------------------------------------------------------------------------------------------|
| NAME OF COMMITTEE (In Full)<br><b>FREEDOMWORKS FOR AMERICA</b>                                                                                                               |  | <b>FEC IDENTIFICATION NUMBER ▼</b><br><div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00499020       </div> |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on |  |                                                                                                                                                   |

|                                                                    |                       |                                                                                                                                                                                                                                            |                                  |
|--------------------------------------------------------------------|-----------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------|
| Full Name of Payee<br><b>Freedomworks, Inc.</b>                    |                       | Date of Public Distribution/Dissemination<br>MM / DD / YYYY<br>05 / 30 / 2014                                                                                                                                                              |                                  |
| Mailing Address<br>400 N Capitol St., NW<br>Suite 735              |                       | Amount<br>10.04                                                                                                                                                                                                                            |                                  |
| City<br>Washington                                                 | State<br>DC           | Zip Code<br>20001                                                                                                                                                                                                                          | Transaction ID : <b>SE.35515</b> |
| Purpose of Expenditure<br>IE-Rosendale-Email/Social Media/Printing | Category/<br>Type 004 | Date of Disbursement or Obligation<br>MM / DD / YYYY<br>05 / 30 / 2014                                                                                                                                                                     |                                  |
| Name of Federal Candidate<br>MATT ROSENDALE                        |                       | <input checked="" type="checkbox"/> Support    Office Sought: <input checked="" type="checkbox"/> House    District: 00<br><input type="checkbox"/> Oppose <input type="checkbox"/> President <input type="checkbox"/> Senate    State: MT |                                  |
| Calendar Year-To-Date<br>Per Election for Office Sought            |                       | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶                                                                                          |                                  |

|                                                         |                       |                                                                                                                                                                                                                                            |                                  |
|---------------------------------------------------------|-----------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------|
| Full Name of Payee<br><b>Freedomworks, Inc.</b>         |                       | Date of Public Distribution/Dissemination<br>MM / DD / YYYY<br>05 / 31 / 2014                                                                                                                                                              |                                  |
| Mailing Address<br>400 N Capitol St., NW<br>Suite 735   |                       | Amount<br>101.75                                                                                                                                                                                                                           |                                  |
| City<br>Washington                                      | State<br>DC           | Zip Code<br>20001                                                                                                                                                                                                                          | Transaction ID : <b>SE.32545</b> |
| Purpose of Expenditure<br>IE-McDaniel-Travel            | Category/<br>Type 002 | Date of Disbursement or Obligation<br>MM / DD / YYYY<br>05 / 31 / 2014                                                                                                                                                                     |                                  |
| Name of Federal Candidate<br>CHRISTOPHER BRIAN MCDANIEL |                       | <input checked="" type="checkbox"/> Support    Office Sought: <input type="checkbox"/> House    District: 00<br><input type="checkbox"/> Oppose <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate    State: MS |                                  |
| Calendar Year-To-Date<br>Per Election for Office Sought |                       | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶                                                                                          |                                  |

|                                                                    |        |
|--------------------------------------------------------------------|--------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶    | 111.79 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶ |        |
| (c) <b>TOTAL</b> Independent Expenditures..... ▶                   |        |

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

R. Russ Walker

[Electronically Filed]

Date

MM / DD / YYYY  
06 / 20 / 2014

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 174 OF 207  
 FOR LINE 24 OF FORM 3X

|                                                                                                                                                                              |  |  |                                                                                                                                                   |  |  |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|---------------------------------------------------------------------------------------------------------------------------------------------------|--|--|
| NAME OF COMMITTEE (In Full)<br><b>FREEDOMWORKS FOR AMERICA</b>                                                                                                               |  |  | FEC IDENTIFICATION NUMBER ▼<br><b>C</b> C00499020                                                                                                 |  |  |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on |  |  | <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY</div> <div>MM / DD / YYYY</div> <div>MM / DD / YYYY</div> </div> |  |  |

  

|                                                                                      |             |                       |                                                                                                                                                   |  |  |
|--------------------------------------------------------------------------------------|-------------|-----------------------|---------------------------------------------------------------------------------------------------------------------------------------------------|--|--|
| Full Name of Payee<br><b>Freedomworks, Inc.</b>                                      |             |                       | Date of Public Distribution/Dissemination<br>MM / DD / YYYY<br>05 / 20 / 2014                                                                     |  |  |
| Mailing Address<br>400 N Capitol St., NW<br>Suite 735                                |             |                       | Amount<br>-708.62                                                                                                                                 |  |  |
| City<br>Washington                                                                   | State<br>DC | Zip Code<br>20001     | Transaction ID : SE.35557                                                                                                                         |  |  |
| Purpose of Expenditure<br>IE-Smith-Travel credits                                    |             | Category/<br>Type 002 | Date of Disbursement or Obligation<br>MM / DD / YYYY<br>05 / 31 / 2014                                                                            |  |  |
| Name of Federal Candidate<br>BRYAN SMITH                                             |             |                       | <input checked="" type="checkbox"/> Support<br><input type="checkbox"/> Oppose                                                                    |  |  |
| Office Sought:<br><input type="checkbox"/> President <input type="checkbox"/> Senate |             |                       | <input checked="" type="checkbox"/> House District: 02<br>State: ID                                                                               |  |  |
| Calendar Year-To-Date<br>Per Election for Office Sought                              |             |                       | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶ |  |  |

  

|                                                                                                 |             |                       |                                                                                                                                                   |  |  |
|-------------------------------------------------------------------------------------------------|-------------|-----------------------|---------------------------------------------------------------------------------------------------------------------------------------------------|--|--|
| Full Name of Payee<br><b>Freedomworks, Inc.</b>                                                 |             |                       | Date of Public Distribution/Dissemination<br>MM / DD / YYYY<br>05 / 20 / 2014                                                                     |  |  |
| Mailing Address<br>400 N Capitol St., NW<br>Suite 735                                           |             |                       | Amount<br>-170.10                                                                                                                                 |  |  |
| City<br>Washington                                                                              | State<br>DC | Zip Code<br>20001     | Transaction ID : SE.35559                                                                                                                         |  |  |
| Purpose of Expenditure<br>IE-McConnell-Travel Credit                                            |             | Category/<br>Type 002 | Date of Disbursement or Obligation<br>MM / DD / YYYY<br>05 / 31 / 2014                                                                            |  |  |
| Name of Federal Candidate<br>MITCH MCCONNELL                                                    |             |                       | <input type="checkbox"/> Support<br><input checked="" type="checkbox"/> Oppose                                                                    |  |  |
| Office Sought:<br><input type="checkbox"/> President <input checked="" type="checkbox"/> Senate |             |                       | <input type="checkbox"/> House District: 00<br>State: KY                                                                                          |  |  |
| Calendar Year-To-Date<br>Per Election for Office Sought                                         |             |                       | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶ |  |  |

  

|                                                                    |         |
|--------------------------------------------------------------------|---------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶    | -878.72 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶ |         |
| (c) <b>TOTAL</b> Independent Expenditures..... ▶                   |         |

  

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

R. Russ Walker

Signature \_\_\_\_\_

[Electronically Filed]

Date

MM / DD / YYYY

06 / 20 / 2014

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 175 OF 207  
 FOR LINE 24 OF FORM 3X

|                                                                                                                                                                              |  |  |                                                                                                                                                   |  |  |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|---------------------------------------------------------------------------------------------------------------------------------------------------|--|--|
| NAME OF COMMITTEE (In Full)<br><b>FREEDOMWORKS FOR AMERICA</b>                                                                                                               |  |  | FEC IDENTIFICATION NUMBER ▼<br><b>C</b> C00499020                                                                                                 |  |  |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on |  |  | <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY</div> <div>MM / DD / YYYY</div> <div>MM / DD / YYYY</div> </div> |  |  |

  

|                                                                   |             |                       |                                                                                                                                                                                       |  |  |
|-------------------------------------------------------------------|-------------|-----------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|
| Full Name of Payee<br><b>Freedomworks, Inc.</b>                   |             |                       | Date of Public Distribution/Dissemination<br>MM / DD / YYYY<br>05 / 31 / 2014                                                                                                         |  |  |
| Mailing Address<br>400 N Capitol St., NW<br>Suite 735             |             |                       | Amount<br>-871.87                                                                                                                                                                     |  |  |
| City<br>Washington                                                | State<br>DC | Zip Code<br>20001     | Transaction ID : SE.35560                                                                                                                                                             |  |  |
| Purpose of Expenditure<br>IE-McDaniel-Travel Credit               |             | Category/<br>Type 002 | Date of Disbursement or Obligation<br>MM / DD / YYYY<br>05 / 31 / 2014                                                                                                                |  |  |
| Name of Federal Candidate<br>CHRISTOPHER BRIAN MCDANIEL           |             |                       | Office Sought: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose<br><input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: MS |  |  |
| Calendar Year-To-Date<br>Per Election for Office Sought 327308.16 |             |                       | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶                                     |  |  |

  

|                                                                   |             |                       |                                                                                                                                                                                       |  |  |
|-------------------------------------------------------------------|-------------|-----------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|
| Full Name of Payee<br><b>Freedomworks, Inc.</b>                   |             |                       | Date of Public Distribution/Dissemination<br>MM / DD / YYYY<br>05 / 06 / 2014                                                                                                         |  |  |
| Mailing Address<br>400 N Capitol St., NW<br>Suite 735             |             |                       | Amount<br>-78.18                                                                                                                                                                      |  |  |
| City<br>Washington                                                | State<br>DC | Zip Code<br>20001     | Transaction ID : SE.35563                                                                                                                                                             |  |  |
| Purpose of Expenditure<br>IE-Brannon-Travel Credit                |             | Category/<br>Type 002 | Date of Disbursement or Obligation<br>MM / DD / YYYY<br>05 / 31 / 2014                                                                                                                |  |  |
| Name of Federal Candidate<br>GREGORY JOSEPH BRANNON               |             |                       | Office Sought: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose<br><input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NC |  |  |
| Calendar Year-To-Date<br>Per Election for Office Sought 149262.16 |             |                       | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶                                     |  |  |

  

|                                                                    |         |
|--------------------------------------------------------------------|---------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶    | -950.05 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶ |         |
| (c) <b>TOTAL</b> Independent Expenditures..... ▶                   |         |

  

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

R. Russ Walker

Signature \_\_\_\_\_

[Electronically Filed]

Date

MM / DD / YYYY  
06 / 20 / 2014

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 176 OF 207  
 FOR LINE 24 OF FORM 3X

|                                                                                                                                                                              |  |  |                                                                                                                                                   |  |  |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|---------------------------------------------------------------------------------------------------------------------------------------------------|--|--|
| NAME OF COMMITTEE (In Full)<br><b>FREEDOMWORKS FOR AMERICA</b>                                                                                                               |  |  | FEC IDENTIFICATION NUMBER ▼<br><b>C</b> C00499020                                                                                                 |  |  |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on |  |  | <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY</div> <div>MM / DD / YYYY</div> <div>MM / DD / YYYY</div> </div> |  |  |

  

|                                                                   |             |                       |                                                                                                                                                                                       |  |  |
|-------------------------------------------------------------------|-------------|-----------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|
| Full Name of Payee<br><b>French Fryz</b>                          |             |                       | Date of Public Distribution/Dissemination<br>MM / DD / YYYY<br>05 / 03 / 2014                                                                                                         |  |  |
| Mailing Address 2109 Hendrsonville Rd.                            |             |                       | Amount<br>86.03                                                                                                                                                                       |  |  |
| City<br>Skyland                                                   | State<br>NC | Zip Code<br>28776     | Transaction ID : SE.26996                                                                                                                                                             |  |  |
| Purpose of Expenditure<br>IE-Brannon-Food/Beverage                |             | Category/<br>Type 002 | Date of Disbursement or Obligation<br>MM / DD / YYYY<br>05 / 03 / 2014                                                                                                                |  |  |
| Name of Federal Candidate<br>GREGORY JOSEPH BRANNON               |             |                       | Office Sought: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose<br><input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NC |  |  |
| Calendar Year-To-Date<br>Per Election for Office Sought 142950.58 |             |                       | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶                                     |  |  |

  

|                                                                   |             |                       |                                                                                                                                                                                       |  |  |
|-------------------------------------------------------------------|-------------|-----------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|
| Full Name of Payee<br><b>Chris Gallaher</b>                       |             |                       | Date of Public Distribution/Dissemination<br>MM / DD / YYYY<br>05 / 01 / 2014                                                                                                         |  |  |
| Mailing Address 118 Butleight Ct.                                 |             |                       | Amount<br>5000.00                                                                                                                                                                     |  |  |
| City<br>Goodlettsville                                            | State<br>TN | Zip Code<br>87072     | Transaction ID : SE.26897                                                                                                                                                             |  |  |
| Purpose of Expenditure<br>IE-Bevin-Strategic Consulting           |             | Category/<br>Type 001 | Date of Disbursement or Obligation<br>MM / DD / YYYY<br>05 / 01 / 2014                                                                                                                |  |  |
| Name of Federal Candidate<br>MATTHEW GRISWOLD BEVIN               |             |                       | Office Sought: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose<br><input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: KY |  |  |
| Calendar Year-To-Date<br>Per Election for Office Sought 270544.78 |             |                       | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶                                     |  |  |

  

|                                                                    |         |
|--------------------------------------------------------------------|---------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶    | 5086.03 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶ |         |
| (c) <b>TOTAL</b> Independent Expenditures..... ▶                   |         |

  

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

R. Russ Walker

Signature \_\_\_\_\_

[Electronically Filed]

Date

MM / DD / YYYY  
06 / 20 / 2014



**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 177 OF 207  
 FOR LINE 24 OF FORM 3X

|                                                                                                                                                                              |  |                                                                                                                                                                                                                                                                                                              |  |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| NAME OF COMMITTEE (In Full)<br><b>FREEDOMWORKS FOR AMERICA</b>                                                                                                               |  | FEC IDENTIFICATION NUMBER ▼<br><b>C</b> C00499020                                                                                                                                                                                                                                                            |  |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on |  | <div style="border: 1px solid black; padding: 2px;"> <div style="display: flex; justify-content: space-between;"> <span>M M M</span> <span>D D D</span> <span>Y Y Y Y Y Y</span> </div> <div style="display: flex; justify-content: space-between;"> <span></span> <span></span> <span></span> </div> </div> |  |

|                                                           |             |                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |  |
|-----------------------------------------------------------|-------------|-----------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|
| Full Name of Payee<br><b>Google, Inc.</b>                 |             |                       | Date of Public Distribution/Dissemination<br><div style="border: 1px solid black; padding: 2px;"> <div style="display: flex; justify-content: space-between;"> <span>M M M</span> <span>D D D</span> <span>Y Y Y Y Y Y</span> </div> <div style="display: flex; justify-content: space-between;"> <span>04</span> <span>01</span> <span>2014</span> </div> </div>                                                                                 |  |  |
| Mailing Address<br>Department No. 33564<br>P.O. Box 39000 |             |                       | Amount<br><div style="border: 1px solid black; padding: 2px;"> <div style="display: flex; justify-content: space-between;"> <span></span> <span></span> <span></span> </div> <div style="display: flex; justify-content: space-between;"> <span></span> <span></span> <span>1703.70</span> </div> </div>                                                                                                                                          |  |  |
| City<br>San Francisco                                     | State<br>CA | Zip Code<br>94139     | Transaction ID : <b>SE.26929</b>                                                                                                                                                                                                                                                                                                                                                                                                                  |  |  |
| Purpose of Expenditure<br>IE-Joyce-Online Ads             |             | Category/<br>Type 004 | Date of Disbursement or Obligation<br><div style="border: 1px solid black; padding: 2px;"> <div style="display: flex; justify-content: space-between;"> <span>M M M</span> <span>D D D</span> <span>Y Y Y Y Y Y</span> </div> <div style="display: flex; justify-content: space-between;"> <span>05</span> <span>01</span> <span>2014</span> </div> </div>                                                                                        |  |  |
| Name of Federal Candidate<br>DAVID P JOYCE                |             |                       | <input type="checkbox"/> Support<br><input checked="" type="checkbox"/> Oppose<br>Office Sought: <input checked="" type="checkbox"/> House District: <u>14</u><br><input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>OH</u>                                                                                                                                                                                             |  |  |
| Calendar Year-To-Date<br>Per Election for Office Sought   |             |                       | <div style="border: 1px solid black; padding: 2px;"> <div style="display: flex; justify-content: space-between;"> <span></span> <span></span> <span></span> </div> <div style="display: flex; justify-content: space-between;"> <span></span> <span></span> <span>74824.62</span> </div> </div> Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶ |  |  |

|                                                           |             |                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |  |
|-----------------------------------------------------------|-------------|-----------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|
| Full Name of Payee<br><b>Google, Inc.</b>                 |             |                       | Date of Public Distribution/Dissemination<br><div style="border: 1px solid black; padding: 2px;"> <div style="display: flex; justify-content: space-between;"> <span>M M M</span> <span>D D D</span> <span>Y Y Y Y Y Y</span> </div> <div style="display: flex; justify-content: space-between;"> <span>05</span> <span>01</span> <span>2014</span> </div> </div>                                                                                 |  |  |
| Mailing Address<br>Department No. 33564<br>P.O. Box 39000 |             |                       | Amount<br><div style="border: 1px solid black; padding: 2px;"> <div style="display: flex; justify-content: space-between;"> <span></span> <span></span> <span></span> </div> <div style="display: flex; justify-content: space-between;"> <span></span> <span></span> <span>3407.41</span> </div> </div>                                                                                                                                          |  |  |
| City<br>San Francisco                                     | State<br>CA | Zip Code<br>94139     | Transaction ID : <b>SE.26930</b>                                                                                                                                                                                                                                                                                                                                                                                                                  |  |  |
| Purpose of Expenditure<br>IE-Lynch-Online Ads             |             | Category/<br>Type 004 | Date of Disbursement or Obligation<br><div style="border: 1px solid black; padding: 2px;"> <div style="display: flex; justify-content: space-between;"> <span>M M M</span> <span>D D D</span> <span>Y Y Y Y Y Y</span> </div> <div style="display: flex; justify-content: space-between;"> <span>05</span> <span>01</span> <span>2014</span> </div> </div>                                                                                        |  |  |
| Name of Federal Candidate<br>MATT LYNCH                   |             |                       | <input checked="" type="checkbox"/> Support<br><input type="checkbox"/> Oppose<br>Office Sought: <input checked="" type="checkbox"/> House District: <u>14</u><br><input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>OH</u>                                                                                                                                                                                             |  |  |
| Calendar Year-To-Date<br>Per Election for Office Sought   |             |                       | <div style="border: 1px solid black; padding: 2px;"> <div style="display: flex; justify-content: space-between;"> <span></span> <span></span> <span></span> </div> <div style="display: flex; justify-content: space-between;"> <span></span> <span></span> <span>78232.03</span> </div> </div> Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶ |  |  |

|                                                                   |                                                                                                                                                                                                                                    |
|-------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....▶    | <div style="display: flex; justify-content: space-between;"> <span></span> <span></span> <span></span> </div> <div style="display: flex; justify-content: space-between;"> <span></span> <span></span> <span>5111.11</span> </div> |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....▶ | <div style="display: flex; justify-content: space-between;"> <span></span> <span></span> <span></span> </div> <div style="display: flex; justify-content: space-between;"> <span></span> <span></span> <span></span> </div>        |
| (c) <b>TOTAL</b> Independent Expenditures.....▶                   | <div style="display: flex; justify-content: space-between;"> <span></span> <span></span> <span></span> </div> <div style="display: flex; justify-content: space-between;"> <span></span> <span></span> <span></span> </div>        |

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

R. Russ Walker

[Electronically Filed]

Date

M M M
D D D
Y Y Y Y Y Y

06
20
2014

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 178 OF 207  
 FOR LINE 24 OF FORM 3X

|                                                                                                                                                                                                                                                                                                                                             |  |                                                                                                                                                   |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|---------------------------------------------------------------------------------------------------------------------------------------------------|
| NAME OF COMMITTEE (In Full)<br><b>FREEDOMWORKS FOR AMERICA</b>                                                                                                                                                                                                                                                                              |  | <b>FEC IDENTIFICATION NUMBER ▼</b><br><div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00499020       </div> |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="float: right; text-align: right;"> <div style="border: 1px solid black; padding: 2px; display: inline-block;">M M / D D / Y Y Y Y Y Y</div> </div> |  |                                                                                                                                                   |

|                                                           |                      |                                                                                                                                                                                                                                                |                                                                                                                                       |
|-----------------------------------------------------------|----------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------|
| Full Name of Payee<br><b>Google, Inc.</b>                 |                      | Date of Public Distribution/Dissemination<br><div style="border: 1px solid black; padding: 2px; display: inline-block;">05 / 07 / 2014</div>                                                                                                   |                                                                                                                                       |
| Mailing Address<br>Department No. 33564<br>P.O. Box 39000 |                      | Amount<br><div style="border: 1px solid black; padding: 2px; display: inline-block;">5412.64</div>                                                                                                                                             |                                                                                                                                       |
| City<br>San Francisco                                     | State<br>CA          | Zip Code<br>94139                                                                                                                                                                                                                              | Transaction ID : <b>SE.27122</b>                                                                                                      |
| Purpose of Expenditure<br>IE-Sasse-Online Ads             | Category/Type<br>004 |                                                                                                                                                                                                                                                | Date of Disbursement or Obligation<br><div style="border: 1px solid black; padding: 2px; display: inline-block;">05 / 07 / 2014</div> |
| Name of Federal Candidate<br>BENJAMIN E SASSE             |                      | <input checked="" type="checkbox"/> Support    Office Sought: <input type="checkbox"/> House    District: 00<br><input type="checkbox"/> Oppose <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate    State: NE     |                                                                                                                                       |
| Calendar Year-To-Date<br>Per Election for Office Sought   |                      | <div style="border: 1px solid black; padding: 2px; display: inline-block;">65819.50</div><br>Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶ |                                                                                                                                       |

|                                                           |                      |                                                                                                                                                                                                                                                 |                                                                                                                                       |
|-----------------------------------------------------------|----------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------|
| Full Name of Payee<br><b>Google, Inc.</b>                 |                      | Date of Public Distribution/Dissemination<br><div style="border: 1px solid black; padding: 2px; display: inline-block;">05 / 08 / 2014</div>                                                                                                    |                                                                                                                                       |
| Mailing Address<br>Department No. 33564<br>P.O. Box 39000 |                      | Amount<br><div style="border: 1px solid black; padding: 2px; display: inline-block;">2499.90</div>                                                                                                                                              |                                                                                                                                       |
| City<br>San Francisco                                     | State<br>CA          | Zip Code<br>94139                                                                                                                                                                                                                               | Transaction ID : <b>SE.27136</b>                                                                                                      |
| Purpose of Expenditure<br>IE-McDaniel-Online Ads          | Category/Type<br>004 |                                                                                                                                                                                                                                                 | Date of Disbursement or Obligation<br><div style="border: 1px solid black; padding: 2px; display: inline-block;">05 / 08 / 2014</div> |
| Name of Federal Candidate<br>CHRISTOPHER BRIAN MCDANIEL   |                      | <input checked="" type="checkbox"/> Support    Office Sought: <input type="checkbox"/> House    District: 00<br><input type="checkbox"/> Oppose <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate    State: MS      |                                                                                                                                       |
| Calendar Year-To-Date<br>Per Election for Office Sought   |                      | <div style="border: 1px solid black; padding: 2px; display: inline-block;">217369.36</div><br>Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶ |                                                                                                                                       |

|                                                                    |                                                                                          |
|--------------------------------------------------------------------|------------------------------------------------------------------------------------------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶    | <div style="border: 1px solid black; padding: 2px; display: inline-block;">7912.54</div> |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶ | <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>        |
| (c) <b>TOTAL</b> Independent Expenditures..... ▶                   | <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>        |

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

R. Russ Walker

[Electronically Filed]

Date

06 / 20 / 2014

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 179 OF 207  
 FOR LINE 24 OF FORM 3X

|                                                                                                                                                                                                                                                                                                                                                                                         |                                                                                     |                                                                                                                                                                                                                                                                           |                                  |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------|
| NAME OF COMMITTEE (In Full)<br><b>FREEDOMWORKS FOR AMERICA</b>                                                                                                                                                                                                                                                                                                                          |                                                                                     | <b>FEC IDENTIFICATION NUMBER ▼</b><br><div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00499020       </div>                                                                                                                         |                                  |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 0 5px;">MM</span> / <span style="border: 1px solid black; padding: 0 5px;">DD</span> / <span style="border: 1px solid black; padding: 0 5px;">YYYYYY</span> |                                                                                     |                                                                                                                                                                                                                                                                           |                                  |
| Full Name of Payee<br><b>Google, Inc.</b>                                                                                                                                                                                                                                                                                                                                               |                                                                                     | Date of Public Distribution/Dissemination<br><span style="border: 1px solid black; padding: 0 5px;">MM</span> / <span style="border: 1px solid black; padding: 0 5px;">DD</span> / <span style="border: 1px solid black; padding: 0 5px;">YYYYYY</span><br>05 / 08 / 2014 |                                  |
| Mailing Address<br>Department No. 33564<br>P.O. Box 39000                                                                                                                                                                                                                                                                                                                               |                                                                                     | Amount<br><span style="border: 1px solid black; padding: 0 5px;">2499.90</span>                                                                                                                                                                                           |                                  |
| City<br>San Francisco                                                                                                                                                                                                                                                                                                                                                                   | State<br>CA                                                                         | Zip Code<br>94139                                                                                                                                                                                                                                                         | Transaction ID : <b>SE.27137</b> |
| Purpose of Expenditure<br>IE-Cochran-Online Ads                                                                                                                                                                                                                                                                                                                                         | Category/<br>Type <span style="border: 1px solid black; padding: 0 5px;">004</span> | Date of Disbursement or Obligation<br><span style="border: 1px solid black; padding: 0 5px;">MM</span> / <span style="border: 1px solid black; padding: 0 5px;">DD</span> / <span style="border: 1px solid black; padding: 0 5px;">YYYYYY</span><br>05 / 08 / 2014        |                                  |
| Name of Federal Candidate<br>THAD COCHRAN                                                                                                                                                                                                                                                                                                                                               |                                                                                     | <input type="checkbox"/> Support    Office Sought: <input type="checkbox"/> House    District: <u>00</u><br><input checked="" type="checkbox"/> Oppose <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate    State: <u>MS</u>                  |                                  |
| Calendar Year-To-Date<br>Per Election for Office Sought <span style="border: 1px solid black; padding: 0 5px;">219869.26</span>                                                                                                                                                                                                                                                         |                                                                                     | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶ _____                                                                                                                   |                                  |
| Full Name of Payee<br><b>Google, Inc.</b>                                                                                                                                                                                                                                                                                                                                               |                                                                                     | Date of Public Distribution/Dissemination<br><span style="border: 1px solid black; padding: 0 5px;">MM</span> / <span style="border: 1px solid black; padding: 0 5px;">DD</span> / <span style="border: 1px solid black; padding: 0 5px;">YYYYYY</span><br>05 / 08 / 2014 |                                  |
| Mailing Address<br>Department No. 33564<br>P.O. Box 39000                                                                                                                                                                                                                                                                                                                               |                                                                                     | Amount<br><span style="border: 1px solid black; padding: 0 5px;">6105.10</span>                                                                                                                                                                                           |                                  |
| City<br>San Francisco                                                                                                                                                                                                                                                                                                                                                                   | State<br>CA                                                                         | Zip Code<br>94139                                                                                                                                                                                                                                                         | Transaction ID : <b>SE.27142</b> |
| Purpose of Expenditure<br>IE-McDaniel-Online Ads                                                                                                                                                                                                                                                                                                                                        | Category/<br>Type <span style="border: 1px solid black; padding: 0 5px;">004</span> | Date of Disbursement or Obligation<br><span style="border: 1px solid black; padding: 0 5px;">MM</span> / <span style="border: 1px solid black; padding: 0 5px;">DD</span> / <span style="border: 1px solid black; padding: 0 5px;">YYYYYY</span><br>05 / 08 / 2014        |                                  |
| Name of Federal Candidate<br>CHRISTOPHER BRIAN MCDANIEL                                                                                                                                                                                                                                                                                                                                 |                                                                                     | <input checked="" type="checkbox"/> Support    Office Sought: <input type="checkbox"/> House    District: <u>00</u><br><input type="checkbox"/> Oppose <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate    State: <u>MS</u>                  |                                  |
| Calendar Year-To-Date<br>Per Election for Office Sought <span style="border: 1px solid black; padding: 0 5px;">241974.36</span>                                                                                                                                                                                                                                                         |                                                                                     | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶ _____                                                                                                                   |                                  |
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶                                                                                                                                                                                                                                                                                                                         |                                                                                     | <span style="border: 1px solid black; padding: 0 5px;">8605.00</span>                                                                                                                                                                                                     |                                  |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶                                                                                                                                                                                                                                                                                                                      |                                                                                     | <span style="border: 1px solid black; padding: 0 5px;"></span>                                                                                                                                                                                                            |                                  |
| (c) <b>TOTAL</b> Independent Expenditures..... ▶                                                                                                                                                                                                                                                                                                                                        |                                                                                     | <span style="border: 1px solid black; padding: 0 5px;"></span>                                                                                                                                                                                                            |                                  |
| 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.                             |                                                                                     |                                                                                                                                                                                                                                                                           |                                  |
| Signature <u>R. Russ Walker</u><br><div style="text-align: right;">[Electronically Filed]</div>                                                                                                                                                                                                                                                                                         |                                                                                     | Date <span style="border: 1px solid black; padding: 0 5px;">MM</span> / <span style="border: 1px solid black; padding: 0 5px;">DD</span> / <span style="border: 1px solid black; padding: 0 5px;">YYYYYY</span><br>06 / 20 / 2014                                         |                                  |

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 180 OF 207  
 FOR LINE 24 OF FORM 3X

|                                                                                                                                                                              |  |                                                                                                                                                                                                               |  |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| NAME OF COMMITTEE (In Full)<br><b>FREEDOMWORKS FOR AMERICA</b>                                                                                                               |  | FEC IDENTIFICATION NUMBER ▼<br><b>C</b> C00499020                                                                                                                                                             |  |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on |  | <div style="border: 1px solid black; padding: 2px;"> <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY</div> <div>MM / DD / YYYY</div> <div>MM / DD / YYYY</div> </div> </div> |  |

|                                                           |                      |                                                                                                                                                                                                                                         |                           |
|-----------------------------------------------------------|----------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------|
| Full Name of Payee<br><b>Google, Inc.</b>                 |                      | Date of Public Distribution/Dissemination<br>MM / DD / YYYY<br>05 / 08 / 2014                                                                                                                                                           |                           |
| Mailing Address<br>Department No. 33564<br>P.O. Box 39000 |                      | Amount<br>6105.10                                                                                                                                                                                                                       |                           |
| City<br>San Francisco                                     | State<br>CA          | Zip Code<br>94139                                                                                                                                                                                                                       | Transaction ID : SE.27143 |
| Purpose of Expenditure<br>IE-Cochran-Online Ads           | Category/Type<br>004 | Date of Disbursement or Obligation<br>MM / DD / YYYY<br>05 / 08 / 2014                                                                                                                                                                  |                           |
| Name of Federal Candidate<br>THAD COCHRAN                 |                      | <input type="checkbox"/> Support<br><input checked="" type="checkbox"/> Oppose<br>Office Sought: <input type="checkbox"/> House District: 00<br><input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: MS |                           |
| Calendar Year-To-Date<br>Per Election for Office Sought   |                      | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶                                                                                       |                           |

|                                                           |                      |                                                                                                                                                                                                                                         |                           |
|-----------------------------------------------------------|----------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------|
| Full Name of Payee<br><b>Google, Inc.</b>                 |                      | Date of Public Distribution/Dissemination<br>MM / DD / YYYY<br>05 / 09 / 2014                                                                                                                                                           |                           |
| Mailing Address<br>Department No. 33564<br>P.O. Box 39000 |                      | Amount<br>8000.00                                                                                                                                                                                                                       |                           |
| City<br>San Francisco                                     | State<br>CA          | Zip Code<br>94139                                                                                                                                                                                                                       | Transaction ID : SE.27166 |
| Purpose of Expenditure<br>IE-Birman-Online Ads            | Category/Type<br>004 | Date of Disbursement or Obligation<br>MM / DD / YYYY<br>05 / 09 / 2014                                                                                                                                                                  |                           |
| Name of Federal Candidate<br>IGOR A BIRMAN                |                      | <input checked="" type="checkbox"/> Support<br><input type="checkbox"/> Oppose<br>Office Sought: <input checked="" type="checkbox"/> House District: 07<br><input type="checkbox"/> President <input type="checkbox"/> Senate State: CA |                           |
| Calendar Year-To-Date<br>Per Election for Office Sought   |                      | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶                                                                                       |                           |

|                                                           |          |
|-----------------------------------------------------------|----------|
| (a) SUBTOTAL of Itemized Independent Expenditures.....▶   | 14105.10 |
| (b) SUBTOTAL of Unitemized Independent Expenditures.....▶ |          |
| (c) TOTAL Independent Expenditures.....▶                  |          |

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

R. Russ Walker

[Electronically Filed]

Date

 MM / DD / YYYY  
 06 / 20 / 2014

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 181 OF 207  
 FOR LINE 24 OF FORM 3X

|                                                                                                                                                                              |  |  |                                                                                                                                                   |  |  |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|---------------------------------------------------------------------------------------------------------------------------------------------------|--|--|
| NAME OF COMMITTEE (In Full)<br><b>FREEDOMWORKS FOR AMERICA</b>                                                                                                               |  |  | <b>FEC IDENTIFICATION NUMBER ▼</b><br><div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00499020       </div> |  |  |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on |  |  |                                                                                                                                                   |  |  |

  

|                                                                                                                                                      |             |                                                                                                        |                                                                                                                                                                                                              |  |  |
|------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|--------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|
| Full Name of Payee<br><b>Google, Inc.</b>                                                                                                            |             |                                                                                                        | Date of Public Distribution/Dissemination<br>MM / DD / YYYY<br>05 / 09 / 2014                                                                                                                                |  |  |
| Mailing Address<br>Department No. 33564<br>P.O. Box 39000                                                                                            |             |                                                                                                        | Amount<br><div style="border: 1px solid black; padding: 2px; display: inline-block;">8000.00</div>                                                                                                           |  |  |
| City<br>San Francisco                                                                                                                                | State<br>CA | Zip Code<br>94139                                                                                      | Transaction ID : <b>SE.27171</b>                                                                                                                                                                             |  |  |
| Purpose of Expenditure<br>IE-Loudermilk-Online Ads                                                                                                   |             | Category/<br>Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div> | Date of Disbursement or Obligation<br>MM / DD / YYYY<br>05 / 09 / 2014                                                                                                                                       |  |  |
| Name of Federal Candidate<br><b>BARRY LOUDERMILK</b>                                                                                                 |             |                                                                                                        | Office Sought: <input checked="" type="checkbox"/> House    District: <u>11</u><br><input type="checkbox"/> President <input type="checkbox"/> Senate    State: <u>GA</u><br><input type="checkbox"/> Oppose |  |  |
| Calendar Year-To-Date<br>Per Election for Office Sought<br><div style="border: 1px solid black; padding: 2px; display: inline-block;">10300.94</div> |             |                                                                                                        | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶                                                            |  |  |

  

|                                                                                                                                                      |             |                                                                                                        |                                                                                                                                                                                                                         |  |  |
|------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|--------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|
| Full Name of Payee<br><b>Google, Inc.</b>                                                                                                            |             |                                                                                                        | Date of Public Distribution/Dissemination<br>MM / DD / YYYY<br>05 / 10 / 2014                                                                                                                                           |  |  |
| Mailing Address<br>Department No. 33564<br>P.O. Box 39000                                                                                            |             |                                                                                                        | Amount<br><div style="border: 1px solid black; padding: 2px; display: inline-block;">900.00</div>                                                                                                                       |  |  |
| City<br>San Francisco                                                                                                                                | State<br>CA | Zip Code<br>94139                                                                                      | Transaction ID : <b>SE.27203</b>                                                                                                                                                                                        |  |  |
| Purpose of Expenditure<br>IE-Dinsdale-Online Ads                                                                                                     |             | Category/<br>Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div> | Date of Disbursement or Obligation<br>MM / DD / YYYY<br>05 / 10 / 2014                                                                                                                                                  |  |  |
| Name of Federal Candidate<br><b>SID DINSDALE</b>                                                                                                     |             |                                                                                                        | Office Sought: <input type="checkbox"/> House    District: <u>00</u><br><input type="checkbox"/> President <input checked="" type="checkbox"/> Senate    State: <u>NE</u><br><input checked="" type="checkbox"/> Oppose |  |  |
| Calendar Year-To-Date<br>Per Election for Office Sought<br><div style="border: 1px solid black; padding: 2px; display: inline-block;">73992.90</div> |             |                                                                                                        | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶                                                                       |  |  |

  

|                                                                    |                                                                                          |
|--------------------------------------------------------------------|------------------------------------------------------------------------------------------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶    | <div style="border: 1px solid black; padding: 2px; display: inline-block;">8900.00</div> |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶ | <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>        |
| (c) <b>TOTAL</b> Independent Expenditures..... ▶                   | <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>        |

  

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*R. Russ Walker*

Signature \_\_\_\_\_

*[Electronically Filed]*

Date 

MM / DD / YYYY

  
06 / 20 / 2014

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 182 OF 207  
 FOR LINE 24 OF FORM 3X

|                                                                                                                                                                              |  |                                                                                                                                                   |  |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|---------------------------------------------------------------------------------------------------------------------------------------------------|--|
| NAME OF COMMITTEE (In Full)<br><b>FREEDOMWORKS FOR AMERICA</b>                                                                                                               |  | FEC IDENTIFICATION NUMBER ▼<br><b>C</b> C00499020                                                                                                 |  |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on |  | <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY</div> <div>MM / DD / YYYY</div> <div>MM / DD / YYYY</div> </div> |  |

  

|                                                                            |                              |                                                                                                                                                                                                                                                       |                                  |
|----------------------------------------------------------------------------|------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------|
| Full Name of Payee<br><b>Google, Inc.</b>                                  |                              | Date of Public Distribution/Dissemination<br>MM / DD / YYYY<br><b>05 / 13 / 2014</b>                                                                                                                                                                  |                                  |
| Mailing Address<br>Department No. 33564<br>P.O. Box 39000                  |                              | Amount<br><b>87.83</b>                                                                                                                                                                                                                                |                                  |
| City<br>San Francisco                                                      | State<br>CA                  | Zip Code<br>94139                                                                                                                                                                                                                                     | Transaction ID : <b>SE.35452</b> |
| Purpose of Expenditure<br>IE-Dinsdale-Online Ads                           | Category/<br>Type <b>004</b> | Date of Disbursement or Obligation<br>MM / DD / YYYY<br><b>05 / 13 / 2014</b>                                                                                                                                                                         |                                  |
| Name of Federal Candidate<br>SID DINSDALE                                  |                              | <input type="checkbox"/> Support<br><input checked="" type="checkbox"/> Oppose<br>Office Sought: <input type="checkbox"/> House District: <b>00</b><br><input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <b>NE</b> |                                  |
| Calendar Year-To-Date<br>Per Election for Office Sought<br><b>74595.42</b> |                              | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶                                                                                                     |                                  |

  

|                                                                            |                              |                                                                                                                                                                                                                                                       |                                  |
|----------------------------------------------------------------------------|------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------|
| Full Name of Payee<br><b>Google, Inc.</b>                                  |                              | Date of Public Distribution/Dissemination<br>MM / DD / YYYY<br><b>05 / 16 / 2014</b>                                                                                                                                                                  |                                  |
| Mailing Address<br>Department No. 33564<br>P.O. Box 39000                  |                              | Amount<br><b>10500.00</b>                                                                                                                                                                                                                             |                                  |
| City<br>San Francisco                                                      | State<br>CA                  | Zip Code<br>94139                                                                                                                                                                                                                                     | Transaction ID : <b>SE.27243</b> |
| Purpose of Expenditure<br>IE-Mathis-Online Ads                             | Category/<br>Type <b>004</b> | Date of Disbursement or Obligation<br>MM / DD / YYYY<br><b>05 / 16 / 2014</b>                                                                                                                                                                         |                                  |
| Name of Federal Candidate<br>CHAD DR MATHIS                                |                              | <input checked="" type="checkbox"/> Support<br><input type="checkbox"/> Oppose<br>Office Sought: <input checked="" type="checkbox"/> House District: <b>06</b><br><input type="checkbox"/> President <input type="checkbox"/> Senate State: <b>AL</b> |                                  |
| Calendar Year-To-Date<br>Per Election for Office Sought<br><b>20022.13</b> |                              | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶                                                                                                     |                                  |

  

|                                                                    |                 |
|--------------------------------------------------------------------|-----------------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶    | <b>10587.83</b> |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶ |                 |
| (c) <b>TOTAL</b> Independent Expenditures..... ▶                   |                 |

  

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*R. Russ Walker*

Signature \_\_\_\_\_

[Electronically Filed]

Date

MM / DD / YYYY  
**06 / 20 / 2014**

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 183 OF 207  
 FOR LINE 24 OF FORM 3X

|                                                                                                                                                                              |  |                                                   |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|---------------------------------------------------|
| NAME OF COMMITTEE (In Full)<br><b>FREEDOMWORKS FOR AMERICA</b>                                                                                                               |  | FEC IDENTIFICATION NUMBER ▼<br><b>C</b> C00499020 |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on |  | MM / DD / YYYY                                    |

|                                                                            |                             |                                                                                                                                                                                                                                                       |
|----------------------------------------------------------------------------|-----------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Full Name of Payee<br><b>Google, Inc.</b>                                  |                             | Date of Public Distribution/Dissemination<br>MM / DD / YYYY<br><b>05 / 16 / 2014</b>                                                                                                                                                                  |
| Mailing Address<br>Department No. 33564<br>P.O. Box 39000                  |                             | Amount<br><b>8000.00</b>                                                                                                                                                                                                                              |
| City<br>San Francisco                                                      | State<br>CA                 | Zip Code<br>94139                                                                                                                                                                                                                                     |
| Purpose of Expenditure<br>IE-Schultz-Online Ads                            | Category/Type<br><b>004</b> | Transaction ID : <b>SE.27256</b><br>Date of Disbursement or Obligation<br>MM / DD / YYYY<br><b>05 / 16 / 2014</b>                                                                                                                                     |
| Name of Federal Candidate<br>MATTHEW DAVID SCHULTZ                         |                             | <input checked="" type="checkbox"/> Support<br><input type="checkbox"/> Oppose<br>Office Sought: <input checked="" type="checkbox"/> House District: <b>03</b><br><input type="checkbox"/> President <input type="checkbox"/> Senate State: <b>IA</b> |
| Calendar Year-To-Date<br>Per Election for Office Sought<br><b>10517.80</b> |                             | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶                                                                                                     |

|                                                                             |                             |                                                                                                                                                                                                                                                       |
|-----------------------------------------------------------------------------|-----------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Full Name of Payee<br><b>Google, Inc.</b>                                   |                             | Date of Public Distribution/Dissemination<br>MM / DD / YYYY<br><b>05 / 29 / 2014</b>                                                                                                                                                                  |
| Mailing Address<br>Department No. 33564<br>P.O. Box 39000                   |                             | Amount<br><b>9449.50</b>                                                                                                                                                                                                                              |
| City<br>San Francisco                                                       | State<br>CA                 | Zip Code<br>94139                                                                                                                                                                                                                                     |
| Purpose of Expenditure<br>IE-McDaniel-Online Ads                            | Category/Type<br><b>004</b> | Transaction ID : <b>SE.35521</b><br>Date of Disbursement or Obligation<br>MM / DD / YYYY<br><b>05 / 29 / 2014</b>                                                                                                                                     |
| Name of Federal Candidate<br>CHRISTOPHER BRIAN MCDANIEL                     |                             | <input checked="" type="checkbox"/> Support<br><input type="checkbox"/> Oppose<br>Office Sought: <input type="checkbox"/> House District: <b>00</b><br><input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <b>MS</b> |
| Calendar Year-To-Date<br>Per Election for Office Sought<br><b>274885.71</b> |                             | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶                                                                                                     |

|                                                           |                 |
|-----------------------------------------------------------|-----------------|
| (a) SUBTOTAL of Itemized Independent Expenditures.....▶   | <b>17449.50</b> |
| (b) SUBTOTAL of Unitemized Independent Expenditures.....▶ |                 |
| (c) TOTAL Independent Expenditures.....▶                  |                 |

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

R. Russ Walker

[Electronically Filed]

Date

MM / DD / YYYY  
**06 / 20 / 2014**

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 184 OF 207  
 FOR LINE 24 OF FORM 3X

|                                                                                                                                                                              |  |                                                                                                                                                                                                               |  |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| NAME OF COMMITTEE (In Full)<br><b>FREEDOMWORKS FOR AMERICA</b>                                                                                                               |  | FEC IDENTIFICATION NUMBER ▼<br><b>C</b> C00499020                                                                                                                                                             |  |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on |  | <div style="border: 1px solid black; padding: 2px;"> <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY</div> <div>MM / DD / YYYY</div> <div>MM / DD / YYYY</div> </div> </div> |  |

|                                                                             |             |                             |                                                                                                                                                                                                                                                       |  |  |
|-----------------------------------------------------------------------------|-------------|-----------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|
| Full Name of Payee<br><b>Google, Inc.</b>                                   |             |                             | Date of Public Distribution/Dissemination<br>MM / DD / YYYY<br><b>05 / 29 / 2014</b>                                                                                                                                                                  |  |  |
| Mailing Address<br>Department No. 33564<br>P.O. Box 39000                   |             |                             | Amount<br><b>9449.50</b>                                                                                                                                                                                                                              |  |  |
| City<br>San Francisco                                                       | State<br>CA | Zip Code<br>94139           | Transaction ID : <b>SE.35522</b>                                                                                                                                                                                                                      |  |  |
| Purpose of Expenditure<br>IE-Cochran-Online Ads                             |             | Category/Type<br><b>004</b> | Date of Disbursement or Obligation<br>MM / DD / YYYY<br><b>05 / 29 / 2014</b>                                                                                                                                                                         |  |  |
| Name of Federal Candidate<br>THAD COCHRAN                                   |             |                             | <input type="checkbox"/> Support<br><input checked="" type="checkbox"/> Oppose<br>Office Sought: <input type="checkbox"/> House District: <b>00</b><br><input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <b>MS</b> |  |  |
| Calendar Year-To-Date<br>Per Election for Office Sought<br><b>284335.21</b> |             |                             | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶                                                                                                     |  |  |

|                                                                             |             |                             |                                                                                                                                                                                                                                                       |  |  |
|-----------------------------------------------------------------------------|-------------|-----------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|
| Full Name of Payee<br><b>Google, Inc.</b>                                   |             |                             | Date of Public Distribution/Dissemination<br>MM / DD / YYYY<br><b>05 / 29 / 2014</b>                                                                                                                                                                  |  |  |
| Mailing Address<br>Department No. 33564<br>P.O. Box 39000                   |             |                             | Amount<br><b>6425.50</b>                                                                                                                                                                                                                              |  |  |
| City<br>San Francisco                                                       | State<br>CA | Zip Code<br>94139           | Transaction ID : <b>SE.35527</b>                                                                                                                                                                                                                      |  |  |
| Purpose of Expenditure<br>IE-McDaniel-Online Ads                            |             | Category/Type<br><b>004</b> | Date of Disbursement or Obligation<br>MM / DD / YYYY<br><b>05 / 29 / 2014</b>                                                                                                                                                                         |  |  |
| Name of Federal Candidate<br>CHRISTOPHER BRIAN MCDANIEL                     |             |                             | <input checked="" type="checkbox"/> Support<br><input type="checkbox"/> Oppose<br>Office Sought: <input type="checkbox"/> House District: <b>00</b><br><input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <b>MS</b> |  |  |
| Calendar Year-To-Date<br>Per Election for Office Sought<br><b>305760.71</b> |             |                             | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶                                                                                                     |  |  |

|                                                                    |                 |
|--------------------------------------------------------------------|-----------------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶    | <b>15875.00</b> |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶ |                 |
| (c) <b>TOTAL</b> Independent Expenditures..... ▶                   |                 |

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

R. Russ Walker

[Electronically Filed]

Date

 MM / DD / YYYY  
**06 / 20 / 2014**

Signature



**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 185 OF 207  
 FOR LINE 24 OF FORM 3X

|                                                                                                                                                                                                                                                                                                                                                                                         |                                                                                                       |                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                                                    |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| NAME OF COMMITTEE (In Full)<br><b>FREEDOMWORKS FOR AMERICA</b>                                                                                                                                                                                                                                                                                                                          |                                                                                                       | <b>FEC IDENTIFICATION NUMBER ▼</b><br><div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00499020       </div>                                                                                                                                                   |                                                                                                                                                                                                                                                                    |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 0 5px;">MM</span> / <span style="border: 1px solid black; padding: 0 5px;">DD</span> / <span style="border: 1px solid black; padding: 0 5px;">YYYYYY</span> |                                                                                                       |                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                                                    |
| Full Name of Payee<br><b>Google, Inc.</b>                                                                                                                                                                                                                                                                                                                                               |                                                                                                       | Date of Public Distribution/Dissemination<br><span style="border: 1px solid black; padding: 0 5px;">MM</span> / <span style="border: 1px solid black; padding: 0 5px;">DD</span> / <span style="border: 1px solid black; padding: 0 5px;">YYYYYY</span><br>05 / 29 / 2014                           |                                                                                                                                                                                                                                                                    |
| Mailing Address<br>Department No. 33564<br>P.O. Box 39000                                                                                                                                                                                                                                                                                                                               |                                                                                                       | Amount<br><div style="border: 1px solid black; padding: 2px; display: inline-block;">6425.50</div>                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                    |
| City<br>San Francisco                                                                                                                                                                                                                                                                                                                                                                   | State<br>CA                                                                                           | Zip Code<br>94139                                                                                                                                                                                                                                                                                   | Transaction ID : <b>SE.35528</b>                                                                                                                                                                                                                                   |
| Purpose of Expenditure<br>IE-Cochran-Online Ads                                                                                                                                                                                                                                                                                                                                         | Category/Type<br><div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div> |                                                                                                                                                                                                                                                                                                     | Date of Disbursement or Obligation<br><span style="border: 1px solid black; padding: 0 5px;">MM</span> / <span style="border: 1px solid black; padding: 0 5px;">DD</span> / <span style="border: 1px solid black; padding: 0 5px;">YYYYYY</span><br>05 / 29 / 2014 |
| Name of Federal Candidate<br>THAD COCHRAN                                                                                                                                                                                                                                                                                                                                               |                                                                                                       | <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose<br>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate    District: <u>00</u><br><input type="checkbox"/> President <input checked="" type="checkbox"/> Senate    State: <u>MS</u> |                                                                                                                                                                                                                                                                    |
| Calendar Year-To-Date<br>Per Election for Office Sought<br><div style="border: 1px solid black; padding: 2px; display: inline-block;">312186.21</div>                                                                                                                                                                                                                                   |                                                                                                       | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶ _____                                                                                                                                             |                                                                                                                                                                                                                                                                    |
| Full Name of Payee<br><b>Google, Inc.</b>                                                                                                                                                                                                                                                                                                                                               |                                                                                                       | Date of Public Distribution/Dissemination<br><span style="border: 1px solid black; padding: 0 5px;">MM</span> / <span style="border: 1px solid black; padding: 0 5px;">DD</span> / <span style="border: 1px solid black; padding: 0 5px;">YYYYYY</span><br>05 / 29 / 2014                           |                                                                                                                                                                                                                                                                    |
| Mailing Address<br>Department No. 33564<br>P.O. Box 39000                                                                                                                                                                                                                                                                                                                               |                                                                                                       | Amount<br><div style="border: 1px solid black; padding: 2px; display: inline-block;">6500.00</div>                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                    |
| City<br>San Francisco                                                                                                                                                                                                                                                                                                                                                                   | State<br>CA                                                                                           | Zip Code<br>94139                                                                                                                                                                                                                                                                                   | Transaction ID : <b>SE.35540</b>                                                                                                                                                                                                                                   |
| Purpose of Expenditure<br>IE-Mathis-Online Ads                                                                                                                                                                                                                                                                                                                                          | Category/Type<br><div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div> |                                                                                                                                                                                                                                                                                                     | Date of Disbursement or Obligation<br><span style="border: 1px solid black; padding: 0 5px;">MM</span> / <span style="border: 1px solid black; padding: 0 5px;">DD</span> / <span style="border: 1px solid black; padding: 0 5px;">YYYYYY</span><br>05 / 29 / 2014 |
| Name of Federal Candidate<br>CHAD DR MATHIS                                                                                                                                                                                                                                                                                                                                             |                                                                                                       | <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose<br>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate    District: <u>06</u><br><input type="checkbox"/> President <input type="checkbox"/> Senate    State: <u>AL</u>            |                                                                                                                                                                                                                                                                    |
| Calendar Year-To-Date<br>Per Election for Office Sought<br><div style="border: 1px solid black; padding: 2px; display: inline-block;">30383.43</div>                                                                                                                                                                                                                                    |                                                                                                       | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶ _____                                                                                                                                             |                                                                                                                                                                                                                                                                    |
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶                                                                                                                                                                                                                                                                                                                         |                                                                                                       | <div style="border: 1px solid black; padding: 2px; display: inline-block;">12925.50</div>                                                                                                                                                                                                           |                                                                                                                                                                                                                                                                    |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶                                                                                                                                                                                                                                                                                                                      |                                                                                                       | <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                    |
| (c) <b>TOTAL</b> Independent Expenditures..... ▶                                                                                                                                                                                                                                                                                                                                        |                                                                                                       | <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                    |
| Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.                             |                                                                                                       |                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                                                    |
| Signature <u>R. Russ Walker</u><br><div style="text-align: right;">[Electronically Filed]</div>                                                                                                                                                                                                                                                                                         |                                                                                                       | Date <span style="border: 1px solid black; padding: 0 5px;">MM</span> / <span style="border: 1px solid black; padding: 0 5px;">DD</span> / <span style="border: 1px solid black; padding: 0 5px;">YYYYYY</span><br>06 / 20 / 2014                                                                   |                                                                                                                                                                                                                                                                    |

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**PAGE 186 OF 207  
FOR LINE 24 OF FORM 3X

|                                                                                                                                                                                                                                                                                                                                                             |             |                                                                                      |                                                                                                                                                                     |  |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|--------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| NAME OF COMMITTEE (In Full)<br><b>FREEDOMWORKS FOR AMERICA</b>                                                                                                                                                                                                                                                                                              |             |                                                                                      | FEC IDENTIFICATION NUMBER ▼<br><b>C</b> C00499020                                                                                                                   |  |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on                                                                                                                                                                                |             |                                                                                      | MM / DD / YYYY                                                                                                                                                      |  |
| Full Name of Payee<br><b>Google, Inc.</b>                                                                                                                                                                                                                                                                                                                   |             | Date of Public Distribution/Dissemination<br>MM / DD / YYYY<br><b>05 / 31 / 2014</b> |                                                                                                                                                                     |  |
| Mailing Address<br>Department No. 33564<br>P.O. Box 39000                                                                                                                                                                                                                                                                                                   |             | Amount<br><b>1000.00</b>                                                             |                                                                                                                                                                     |  |
| City<br>San Francisco                                                                                                                                                                                                                                                                                                                                       | State<br>CA | Zip Code<br>94139                                                                    | Transaction ID : <b>SE.32541</b>                                                                                                                                    |  |
| Purpose of Expenditure<br>IE-McDaniel-Online Ads                                                                                                                                                                                                                                                                                                            |             | Category/<br>Type <b>004</b>                                                         | Date of Disbursement or Obligation<br>MM / DD / YYYY<br><b>05 / 31 / 2014</b>                                                                                       |  |
| Name of Federal Candidate<br><b>CHRISTOPHER BRIAN MCDANIEL</b>                                                                                                                                                                                                                                                                                              |             | <input checked="" type="checkbox"/> Support<br><input type="checkbox"/> Oppose       | Office Sought: <input type="checkbox"/> House District: <b>00</b><br><input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <b>MS</b> |  |
| Calendar Year-To-Date<br>Per Election for Office Sought                                                                                                                                                                                                                                                                                                     |             | <b>327078.28</b>                                                                     | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶                   |  |
| Full Name of Payee<br><b>Google, Inc.</b>                                                                                                                                                                                                                                                                                                                   |             | Date of Public Distribution/Dissemination<br>MM / DD / YYYY<br><b>05 / 31 / 2014</b> |                                                                                                                                                                     |  |
| Mailing Address<br>Department No. 33564<br>P.O. Box 39000                                                                                                                                                                                                                                                                                                   |             | Amount<br><b>1000.00</b>                                                             |                                                                                                                                                                     |  |
| City<br>San Francisco                                                                                                                                                                                                                                                                                                                                       | State<br>CA | Zip Code<br>94139                                                                    | Transaction ID : <b>SE.32542</b>                                                                                                                                    |  |
| Purpose of Expenditure<br>IE-Cochran-Online Ads                                                                                                                                                                                                                                                                                                             |             | Category/<br>Type <b>004</b>                                                         | Date of Disbursement or Obligation<br>MM / DD / YYYY<br><b>05 / 31 / 2014</b>                                                                                       |  |
| Name of Federal Candidate<br><b>THAD COCHRAN</b>                                                                                                                                                                                                                                                                                                            |             | <input type="checkbox"/> Support<br><input checked="" type="checkbox"/> Oppose       | Office Sought: <input type="checkbox"/> House District: <b>00</b><br><input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <b>MS</b> |  |
| Calendar Year-To-Date<br>Per Election for Office Sought                                                                                                                                                                                                                                                                                                     |             | <b>328078.28</b>                                                                     | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶                   |  |
| (a) SUBTOTAL of Itemized Independent Expenditures.....                                                                                                                                                                                                                                                                                                      |             | <b>2000.00</b>                                                                       |                                                                                                                                                                     |  |
| (b) SUBTOTAL of Unitemized Independent Expenditures .....                                                                                                                                                                                                                                                                                                   |             |                                                                                      |                                                                                                                                                                     |  |
| (c) TOTAL Independent Expenditures.....                                                                                                                                                                                                                                                                                                                     |             |                                                                                      |                                                                                                                                                                     |  |
| Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. |             |                                                                                      |                                                                                                                                                                     |  |
| Signature<br><br><i>R. Russ Walker</i>                                                                                                                                                                                                                                                                                                                      |             | Date<br>MM / DD / YYYY<br><b>06 / 20 / 2014</b>                                      |                                                                                                                                                                     |  |
| [Electronically Filed]                                                                                                                                                                                                                                                                                                                                      |             |                                                                                      |                                                                                                                                                                     |  |

|                                                          |                   |                                                                                |                                                                                                                                                       |
|----------------------------------------------------------|-------------------|--------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------|
| Full Name of Payee<br><b>Hampton Inn &amp; Suites-NC</b> |                   | Date of Public Distribution/Dissemination<br>MM / DD / YYYY<br>05 / 02 / 2014  |                                                                                                                                                       |
| Mailing Address<br>2731 Little Rock Rd.                  |                   | Amount<br>1097.16                                                              |                                                                                                                                                       |
| City<br>Charlotte                                        | State<br>NC       | Zip Code<br>28214                                                              | Transaction ID : <b>SE.26962</b>                                                                                                                      |
| Purpose of Expenditure<br>IE-Brannn-Travel               | Category/<br>Type | 002                                                                            | Date of Disbursement or Obligation<br>MM / DD / YYYY<br>05 / 02 / 2014                                                                                |
| Name of Federal Candidate<br>GREGORY JOSEPH BRANNON      |                   | <input checked="" type="checkbox"/> Support<br><input type="checkbox"/> Oppose | Office Sought: <input type="checkbox"/> House District: 00<br><input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NC |
| Calendar Year-To-Date<br>Per Election for Office Sought  | 139101.14         |                                                                                | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ►          |

|                                                                  |   |         |
|------------------------------------------------------------------|---|---------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....    | ▶ | 1148.44 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... | ▶ |         |
| (c) <b>TOTAL</b> Independent Expenditures.....                   | ▶ |         |

|                                                          |                                                                                |                                                                                                    |                                                                                 |
|----------------------------------------------------------|--------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------|
| Full Name of Payee<br><b>Hampton Inn &amp; Suites-NC</b> |                                                                                | Date of Public Distribution/Dissemination<br>MM / DD / YYYY<br>05 / 06 / 2014                      |                                                                                 |
| Mailing Address<br>2731 Little Rock Rd.                  |                                                                                | Amount<br>6.04                                                                                     |                                                                                 |
| City<br>Charlotte                                        | State<br>NC                                                                    | Zip Code<br>28214                                                                                  | Transaction ID : <b>SE.35442</b>                                                |
| Purpose of Expenditure<br>IE-Brannon-Travel              | Category/<br>Type                                                              | 002                                                                                                | Date of Disbursement or Obligation<br>MM / DD / YYYY<br>05 / 06 / 2014          |
| Name of Federal Candidate<br>GREGORY JOSEPH BRANNON      | <input checked="" type="checkbox"/> Support<br><input type="checkbox"/> Oppose | Office Sought:<br><input type="checkbox"/> President<br><input checked="" type="checkbox"/> Senate | District: 00<br>State: NC                                                       |
| Calendar Year-To-Date<br>Per Election for Office Sought  | 148761.31                                                                      | Disbursement For:<br>2014<br><input type="checkbox"/> Other (specify) ▶                            | <input checked="" type="checkbox"/> Primary<br><input type="checkbox"/> General |

|                                                                  |   |        |
|------------------------------------------------------------------|---|--------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....    | ▶ | 168.01 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... | ▶ |        |
| (c) <b>TOTAL</b> Independent Expenditures.....                   | ▶ |        |

FEC Schedule E (Form 3X) Rev. 09/2013

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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 FOR LINE 24 OF FORM 3X

|                                                                                                                                                                                                                                                                                                                                                                                 |                    |                                                                                  |                                                                                                                                                                                                                                                                          |  |  |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------|----------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|
| NAME OF COMMITTEE (In Full)<br><b>FREEDOMWORKS FOR AMERICA</b>                                                                                                                                                                                                                                                                                                                  |                    |                                                                                  | FEC IDENTIFICATION NUMBER ▼<br><b>C</b> C00499020                                                                                                                                                                                                                        |  |  |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">MM</span> / <span style="border: 1px solid black; padding: 2px;">DD</span> / <span style="border: 1px solid black; padding: 2px;">YYYY</span> |                    |                                                                                  |                                                                                                                                                                                                                                                                          |  |  |
| Full Name of Payee<br><b>Harris Teeter</b>                                                                                                                                                                                                                                                                                                                                      |                    |                                                                                  | Date of Public Distribution/Dissemination<br><span style="border: 1px solid black; padding: 2px;">MM</span> / <span style="border: 1px solid black; padding: 2px;">DD</span> / <span style="border: 1px solid black; padding: 2px;">YYYY</span><br><b>05 / 03 / 2014</b> |  |  |
| Mailing Address<br><b>7852 Rea Rd.</b>                                                                                                                                                                                                                                                                                                                                          |                    |                                                                                  | Amount<br><span style="border: 1px solid black; padding: 2px;">40.26</span>                                                                                                                                                                                              |  |  |
| City<br><b>Charlotte</b>                                                                                                                                                                                                                                                                                                                                                        | State<br><b>NC</b> | Zip Code<br><b>82877</b>                                                         | Transaction ID : <b>SE.26990</b>                                                                                                                                                                                                                                         |  |  |
| Purpose of Expenditure<br><b>IE-Brannon-Food/Beverage</b>                                                                                                                                                                                                                                                                                                                       |                    | Category/Type<br><span style="border: 1px solid black; padding: 2px;">002</span> | Date of Disbursement or Obligation<br><span style="border: 1px solid black; padding: 2px;">MM</span> / <span style="border: 1px solid black; padding: 2px;">DD</span> / <span style="border: 1px solid black; padding: 2px;">YYYY</span><br><b>05 / 03 / 2014</b>        |  |  |
| Name of Federal Candidate<br><b>GREGORY JOSEPH BRANNON</b>                                                                                                                                                                                                                                                                                                                      |                    |                                                                                  | Office Sought: <input type="checkbox"/> House District: <b>00</b><br><input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <b>NC</b><br><input type="checkbox"/> Oppose                                                                   |  |  |
| Calendar Year-To-Date Per Election for Office Sought<br><span style="border: 1px solid black; padding: 2px;">142542.69</span>                                                                                                                                                                                                                                                   |                    |                                                                                  | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶                                                                                                                        |  |  |
| Full Name of Payee<br><b>Hotels.com</b>                                                                                                                                                                                                                                                                                                                                         |                    |                                                                                  | Date of Public Distribution/Dissemination<br><span style="border: 1px solid black; padding: 2px;">MM</span> / <span style="border: 1px solid black; padding: 2px;">DD</span> / <span style="border: 1px solid black; padding: 2px;">YYYY</span><br><b>05 / 05 / 2014</b> |  |  |
| Mailing Address<br><b>5400 LBJ Freeway<br/>Ste. 500</b>                                                                                                                                                                                                                                                                                                                         |                    |                                                                                  | Amount<br><span style="border: 1px solid black; padding: 2px;">161.97</span>                                                                                                                                                                                             |  |  |
| City<br><b>Dallas</b>                                                                                                                                                                                                                                                                                                                                                           | State<br><b>TX</b> | Zip Code<br><b>75240</b>                                                         | Transaction ID : <b>SE.27058</b>                                                                                                                                                                                                                                         |  |  |
| Purpose of Expenditure<br><b>IE-Brannon-Travel</b>                                                                                                                                                                                                                                                                                                                              |                    | Category/Type<br><span style="border: 1px solid black; padding: 2px;">002</span> | Date of Disbursement or Obligation<br><span style="border: 1px solid black; padding: 2px;">MM</span> / <span style="border: 1px solid black; padding: 2px;">DD</span> / <span style="border: 1px solid black; padding: 2px;">YYYY</span><br><b>05 / 05 / 2014</b>        |  |  |
| Name of Federal Candidate<br><b>GREGORY JOSEPH BRANNON</b>                                                                                                                                                                                                                                                                                                                      |                    |                                                                                  | Office Sought: <input type="checkbox"/> House District: <b>00</b><br><input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <b>NC</b><br><input type="checkbox"/> Oppose                                                                   |  |  |
| Calendar Year-To-Date Per Election for Office Sought<br><span style="border: 1px solid black; padding: 2px;">143584.02</span>                                                                                                                                                                                                                                                   |                    |                                                                                  | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶                                                                                                                        |  |  |
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶                                                                                                                                                                                                                                                                                                                 |                    |                                                                                  | <span style="border: 1px solid black; padding: 2px;">202.23</span>                                                                                                                                                                                                       |  |  |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶                                                                                                                                                                                                                                                                                                              |                    |                                                                                  | <span style="border: 1px solid black; padding: 2px;"></span>                                                                                                                                                                                                             |  |  |
| (c) <b>TOTAL</b> Independent Expenditures..... ▶                                                                                                                                                                                                                                                                                                                                |                    |                                                                                  | <span style="border: 1px solid black; padding: 2px;"></span>                                                                                                                                                                                                             |  |  |
| 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.                     |                    |                                                                                  |                                                                                                                                                                                                                                                                          |  |  |
| Signature <u>R. Russ Walker</u>                                                                                                                                                                                                                                                                                                                                                 |                    |                                                                                  | Date <span style="border: 1px solid black; padding: 2px;">MM</span> / <span style="border: 1px solid black; padding: 2px;">DD</span> / <span style="border: 1px solid black; padding: 2px;">YYYY</span><br><b>06 / 20 / 2014</b>                                         |  |  |

[Electronically Filed]

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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|                                                                                                                                                                                                                                                                                                                                                                                 |  |                                                                                  |                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                            |                                  |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|----------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------|
| NAME OF COMMITTEE (In Full)<br><b>FREEDOMWORKS FOR AMERICA</b>                                                                                                                                                                                                                                                                                                                  |  |                                                                                  | FEC IDENTIFICATION NUMBER ▼<br><b>C</b> C00499020                                                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                            |                                  |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">MM</span> / <span style="border: 1px solid black; padding: 2px;">DD</span> / <span style="border: 1px solid black; padding: 2px;">YYYY</span> |  |                                                                                  |                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                            |                                  |
| Full Name of Payee<br><b>Hotels.com</b>                                                                                                                                                                                                                                                                                                                                         |  |                                                                                  | Date of Public Distribution/Dissemination<br><span style="border: 1px solid black; padding: 2px;">MM</span> / <span style="border: 1px solid black; padding: 2px;">DD</span> / <span style="border: 1px solid black; padding: 2px;">YYYY</span><br>05 / 05 / 2014                                                        |                                                                                                                                                                                                                                                            |                                  |
| Mailing Address<br>5400 LBJ Freeway<br>Ste. 500                                                                                                                                                                                                                                                                                                                                 |  |                                                                                  | Amount<br><span style="border: 1px solid black; padding: 2px;">161.97</span>                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                            |                                  |
| City<br>Dallas                                                                                                                                                                                                                                                                                                                                                                  |  | State<br>TX                                                                      | Zip Code<br>75240                                                                                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                            | Transaction ID : <b>SE.27060</b> |
| Purpose of Expenditure<br>IE-Brannon-Travel                                                                                                                                                                                                                                                                                                                                     |  | Category/Type<br><span style="border: 1px solid black; padding: 2px;">005</span> |                                                                                                                                                                                                                                                                                                                          | Date of Disbursement or Obligation<br><span style="border: 1px solid black; padding: 2px;">MM</span> / <span style="border: 1px solid black; padding: 2px;">DD</span> / <span style="border: 1px solid black; padding: 2px;">YYYY</span><br>05 / 05 / 2014 |                                  |
| Name of Federal Candidate<br>GREGORY JOSEPH BRANNON                                                                                                                                                                                                                                                                                                                             |  |                                                                                  | <input checked="" type="checkbox"/> Support<br><input type="checkbox"/> Oppose                                                                                                                                                                                                                                           |                                                                                                                                                                                                                                                            |                                  |
| Calendar Year-To-Date<br>Per Election for Office Sought<br><span style="border: 1px solid black; padding: 2px;">143916.99</span>                                                                                                                                                                                                                                                |  |                                                                                  | Office Sought: <input type="checkbox"/> House District: <u>00</u><br><input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>NC</u><br>Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶ |                                                                                                                                                                                                                                                            |                                  |
| Full Name of Payee<br><b>Kangaroo Express-NC</b>                                                                                                                                                                                                                                                                                                                                |  |                                                                                  | Date of Public Distribution/Dissemination<br><span style="border: 1px solid black; padding: 2px;">MM</span> / <span style="border: 1px solid black; padding: 2px;">DD</span> / <span style="border: 1px solid black; padding: 2px;">YYYY</span><br>05 / 05 / 2014                                                        |                                                                                                                                                                                                                                                            |                                  |
| Mailing Address<br>935 Charlottetown                                                                                                                                                                                                                                                                                                                                            |  |                                                                                  | Amount<br><span style="border: 1px solid black; padding: 2px;">62.76</span>                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                            |                                  |
| City<br>Charlotte                                                                                                                                                                                                                                                                                                                                                               |  | State<br>NC                                                                      | Zip Code                                                                                                                                                                                                                                                                                                                 |                                                                                                                                                                                                                                                            | Transaction ID : <b>SE.27076</b> |
| Purpose of Expenditure<br>IE-Brannon-Travel                                                                                                                                                                                                                                                                                                                                     |  | Category/Type<br><span style="border: 1px solid black; padding: 2px;">002</span> |                                                                                                                                                                                                                                                                                                                          | Date of Disbursement or Obligation<br><span style="border: 1px solid black; padding: 2px;">MM</span> / <span style="border: 1px solid black; padding: 2px;">DD</span> / <span style="border: 1px solid black; padding: 2px;">YYYY</span><br>05 / 05 / 2014 |                                  |
| Name of Federal Candidate<br>GREGORY JOSEPH BRANNON                                                                                                                                                                                                                                                                                                                             |  |                                                                                  | <input checked="" type="checkbox"/> Support<br><input type="checkbox"/> Oppose                                                                                                                                                                                                                                           |                                                                                                                                                                                                                                                            |                                  |
| Calendar Year-To-Date<br>Per Election for Office Sought<br><span style="border: 1px solid black; padding: 2px;">144238.84</span>                                                                                                                                                                                                                                                |  |                                                                                  | Office Sought: <input type="checkbox"/> House District: <u>00</u><br><input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>NC</u><br>Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶ |                                                                                                                                                                                                                                                            |                                  |
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶                                                                                                                                                                                                                                                                                                                 |  |                                                                                  | <span style="border: 1px solid black; padding: 2px;">224.73</span>                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                            |                                  |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶                                                                                                                                                                                                                                                                                                              |  |                                                                                  | <span style="border: 1px solid black; padding: 2px;"></span>                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                            |                                  |
| (c) <b>TOTAL</b> Independent Expenditures..... ▶                                                                                                                                                                                                                                                                                                                                |  |                                                                                  | <span style="border: 1px solid black; padding: 2px;"></span>                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                            |                                  |
| 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.                     |  |                                                                                  |                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                            |                                  |
| Signature<br><br><i>R. Russ Walker</i>                                                                                                                                                                                                                                                                                                                                          |  |                                                                                  | Date <span style="border: 1px solid black; padding: 2px;">MM</span> / <span style="border: 1px solid black; padding: 2px;">DD</span> / <span style="border: 1px solid black; padding: 2px;">YYYY</span><br>06 / 20 / 2014                                                                                                |                                                                                                                                                                                                                                                            |                                  |

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**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**PAGE 191 OF 207  
FOR LINE 24 OF FORM 3X

|                                                                                                                                                                                                                                                                                                                                                             |                    |                                                                                                                                                   |                                                                                                                                                                     |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------|---------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| NAME OF COMMITTEE (In Full)<br><b>FREEDOMWORKS FOR AMERICA</b>                                                                                                                                                                                                                                                                                              |                    | FEC IDENTIFICATION NUMBER ▼<br><b>C</b> C00499020                                                                                                 |                                                                                                                                                                     |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on                                                                                                                                                                                |                    | M M M / D D D / Y Y Y Y Y Y                                                                                                                       |                                                                                                                                                                     |
| Full Name of Payee<br><b>Robert Malt</b>                                                                                                                                                                                                                                                                                                                    |                    | Date of Public Distribution/Dissemination<br>M M M / D D D / Y Y Y Y Y Y<br><b>05 / 05 / 2014</b>                                                 |                                                                                                                                                                     |
| Mailing Address<br><b>2161 Hendersonville Rd.</b>                                                                                                                                                                                                                                                                                                           |                    | Amount<br><b>70.81</b>                                                                                                                            |                                                                                                                                                                     |
| City<br><b>Arden</b>                                                                                                                                                                                                                                                                                                                                        | State<br><b>NC</b> | Zip Code<br><b>28704</b>                                                                                                                          | Transaction ID : <b>SE.27090</b>                                                                                                                                    |
| Purpose of Expenditure<br><b>IE-Brannon-Travel</b>                                                                                                                                                                                                                                                                                                          |                    | Category/Type<br><b>002</b>                                                                                                                       | Date of Disbursement or Obligation<br>M M M / D D D / Y Y Y Y Y Y<br><b>05 / 05 / 2014</b>                                                                          |
| Name of Federal Candidate<br><b>GREGORY JOSEPH BRANNON</b>                                                                                                                                                                                                                                                                                                  |                    | <input checked="" type="checkbox"/> Support<br><input type="checkbox"/> Oppose                                                                    | Office Sought: <input type="checkbox"/> House District: <b>00</b><br><input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <b>NC</b> |
| Calendar Year-To-Date<br>Per Election for Office Sought<br><b>146287.44</b>                                                                                                                                                                                                                                                                                 |                    | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶ |                                                                                                                                                                     |
| Full Name of Payee<br><b>Maria-s Mexican</b>                                                                                                                                                                                                                                                                                                                |                    | Date of Public Distribution/Dissemination<br>M M M / D D D / Y Y Y Y Y Y<br><b>05 / 05 / 2014</b>                                                 |                                                                                                                                                                     |
| Mailing Address<br><b>5234 South Blvd</b>                                                                                                                                                                                                                                                                                                                   |                    | Amount<br><b>96.29</b>                                                                                                                            |                                                                                                                                                                     |
| City<br><b>Charlotte</b>                                                                                                                                                                                                                                                                                                                                    | State<br><b>NC</b> | Zip Code<br><b>28217</b>                                                                                                                          | Transaction ID : <b>SE.27088</b>                                                                                                                                    |
| Purpose of Expenditure<br><b>IE-Brannon-Travel</b>                                                                                                                                                                                                                                                                                                          |                    | Category/Type<br><b>002</b>                                                                                                                       | Date of Disbursement or Obligation<br>M M M / D D D / Y Y Y Y Y Y<br><b>05 / 05 / 2014</b>                                                                          |
| Name of Federal Candidate<br><b>GREGORY JOSEPH BRANNON</b>                                                                                                                                                                                                                                                                                                  |                    | <input checked="" type="checkbox"/> Support<br><input type="checkbox"/> Oppose                                                                    | Office Sought: <input type="checkbox"/> House District: <b>00</b><br><input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <b>NC</b> |
| Calendar Year-To-Date<br>Per Election for Office Sought<br><b>146216.63</b>                                                                                                                                                                                                                                                                                 |                    | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶ |                                                                                                                                                                     |
| (a) SUBTOTAL of Itemized Independent Expenditures..... ▶                                                                                                                                                                                                                                                                                                    |                    | <b>167.10</b>                                                                                                                                     |                                                                                                                                                                     |
| (b) SUBTOTAL of Unitemized Independent Expenditures ..... ▶                                                                                                                                                                                                                                                                                                 |                    |                                                                                                                                                   |                                                                                                                                                                     |
| (c) TOTAL Independent Expenditures..... ▶                                                                                                                                                                                                                                                                                                                   |                    |                                                                                                                                                   |                                                                                                                                                                     |
| Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. |                    |                                                                                                                                                   |                                                                                                                                                                     |
| Signature<br><b>R. Russ Walker</b>                                                                                                                                                                                                                                                                                                                          |                    | Date<br>M M M / D D D / Y Y Y Y Y Y<br><b>06 / 20 / 2014</b>                                                                                      |                                                                                                                                                                     |
|                                                                                                                                                                                                                                                                                                                                                             |                    | [Electronically Filed]                                                                                                                            |                                                                                                                                                                     |

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**PAGE 192 OF 207  
FOR LINE 24 OF FORM 3X

|                                                                                                                                                                                                                                                                                                                                                             |  |                                                                                                                                                                                      |                                                                                                                                                                                          |  |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| NAME OF COMMITTEE (In Full)<br><b>FREEDOMWORKS FOR AMERICA</b>                                                                                                                                                                                                                                                                                              |  |                                                                                                                                                                                      | <b>FEC IDENTIFICATION NUMBER ▼</b><br><div style="border: 1px solid black; padding: 2px; display: inline-block;"><b>C</b> C00499020</div>                                                |  |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M / D D / Y Y Y Y Y Y</div>                                                        |  |                                                                                                                                                                                      |                                                                                                                                                                                          |  |
| Full Name of Payee<br><b>Mungo, LLC</b>                                                                                                                                                                                                                                                                                                                     |  |                                                                                                                                                                                      | Date of Public Distribution/Dissemination<br><div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">05 / 06 / 2014</div>                              |  |
| Mailing Address<br>625 Clay St E                                                                                                                                                                                                                                                                                                                            |  |                                                                                                                                                                                      | Amount<br><div style="border: 1px solid black; padding: 2px; display: inline-block;">1950.00</div>                                                                                       |  |
| City<br>Monmouth                                                                                                                                                                                                                                                                                                                                            |  | State<br>OR                                                                                                                                                                          | Zip Code<br>97361                                                                                                                                                                        |  |
| Purpose of Expenditure<br>IE-Smith-Yard Signs                                                                                                                                                                                                                                                                                                               |  | Category/<br>Type                                                                                                                                                                    | Transaction ID : <b>SE.27115</b><br>Date of Disbursement or Obligation<br><div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">05 / 06 / 2014</div> |  |
| Name of Federal Candidate<br>BRYAN SMITH                                                                                                                                                                                                                                                                                                                    |  | <input checked="" type="checkbox"/> Support<br><input type="checkbox"/> Oppose                                                                                                       | Office Sought: <input checked="" type="checkbox"/> House    District: <u>02</u><br><input type="checkbox"/> President <input type="checkbox"/> Senate    State: <u>ID</u>                |  |
| Calendar Year-To-Date<br>Per Election for Office Sought<br><div style="border: 1px solid black; padding: 2px; display: inline-block;">30496.94</div>                                                                                                                                                                                                        |  |                                                                                                                                                                                      | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶                                        |  |
| Full Name of Payee<br><b>Mungo, LLC</b>                                                                                                                                                                                                                                                                                                                     |  |                                                                                                                                                                                      | Date of Public Distribution/Dissemination<br><div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">05 / 06 / 2014</div>                              |  |
| Mailing Address<br>625 Clay St E                                                                                                                                                                                                                                                                                                                            |  |                                                                                                                                                                                      | Amount<br><div style="border: 1px solid black; padding: 2px; display: inline-block;">3252.00</div>                                                                                       |  |
| City<br>Monmouth                                                                                                                                                                                                                                                                                                                                            |  | State<br>OR                                                                                                                                                                          | Zip Code<br>97361                                                                                                                                                                        |  |
| Purpose of Expenditure<br>IE-McDaniel-Door Hangers/Bumper Stickers                                                                                                                                                                                                                                                                                          |  | Category/<br>Type                                                                                                                                                                    | Transaction ID : <b>SE.27129</b><br>Date of Disbursement or Obligation<br><div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">05 / 06 / 2014</div> |  |
| Name of Federal Candidate<br>CHRISTOPHER BRIAN MCDANIEL                                                                                                                                                                                                                                                                                                     |  | <input checked="" type="checkbox"/> Support<br><input type="checkbox"/> Oppose                                                                                                       | Office Sought: <input type="checkbox"/> House    District: <u>00</u><br><input type="checkbox"/> President <input checked="" type="checkbox"/> Senate    State: <u>MS</u>                |  |
| Calendar Year-To-Date<br>Per Election for Office Sought<br><div style="border: 1px solid black; padding: 2px; display: inline-block;">196508.28</div>                                                                                                                                                                                                       |  |                                                                                                                                                                                      | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶                                        |  |
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶                                                                                                                                                                                                                                                                                             |  |                                                                                                                                                                                      | <div style="border: 1px solid black; padding: 2px; display: inline-block;">5202.00</div>                                                                                                 |  |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶                                                                                                                                                                                                                                                                                          |  |                                                                                                                                                                                      | <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>                                                                                                        |  |
| (c) <b>TOTAL</b> Independent Expenditures..... ▶                                                                                                                                                                                                                                                                                                            |  |                                                                                                                                                                                      | <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>                                                                                                        |  |
| Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. |  |                                                                                                                                                                                      |                                                                                                                                                                                          |  |
| Signature<br><br><i>R. Russ Walker</i>                                                                                                                                                                                                                                                                                                                      |  | Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">06 / 20 / 2014</div><br><div style="text-align: center;">[Electronically Filed]</div> |                                                                                                                                                                                          |  |



**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 193 OF 207  
 FOR LINE 24 OF FORM 3X

|                                                                                                                                                                              |  |                                                   |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|---------------------------------------------------|
| NAME OF COMMITTEE (In Full)<br><b>FREEDOMWORKS FOR AMERICA</b>                                                                                                               |  | FEC IDENTIFICATION NUMBER ▼<br><b>C</b> C00499020 |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on |  | MM / DD / YYYY                                    |

|                                                                     |                      |                                                                                                                                                                                       |
|---------------------------------------------------------------------|----------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Full Name of Payee<br><b>News Distribution Network</b>              |                      | Date of Public Distribution/Dissemination<br>MM / DD / YYYY<br>05 / 05 / 2014                                                                                                         |
| Mailing Address<br>3280 Peachtree Rd. NE<br>Suite 2000              |                      | Amount<br>6300.00                                                                                                                                                                     |
| City<br>Atlanta                                                     | State<br>GA          | Zip Code<br>30305                                                                                                                                                                     |
| Purpose of Expenditure<br>IE-Sasse-Online Ads                       | Category/Type<br>004 | Transaction ID : SE.27053<br>Date of Disbursement or Obligation<br>MM / DD / YYYY<br>05 / 05 / 2014                                                                                   |
| Name of Federal Candidate<br>BENJAMIN E SASSE                       |                      | Office Sought: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose<br><input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NE |
| Calendar Year-To-Date<br>Per Election for Office Sought<br>50656.86 |                      | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶                                     |

|                                                                      |                      |                                                                                                                                                                                       |
|----------------------------------------------------------------------|----------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Full Name of Payee<br><b>News Distribution Network</b>               |                      | Date of Public Distribution/Dissemination<br>MM / DD / YYYY<br>05 / 09 / 2014                                                                                                         |
| Mailing Address<br>3280 Peachtree Rd. NE<br>Suite 2000               |                      | Amount<br>4645.00                                                                                                                                                                     |
| City<br>Atlanta                                                      | State<br>GA          | Zip Code<br>30305                                                                                                                                                                     |
| Purpose of Expenditure<br>IE-McDaniel-Online Ads                     | Category/Type<br>004 | Transaction ID : SE.27222<br>Date of Disbursement or Obligation<br>MM / DD / YYYY<br>05 / 09 / 2014                                                                                   |
| Name of Federal Candidate<br>CHRISTOPHER BRIAN MCDANIEL              |                      | Office Sought: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose<br><input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: MS |
| Calendar Year-To-Date<br>Per Election for Office Sought<br>252928.39 |                      | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶                                     |

|                                                           |          |
|-----------------------------------------------------------|----------|
| (a) SUBTOTAL of Itemized Independent Expenditures.....▶   | 10945.00 |
| (b) SUBTOTAL of Unitemized Independent Expenditures.....▶ |          |
| (c) TOTAL Independent Expenditures.....▶                  |          |

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

R. Russ Walker

[Electronically Filed]

Date

MM / DD / YYYY  
06 / 20 / 2014

Signature

|                                                         |             |                                                                                |                                                                                                                                                       |
|---------------------------------------------------------|-------------|--------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------|
| Full Name of Payee<br><b>Odd Lamps, LLC</b>             |             | Date of Public Distribution/Dissemination<br>MM / DD / YYYY<br>05 / 01 / 2014  |                                                                                                                                                       |
| Mailing Address<br>12076 92nd Ave N                     |             | Amount<br>2500.00                                                              |                                                                                                                                                       |
| City<br>Maple Grove                                     | State<br>MN | Zip Code<br>55369                                                              | Transaction ID : <b>SE.26922</b><br>Date of Disbursement or Obligation<br>MM / DD / YYYY<br>05 / 01 / 2014                                            |
| Purpose of Expenditure<br>IE-Sasse-Onlined Ads          |             | Category/<br>Type<br>004                                                       |                                                                                                                                                       |
| Name of Federal Candidate<br>BENJAMIN E SASSE           |             | <input checked="" type="checkbox"/> Support<br><input type="checkbox"/> Oppose | Office Sought: <input type="checkbox"/> House District: 00<br><input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NE |
| Calendar Year-To-Date<br>Per Election for Office Sought |             | 14409.06                                                                       | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ►          |

|                                                                  |   |         |
|------------------------------------------------------------------|---|---------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....    | ▶ | 7145.00 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... | ▶ |         |
| (c) <b>TOTAL</b> Independent Expenditures.....                   | ▶ |         |

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**PAGE 195 OF 207  
FOR LINE 24 OF FORM 3X

|                                                                                                                                                                                                                                                                                                                                                             |                    |                                                                                                                                                   |                                                                                                                                                                     |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------|---------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| NAME OF COMMITTEE (In Full)<br><b>FREEDOMWORKS FOR AMERICA</b>                                                                                                                                                                                                                                                                                              |                    | FEC IDENTIFICATION NUMBER ▼<br><b>C</b> C00499020                                                                                                 |                                                                                                                                                                     |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on                                                                                                                                                                                |                    | MM / DD / YYYY                                                                                                                                    |                                                                                                                                                                     |
| Full Name of Payee<br><b>Odd Lamps, LLC</b>                                                                                                                                                                                                                                                                                                                 |                    | Date of Public Distribution/Dissemination<br>MM / DD / YYYY<br><b>05 / 08 / 2014</b>                                                              |                                                                                                                                                                     |
| Mailing Address<br><b>12076 92nd Ave N</b>                                                                                                                                                                                                                                                                                                                  |                    | Amount<br><b>2500.00</b>                                                                                                                          |                                                                                                                                                                     |
| City<br><b>Maple Grove</b>                                                                                                                                                                                                                                                                                                                                  | State<br><b>MN</b> | Zip Code<br><b>55369</b>                                                                                                                          | Transaction ID : <b>SE.27133</b>                                                                                                                                    |
| Purpose of Expenditure<br><b>IE-McDaniel-Online Ads</b>                                                                                                                                                                                                                                                                                                     |                    | Category/Type<br><b>004</b>                                                                                                                       | Date of Disbursement or Obligation<br>MM / DD / YYYY<br><b>05 / 08 / 2014</b>                                                                                       |
| Name of Federal Candidate<br><b>CHRISTOPHER BRIAN MCDANIEL</b>                                                                                                                                                                                                                                                                                              |                    | <input checked="" type="checkbox"/> Support<br><input type="checkbox"/> Oppose                                                                    | Office Sought: <input type="checkbox"/> House District: <b>00</b><br><input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <b>MS</b> |
| Calendar Year-To-Date<br>Per Election for Office Sought<br><b>199869.46</b>                                                                                                                                                                                                                                                                                 |                    | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶ |                                                                                                                                                                     |
| Full Name of Payee<br><b>Odd Lamps, LLC</b>                                                                                                                                                                                                                                                                                                                 |                    | Date of Public Distribution/Dissemination<br>MM / DD / YYYY<br><b>05 / 08 / 2014</b>                                                              |                                                                                                                                                                     |
| Mailing Address<br><b>12076 92nd Ave N</b>                                                                                                                                                                                                                                                                                                                  |                    | Amount<br><b>1750.00</b>                                                                                                                          |                                                                                                                                                                     |
| City<br><b>Maple Grove</b>                                                                                                                                                                                                                                                                                                                                  | State<br><b>MN</b> | Zip Code<br><b>55369</b>                                                                                                                          | Transaction ID : <b>SE.35426</b>                                                                                                                                    |
| Purpose of Expenditure<br><b>IE-Mathis-Online Ads</b>                                                                                                                                                                                                                                                                                                       |                    | Category/Type<br><b>004</b>                                                                                                                       | Date of Disbursement or Obligation<br>MM / DD / YYYY<br><b>05 / 08 / 2014</b>                                                                                       |
| Name of Federal Candidate<br><b>CHAD DR MATHIS</b>                                                                                                                                                                                                                                                                                                          |                    | <input checked="" type="checkbox"/> Support<br><input type="checkbox"/> Oppose                                                                    | Office Sought: <input checked="" type="checkbox"/> House District: <b>06</b><br><input type="checkbox"/> President <input type="checkbox"/> Senate State: <b>AL</b> |
| Calendar Year-To-Date<br>Per Election for Office Sought<br><b>1849.87</b>                                                                                                                                                                                                                                                                                   |                    | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶ |                                                                                                                                                                     |
| (a) SUBTOTAL of Itemized Independent Expenditures..... ▶                                                                                                                                                                                                                                                                                                    |                    | <b>4250.00</b>                                                                                                                                    |                                                                                                                                                                     |
| (b) SUBTOTAL of Unitemized Independent Expenditures ..... ▶                                                                                                                                                                                                                                                                                                 |                    |                                                                                                                                                   |                                                                                                                                                                     |
| (c) TOTAL Independent Expenditures..... ▶                                                                                                                                                                                                                                                                                                                   |                    |                                                                                                                                                   |                                                                                                                                                                     |
| Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. |                    |                                                                                                                                                   |                                                                                                                                                                     |
| Signature<br><b>R. Russ Walker</b>                                                                                                                                                                                                                                                                                                                          |                    | Date<br>MM / DD / YYYY<br><b>06 / 20 / 2014</b>                                                                                                   |                                                                                                                                                                     |
|                                                                                                                                                                                                                                                                                                                                                             |                    | [Electronically Filed]                                                                                                                            |                                                                                                                                                                     |

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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 FOR LINE 24 OF FORM 3X

|                                                                                                                                                                              |  |                                                                                                                                                   |  |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|---------------------------------------------------------------------------------------------------------------------------------------------------|--|
| NAME OF COMMITTEE (In Full)<br><b>FREEDOMWORKS FOR AMERICA</b>                                                                                                               |  | FEC IDENTIFICATION NUMBER ▼<br><b>C</b> C00499020                                                                                                 |  |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on |  | <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY</div> <div>MM / DD / YYYY</div> <div>MM / DD / YYYY</div> </div> |  |

  

|                                                                  |                      |                                                                                                                                                                                                                                         |                           |
|------------------------------------------------------------------|----------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------|
| Full Name of Payee<br><b>Odd Lamps, LLC</b>                      |                      | Date of Public Distribution/Dissemination<br>MM / DD / YYYY<br>05 / 09 / 2014                                                                                                                                                           |                           |
| Mailing Address<br>12076 92nd Ave N                              |                      | Amount<br>1750.00                                                                                                                                                                                                                       |                           |
| City<br>Maple Grove                                              | State<br>MN          | Zip Code<br>55369                                                                                                                                                                                                                       | Transaction ID : SE.27192 |
| Purpose of Expenditure<br>IE-Disdale-Online Ads                  | Category/Type<br>004 | Date of Disbursement or Obligation<br>MM / DD / YYYY<br>05 / 09 / 2014                                                                                                                                                                  |                           |
| Name of Federal Candidate<br>SID DINSDALE                        |                      | <input type="checkbox"/> Support<br><input checked="" type="checkbox"/> Oppose<br>Office Sought: <input type="checkbox"/> House District: 00<br><input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NE |                           |
| Calendar Year-To-Date Per Election for Office Sought<br>67992.90 |                      | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶                                                                                       |                           |

  

|                                                                   |                      |                                                                                                                                                                                                                                         |                           |
|-------------------------------------------------------------------|----------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------|
| Full Name of Payee<br><b>Allen Page</b>                           |                      | Date of Public Distribution/Dissemination<br>MM / DD / YYYY<br>05 / 19 / 2014                                                                                                                                                           |                           |
| Mailing Address<br>400 N. Capitol St., NW<br>Ste. 765             |                      | Amount<br>35.55                                                                                                                                                                                                                         |                           |
| City<br>Washington                                                | State<br>DC          | Zip Code<br>20001                                                                                                                                                                                                                       | Transaction ID : SE.32508 |
| Purpose of Expenditure<br>IE-McDaniel-Mileage                     | Category/Type<br>002 | Date of Disbursement or Obligation<br>MM / DD / YYYY<br>05 / 19 / 2014                                                                                                                                                                  |                           |
| Name of Federal Candidate<br>CHRISTOPHER BRIAN MCDANIEL           |                      | <input checked="" type="checkbox"/> Support<br><input type="checkbox"/> Oppose<br>Office Sought: <input type="checkbox"/> House District: 00<br><input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: MS |                           |
| Calendar Year-To-Date Per Election for Office Sought<br>258889.14 |                      | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶                                                                                       |                           |

  

|                                                                    |         |
|--------------------------------------------------------------------|---------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶    | 1785.55 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶ |         |
| (c) <b>TOTAL</b> Independent Expenditures..... ▶                   |         |

  

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

R. Russ Walker

Signature \_\_\_\_\_

[Electronically Filed]

Date

MM / DD / YYYY  
06 / 20 / 2014

|                                                                      |             |                                                                                                                                              |                                                                                                                                                       |
|----------------------------------------------------------------------|-------------|----------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------|
| Full Name of Payee<br><b>Red Top Cab</b>                             |             | Date of Public Distribution/Dissemination<br>MM / DD / YYYY<br>05 / 02 / 2014                                                                |                                                                                                                                                       |
| Mailing Address<br>3251 Washington Blvd.                             |             | Amount<br>22.62                                                                                                                              |                                                                                                                                                       |
| City<br>Arlington                                                    | State<br>VA | Zip Code<br>22201                                                                                                                            | Transaction ID : <b>SE.26966</b><br>Date of Disbursement or Obligation<br>MM / DD / YYYY<br>05 / 02 / 2014                                            |
| Purpose of Expenditure<br>IE-Brannon-Travel                          |             | Category/<br>Type<br>002                                                                                                                     |                                                                                                                                                       |
| Name of Federal Candidate<br>GREGORY JOSEPH BRANNON                  |             | <input checked="" type="checkbox"/> Support<br><input type="checkbox"/> Oppose                                                               | Office Sought: <input type="checkbox"/> House District: 00<br><input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NC |
| Calendar Year-To-Date<br>Per Election for Office Sought<br>139175.04 |             | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ► |                                                                                                                                                       |

|                                                                  |   |                    |
|------------------------------------------------------------------|---|--------------------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....    | ▶ | <div>4022.62</div> |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... | ▶ | <div></div>        |
| (c) <b>TOTAL</b> Independent Expenditures.....                   | ▶ | <div></div>        |

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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 FOR LINE 24 OF FORM 3X

|                                                                                                                                                                                                                                                                                                                                                                                 |             |                                                                                  |                                                                                                                                                                                                                                                                          |  |  |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|----------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|
| NAME OF COMMITTEE (In Full)<br><b>FREEDOMWORKS FOR AMERICA</b>                                                                                                                                                                                                                                                                                                                  |             |                                                                                  | FEC IDENTIFICATION NUMBER ▼<br><b>C</b> C00499020                                                                                                                                                                                                                        |  |  |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">MM</span> / <span style="border: 1px solid black; padding: 2px;">DD</span> / <span style="border: 1px solid black; padding: 2px;">YYYY</span> |             |                                                                                  |                                                                                                                                                                                                                                                                          |  |  |
| Full Name of Payee<br><b>Rusty Rudder</b>                                                                                                                                                                                                                                                                                                                                       |             |                                                                                  | Date of Public Distribution/Dissemination<br><span style="border: 1px solid black; padding: 2px;">MM</span> / <span style="border: 1px solid black; padding: 2px;">DD</span> / <span style="border: 1px solid black; padding: 2px;">YYYY</span><br><b>05 / 04 / 2014</b> |  |  |
| Mailing Address<br>20210 Henderson Rd.                                                                                                                                                                                                                                                                                                                                          |             |                                                                                  | Amount<br><span style="border: 1px solid black; padding: 2px;">91.60</span>                                                                                                                                                                                              |  |  |
| City<br>Cornelius                                                                                                                                                                                                                                                                                                                                                               | State<br>NC | Zip Code<br>28031                                                                | Transaction ID : <b>SE.27064</b>                                                                                                                                                                                                                                         |  |  |
| Purpose of Expenditure<br>IE-Brannon-Travel                                                                                                                                                                                                                                                                                                                                     |             | Category/Type<br><span style="border: 1px solid black; padding: 2px;">002</span> | Date of Disbursement or Obligation<br><span style="border: 1px solid black; padding: 2px;">MM</span> / <span style="border: 1px solid black; padding: 2px;">DD</span> / <span style="border: 1px solid black; padding: 2px;">YYYY</span><br><b>05 / 04 / 2014</b>        |  |  |
| Name of Federal Candidate<br>GREGORY JOSEPH BRANNON                                                                                                                                                                                                                                                                                                                             |             |                                                                                  | <input checked="" type="checkbox"/> Support    Office Sought: <input type="checkbox"/> House    District: <u>00</u><br><input type="checkbox"/> Oppose <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate    State: <u>NC</u>                 |  |  |
| Calendar Year-To-Date Per Election for Office Sought<br><span style="border: 1px solid black; padding: 2px;">143048.60</span>                                                                                                                                                                                                                                                   |             |                                                                                  | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶ _____                                                                                                                  |  |  |
| Full Name of Payee<br><b>Shell-NC</b>                                                                                                                                                                                                                                                                                                                                           |             |                                                                                  | Date of Public Distribution/Dissemination<br><span style="border: 1px solid black; padding: 2px;">MM</span> / <span style="border: 1px solid black; padding: 2px;">DD</span> / <span style="border: 1px solid black; padding: 2px;">YYYY</span><br><b>05 / 05 / 2014</b> |  |  |
| Mailing Address<br>2825 Little Rock Rd.                                                                                                                                                                                                                                                                                                                                         |             |                                                                                  | Amount<br><span style="border: 1px solid black; padding: 2px;">43.79</span>                                                                                                                                                                                              |  |  |
| City<br>Charlotte                                                                                                                                                                                                                                                                                                                                                               | State<br>NC | Zip Code<br>28214                                                                | Transaction ID : <b>SE.27082</b>                                                                                                                                                                                                                                         |  |  |
| Purpose of Expenditure<br>IE-Brannon-Travel                                                                                                                                                                                                                                                                                                                                     |             | Category/Type<br><span style="border: 1px solid black; padding: 2px;">002</span> | Date of Disbursement or Obligation<br><span style="border: 1px solid black; padding: 2px;">MM</span> / <span style="border: 1px solid black; padding: 2px;">DD</span> / <span style="border: 1px solid black; padding: 2px;">YYYY</span><br><b>05 / 05 / 2014</b>        |  |  |
| Name of Federal Candidate<br>GREGORY JOSEPH BRANNON                                                                                                                                                                                                                                                                                                                             |             |                                                                                  | <input checked="" type="checkbox"/> Support    Office Sought: <input type="checkbox"/> House    District: <u>00</u><br><input type="checkbox"/> Oppose <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate    State: <u>NC</u>                 |  |  |
| Calendar Year-To-Date Per Election for Office Sought<br><span style="border: 1px solid black; padding: 2px;">146075.46</span>                                                                                                                                                                                                                                                   |             |                                                                                  | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶ _____                                                                                                                  |  |  |
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶                                                                                                                                                                                                                                                                                                                 |             |                                                                                  | <span style="border: 1px solid black; padding: 2px;">135.39</span>                                                                                                                                                                                                       |  |  |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶                                                                                                                                                                                                                                                                                                              |             |                                                                                  | <span style="border: 1px solid black; padding: 2px;"></span>                                                                                                                                                                                                             |  |  |
| (c) <b>TOTAL</b> Independent Expenditures..... ▶                                                                                                                                                                                                                                                                                                                                |             |                                                                                  | <span style="border: 1px solid black; padding: 2px;"></span>                                                                                                                                                                                                             |  |  |
| 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.                     |             |                                                                                  |                                                                                                                                                                                                                                                                          |  |  |
| Signature <u>R. Russ Walker</u><br><div style="text-align: right;">[Electronically Filed]</div>                                                                                                                                                                                                                                                                                 |             |                                                                                  | Date <span style="border: 1px solid black; padding: 2px;">MM</span> / <span style="border: 1px solid black; padding: 2px;">DD</span> / <span style="border: 1px solid black; padding: 2px;">YYYY</span><br><b>06 / 20 / 2014</b>                                         |  |  |

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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 FOR LINE 24 OF FORM 3X

|                                                                                                                                                                              |  |                                                                                                                                                   |  |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|---------------------------------------------------------------------------------------------------------------------------------------------------|--|
| NAME OF COMMITTEE (In Full)<br><b>FREEDOMWORKS FOR AMERICA</b>                                                                                                               |  | FEC IDENTIFICATION NUMBER ▼<br><b>C</b> C00499020                                                                                                 |  |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on |  | <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY</div> <div>MM / DD / YYYY</div> <div>MM / DD / YYYY</div> </div> |  |

  

|                                                                                                                                |                              |                                                                                                                                                                                              |                                  |
|--------------------------------------------------------------------------------------------------------------------------------|------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------|
| Full Name of Payee<br><b>SLC Airport</b>                                                                                       |                              | Date of Public Distribution/Dissemination<br>MM / DD / YYYY<br><b>05 / 06 / 2014</b>                                                                                                         |                                  |
| Mailing Address                                                                                                                |                              | Amount<br><div style="border: 1px solid black; padding: 2px;">45.00</div>                                                                                                                    |                                  |
| City                                                                                                                           | State<br><b>NC</b>           | Zip Code                                                                                                                                                                                     | Transaction ID : <b>SE.35436</b> |
| Purpose of Expenditure<br>IE-Brannon-Travel                                                                                    | Category/<br>Type <b>002</b> | Date of Disbursement or Obligation<br>MM / DD / YYYY<br><b>05 / 07 / 2014</b>                                                                                                                |                                  |
| Name of Federal Candidate<br><b>GREGORY JOSEPH BRANNON</b>                                                                     |                              | Office Sought: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose<br><input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <b>NC</b> |                                  |
| Calendar Year-To-Date<br>Per Election for Office Sought<br><div style="border: 1px solid black; padding: 2px;">149160.26</div> |                              | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶                                            |                                  |

  

|                                                                                                                                |                              |                                                                                                                                                                                              |                                  |
|--------------------------------------------------------------------------------------------------------------------------------|------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------|
| Full Name of Payee<br><b>Starbucks-NC</b>                                                                                      |                              | Date of Public Distribution/Dissemination<br>MM / DD / YYYY<br><b>05 / 05 / 2014</b>                                                                                                         |                                  |
| Mailing Address<br><b>545 Providence Rd.</b>                                                                                   |                              | Amount<br><div style="border: 1px solid black; padding: 2px;">10.45</div>                                                                                                                    |                                  |
| City<br><b>Charlotte</b>                                                                                                       | State<br><b>NC</b>           | Zip Code<br><b>28214</b>                                                                                                                                                                     | Transaction ID : <b>SE.27084</b> |
| Purpose of Expenditure<br>IE-Brannon-Travel                                                                                    | Category/<br>Type <b>002</b> | Date of Disbursement or Obligation<br>MM / DD / YYYY<br><b>05 / 05 / 2014</b>                                                                                                                |                                  |
| Name of Federal Candidate<br><b>GREGORY JOSEPH BRANNON</b>                                                                     |                              | Office Sought: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose<br><input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <b>NC</b> |                                  |
| Calendar Year-To-Date<br>Per Election for Office Sought<br><div style="border: 1px solid black; padding: 2px;">146085.91</div> |                              | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶                                            |                                  |

  

|                                                                    |                                                                 |
|--------------------------------------------------------------------|-----------------------------------------------------------------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶    | <div style="border: 1px solid black; padding: 2px;">55.45</div> |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶ | <div style="border: 1px solid black; padding: 2px;"></div>      |
| (c) <b>TOTAL</b> Independent Expenditures..... ▶                   | <div style="border: 1px solid black; padding: 2px;"></div>      |

  

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*R. Russ Walker*

Signature

[Electronically Filed]

Date

MM / DD / YYYY  
**06 / 20 / 2014**

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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 FOR LINE 24 OF FORM 3X

|                                                                                                                                                                                                                                                                                                                                                                                 |                    |                                                                                  |                                                                                                                                                                                                                                                                          |  |  |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------|----------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|
| NAME OF COMMITTEE (In Full)<br><b>FREEDOMWORKS FOR AMERICA</b>                                                                                                                                                                                                                                                                                                                  |                    |                                                                                  | FEC IDENTIFICATION NUMBER ▼<br><b>C</b> C00499020                                                                                                                                                                                                                        |  |  |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">MM</span> / <span style="border: 1px solid black; padding: 2px;">DD</span> / <span style="border: 1px solid black; padding: 2px;">YYYY</span> |                    |                                                                                  |                                                                                                                                                                                                                                                                          |  |  |
| Full Name of Payee<br><b>Starbucks-NC</b>                                                                                                                                                                                                                                                                                                                                       |                    |                                                                                  | Date of Public Distribution/Dissemination<br><span style="border: 1px solid black; padding: 2px;">MM</span> / <span style="border: 1px solid black; padding: 2px;">DD</span> / <span style="border: 1px solid black; padding: 2px;">YYYY</span><br><b>05 / 06 / 2014</b> |  |  |
| Mailing Address <b>545 Providence Rd.</b>                                                                                                                                                                                                                                                                                                                                       |                    |                                                                                  | Amount<br><span style="border: 1px solid black; padding: 2px;">13.53</span>                                                                                                                                                                                              |  |  |
| City<br><b>Charlotte</b>                                                                                                                                                                                                                                                                                                                                                        | State<br><b>NC</b> | Zip Code<br><b>28214</b>                                                         | Transaction ID : <b>SE.35429</b>                                                                                                                                                                                                                                         |  |  |
| Purpose of Expenditure<br><b>IE-Brannon-Travel</b>                                                                                                                                                                                                                                                                                                                              |                    | Category/Type<br><span style="border: 1px solid black; padding: 2px;">002</span> | Date of Disbursement or Obligation<br><span style="border: 1px solid black; padding: 2px;">MM</span> / <span style="border: 1px solid black; padding: 2px;">DD</span> / <span style="border: 1px solid black; padding: 2px;">YYYY</span><br><b>05 / 06 / 2014</b>        |  |  |
| Name of Federal Candidate<br><b>GREGORY JOSEPH BRANNON</b>                                                                                                                                                                                                                                                                                                                      |                    |                                                                                  | Office Sought: <input type="checkbox"/> House    District: <u>00</u><br><input type="checkbox"/> President <input checked="" type="checkbox"/> Senate    State: <u>NC</u><br><input type="checkbox"/> Oppose                                                             |  |  |
| Calendar Year-To-Date Per Election for Office Sought<br><span style="border: 1px solid black; padding: 2px;">148367.63</span>                                                                                                                                                                                                                                                   |                    |                                                                                  | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶                                                                                                                        |  |  |
| Full Name of Payee<br><b>Starbucks-NC</b>                                                                                                                                                                                                                                                                                                                                       |                    |                                                                                  | Date of Public Distribution/Dissemination<br><span style="border: 1px solid black; padding: 2px;">MM</span> / <span style="border: 1px solid black; padding: 2px;">DD</span> / <span style="border: 1px solid black; padding: 2px;">YYYY</span><br><b>05 / 06 / 2014</b> |  |  |
| Mailing Address <b>545 Providence Rd.</b>                                                                                                                                                                                                                                                                                                                                       |                    |                                                                                  | Amount<br><span style="border: 1px solid black; padding: 2px;">6.73</span>                                                                                                                                                                                               |  |  |
| City<br><b>Charlotte</b>                                                                                                                                                                                                                                                                                                                                                        | State<br><b>NC</b> | Zip Code<br><b>28214</b>                                                         | Transaction ID : <b>SE.35434</b>                                                                                                                                                                                                                                         |  |  |
| Purpose of Expenditure<br><b>IE-Brannon-Travel</b>                                                                                                                                                                                                                                                                                                                              |                    | Category/Type<br><span style="border: 1px solid black; padding: 2px;">002</span> | Date of Disbursement or Obligation<br><span style="border: 1px solid black; padding: 2px;">MM</span> / <span style="border: 1px solid black; padding: 2px;">DD</span> / <span style="border: 1px solid black; padding: 2px;">YYYY</span><br><b>05 / 06 / 2014</b>        |  |  |
| Name of Federal Candidate<br><b>GREGORY JOSEPH BRANNON</b>                                                                                                                                                                                                                                                                                                                      |                    |                                                                                  | Office Sought: <input type="checkbox"/> House    District: <u>00</u><br><input type="checkbox"/> President <input checked="" type="checkbox"/> Senate    State: <u>NC</u><br><input type="checkbox"/> Oppose                                                             |  |  |
| Calendar Year-To-Date Per Election for Office Sought<br><span style="border: 1px solid black; padding: 2px;">148446.98</span>                                                                                                                                                                                                                                                   |                    |                                                                                  | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶                                                                                                                        |  |  |
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶                                                                                                                                                                                                                                                                                                                 |                    |                                                                                  | <span style="border: 1px solid black; padding: 2px;">20.26</span>                                                                                                                                                                                                        |  |  |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶                                                                                                                                                                                                                                                                                                              |                    |                                                                                  | <span style="border: 1px solid black; padding: 2px;"></span>                                                                                                                                                                                                             |  |  |
| (c) <b>TOTAL</b> Independent Expenditures..... ▶                                                                                                                                                                                                                                                                                                                                |                    |                                                                                  | <span style="border: 1px solid black; padding: 2px;"></span>                                                                                                                                                                                                             |  |  |
| 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.                     |                    |                                                                                  |                                                                                                                                                                                                                                                                          |  |  |
| Signature <u>R. Russ Walker</u>                                                                                                                                                                                                                                                                                                                                                 |                    |                                                                                  | Date <span style="border: 1px solid black; padding: 2px;">MM</span> / <span style="border: 1px solid black; padding: 2px;">DD</span> / <span style="border: 1px solid black; padding: 2px;">YYYY</span><br><b>06 / 20 / 2014</b>                                         |  |  |

[Electronically Filed]



|                                                         |             |                                                                                |                                                                                                                                                       |
|---------------------------------------------------------|-------------|--------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------|
| Full Name of Payee<br><b>Topple Strategies</b>          |             | Date of Public Distribution/Dissemination<br>MM / DD / YYYY<br>05 / 04 / 2014  |                                                                                                                                                       |
| Mailing Address<br>189 N. Hwy 89 Ste. C 130             |             | Amount<br>18003.00                                                             |                                                                                                                                                       |
| City<br>North Salt Lake                                 | State<br>UT | Zip Code<br>84054                                                              | Transaction ID : <b>SE.27010</b><br>Date of Disbursement or Obligation<br>MM / DD / YYYY<br>05 / 04 / 2014                                            |
| Purpose of Expenditure<br>IE-Birman-Phone Calling       |             | Category/<br>Type<br>004                                                       |                                                                                                                                                       |
| Name of Federal Candidate<br>IGOR A BIRMAN              |             | <input checked="" type="checkbox"/> Support<br><input type="checkbox"/> Oppose | Office Sought: <input checked="" type="checkbox"/> House District: 07<br><input type="checkbox"/> President <input type="checkbox"/> Senate State: CA |
| Calendar Year-To-Date<br>Per Election for Office Sought |             | 18299.87                                                                       | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ►          |

|                                                                  |   |          |
|------------------------------------------------------------------|---|----------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....    | ▶ | 18061.67 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... | ▶ |          |
| (c) <b>TOTAL</b> Independent Expenditures.....                   | ▶ |          |

Signature

|                                                                      |             |                                                                                                                                                                         |                                                                                                                                                               |
|----------------------------------------------------------------------|-------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Full Name of Payee<br><b>Topple Strategies</b>                       |             | Date of Public Distribution/Dissemination<br>MM / DD / YYYY<br>05 / 04 / 2014                                                                                           |                                                                                                                                                               |
| Mailing Address<br>189 N. Hwy 89 Ste. C 130                          |             | Amount<br>30005.00                                                                                                                                                      |                                                                                                                                                               |
| City<br>North Salt Lake                                              | State<br>UT | Zip Code<br>84054                                                                                                                                                       | Transaction ID : <b>SE.27040</b><br>Date of Disbursement or Obligation<br>MM / DD / YYYY<br>05 / 04 / 2014                                                    |
| Purpose of Expenditure<br>IE-McDaniel-Phone Calling                  |             | Category/<br>Type<br>004                                                                                                                                                |                                                                                                                                                               |
| Name of Federal Candidate<br>CHRISTOPHER BRIAN MCDANIEL              |             | <input checked="" type="checkbox"/> Support<br><input type="checkbox"/> Oppose                                                                                          | Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate<br><input type="checkbox"/> President <input type="checkbox"/> Other |
| Calendar Year-To-Date<br>Per Election For Office Sought<br>188110.47 |             | District: 00<br>State: MS<br>Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |                                                                                                                                                               |

|                                                                  |   |                     |
|------------------------------------------------------------------|---|---------------------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....    | ▶ | <div>54009.00</div> |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... | ▶ | <div></div>         |
| (c) <b>TOTAL</b> Independent Expenditures.....                   | ▶ | <div></div>         |

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**PAGE 203 OF 207  
FOR LINE 24 OF FORM 3X

|                                                                                                                                                                                                                                                                                                                                                             |                    |                                                                                      |                                                                                                                                                                     |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------|--------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| NAME OF COMMITTEE (In Full)<br><b>FREEDOMWORKS FOR AMERICA</b>                                                                                                                                                                                                                                                                                              |                    | FEC IDENTIFICATION NUMBER ▼<br><b>C</b> C00499020                                    |                                                                                                                                                                     |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on                                                                                                                                                                                |                    | MM / DD / YYYY                                                                       |                                                                                                                                                                     |
| Full Name of Payee<br><b>US Air</b>                                                                                                                                                                                                                                                                                                                         |                    | Date of Public Distribution/Dissemination<br>MM / DD / YYYY<br><b>05 / 02 / 2014</b> |                                                                                                                                                                     |
| Mailing Address<br><b>400 East Sky Harbor Blvd.</b>                                                                                                                                                                                                                                                                                                         |                    | Amount<br><b>529.00</b>                                                              |                                                                                                                                                                     |
| City<br><b>Phoenix</b>                                                                                                                                                                                                                                                                                                                                      | State<br><b>AZ</b> | Zip Code<br><b>85034</b>                                                             | Transaction ID : <b>SE.26960</b>                                                                                                                                    |
| Purpose of Expenditure<br><b>IE-Brannon-Travel</b>                                                                                                                                                                                                                                                                                                          |                    | Category/<br>Type <b>002</b>                                                         | Date of Disbursement or Obligation<br>MM / DD / YYYY<br><b>05 / 02 / 2014</b>                                                                                       |
| Name of Federal Candidate<br><b>GREGORY JOSEPH BRANNON</b>                                                                                                                                                                                                                                                                                                  |                    | <input checked="" type="checkbox"/> Support<br><input type="checkbox"/> Oppose       | Office Sought: <input type="checkbox"/> House District: <b>00</b><br><input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <b>NC</b> |
| Calendar Year-To-Date<br>Per Election for Office Sought                                                                                                                                                                                                                                                                                                     |                    | <b>138003.98</b>                                                                     | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶                   |
| Full Name of Payee<br><b>US Air</b>                                                                                                                                                                                                                                                                                                                         |                    | Date of Public Distribution/Dissemination<br>MM / DD / YYYY<br><b>05 / 06 / 2014</b> |                                                                                                                                                                     |
| Mailing Address<br><b>400 East Sky Harbor Blvd.</b>                                                                                                                                                                                                                                                                                                         |                    | Amount<br><b>25.00</b>                                                               |                                                                                                                                                                     |
| City<br><b>Phoenix</b>                                                                                                                                                                                                                                                                                                                                      | State<br><b>AZ</b> | Zip Code<br><b>85034</b>                                                             | Transaction ID : <b>SE.35443</b>                                                                                                                                    |
| Purpose of Expenditure<br><b>IE-Brannon-Travel</b>                                                                                                                                                                                                                                                                                                          |                    | Category/<br>Type <b>002</b>                                                         | Date of Disbursement or Obligation<br>MM / DD / YYYY<br><b>05 / 06 / 2014</b>                                                                                       |
| Name of Federal Candidate<br><b>GREGORY JOSEPH BRANNON</b>                                                                                                                                                                                                                                                                                                  |                    | <input checked="" type="checkbox"/> Support<br><input type="checkbox"/> Oppose       | Office Sought: <input type="checkbox"/> House District: <b>00</b><br><input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <b>NC</b> |
| Calendar Year-To-Date<br>Per Election for Office Sought                                                                                                                                                                                                                                                                                                     |                    | <b>148786.31</b>                                                                     | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶                   |
| (a) SUBTOTAL of Itemized Independent Expenditures.....▶                                                                                                                                                                                                                                                                                                     |                    | <b>554.00</b>                                                                        |                                                                                                                                                                     |
| (b) SUBTOTAL of Unitemized Independent Expenditures .....▶                                                                                                                                                                                                                                                                                                  |                    |                                                                                      |                                                                                                                                                                     |
| (c) TOTAL Independent Expenditures.....▶                                                                                                                                                                                                                                                                                                                    |                    |                                                                                      |                                                                                                                                                                     |
| Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. |                    |                                                                                      |                                                                                                                                                                     |
| Signature<br><b>R. Russ Walker</b>                                                                                                                                                                                                                                                                                                                          |                    | Date<br>MM / DD / YYYY<br><b>06 / 20 / 2014</b>                                      |                                                                                                                                                                     |
|                                                                                                                                                                                                                                                                                                                                                             |                    | [Electronically Filed]                                                               |                                                                                                                                                                     |

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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 FOR LINE 24 OF FORM 3X

|                                                                                                                                                                                                                                                                                                                                                             |  |                           |                                                                                                                                                                                                                                      |                                                                        |  |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|---------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------|--|
| NAME OF COMMITTEE (In Full)<br><b>FREEDOMWORKS FOR AMERICA</b>                                                                                                                                                                                                                                                                                              |  |                           | FEC IDENTIFICATION NUMBER ▼<br><b>C</b> C00499020                                                                                                                                                                                    |                                                                        |  |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on                                                                                                                                                                                |  |                           | <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY</div> <div>MM / DD / YYYY</div> <div>MM / DD / YYYY</div> </div>                                                                                    |                                                                        |  |
| Full Name of Payee<br><b>Walgreens</b>                                                                                                                                                                                                                                                                                                                      |  |                           | Date of Public Distribution/Dissemination<br>MM / DD / YYYY<br>05 / 04 / 2014                                                                                                                                                        |                                                                        |  |
| Mailing Address 1327 Meadowlark Dr.                                                                                                                                                                                                                                                                                                                         |  |                           | Amount<br>9.07                                                                                                                                                                                                                       |                                                                        |  |
| City Winston-Salem State NC Zip Code 27106                                                                                                                                                                                                                                                                                                                  |  | Transaction ID : SE.27070 |                                                                                                                                                                                                                                      |                                                                        |  |
| Purpose of Expenditure<br>IE-Brannon-Travel                                                                                                                                                                                                                                                                                                                 |  | Category/Type 002         |                                                                                                                                                                                                                                      | Date of Disbursement or Obligation<br>MM / DD / YYYY<br>05 / 04 / 2014 |  |
| Name of Federal Candidate<br>GREGORY JOSEPH BRANNON                                                                                                                                                                                                                                                                                                         |  |                           | <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose<br>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: 00 State: NC<br><input type="checkbox"/> President |                                                                        |  |
| Calendar Year-To-Date Per Election for Office Sought 143211.29                                                                                                                                                                                                                                                                                              |  |                           | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶                                                                                    |                                                                        |  |
| Full Name of Payee<br><b>R. Russ Walker</b>                                                                                                                                                                                                                                                                                                                 |  |                           | Date of Public Distribution/Dissemination<br>MM / DD / YYYY<br>05 / 02 / 2014                                                                                                                                                        |                                                                        |  |
| Mailing Address 400 N. Capitol St., NW Suite 765                                                                                                                                                                                                                                                                                                            |  |                           | Amount<br>27.00                                                                                                                                                                                                                      |                                                                        |  |
| City Washington State DC Zip Code 20001                                                                                                                                                                                                                                                                                                                     |  | Transaction ID : SE.26971 |                                                                                                                                                                                                                                      |                                                                        |  |
| Purpose of Expenditure<br>IE-Brannon-Mileage                                                                                                                                                                                                                                                                                                                |  | Category/Type 002         |                                                                                                                                                                                                                                      | Date of Disbursement or Obligation<br>MM / DD / YYYY<br>05 / 02 / 2014 |  |
| Name of Federal Candidate<br>GREGORY JOSEPH BRANNON                                                                                                                                                                                                                                                                                                         |  |                           | <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose<br>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: 00 State: NC<br><input type="checkbox"/> President |                                                                        |  |
| Calendar Year-To-Date Per Election for Office Sought 141091.95                                                                                                                                                                                                                                                                                              |  |                           | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶                                                                                    |                                                                        |  |
| (a) SUBTOTAL of Itemized Independent Expenditures..... ▶                                                                                                                                                                                                                                                                                                    |  |                           | 36.07                                                                                                                                                                                                                                |                                                                        |  |
| (b) SUBTOTAL of Unitemized Independent Expenditures ..... ▶                                                                                                                                                                                                                                                                                                 |  |                           |                                                                                                                                                                                                                                      |                                                                        |  |
| (c) TOTAL Independent Expenditures..... ▶                                                                                                                                                                                                                                                                                                                   |  |                           |                                                                                                                                                                                                                                      |                                                                        |  |
| Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. |  |                           |                                                                                                                                                                                                                                      |                                                                        |  |
| Signature <u>R. Russ Walker</u>                                                                                                                                                                                                                                                                                                                             |  |                           | Date MM / DD / YYYY<br>06 / 20 / 2014                                                                                                                                                                                                |                                                                        |  |

[Electronically Filed]

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**PAGE 205 OF 207  
FOR LINE 24 OF FORM 3X

|                                                                                                                                                                                                                                                                                                                                                             |                    |                                                                                      |                                                                                                                                                                     |  |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------|--------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| NAME OF COMMITTEE (In Full)<br><b>FREEDOMWORKS FOR AMERICA</b>                                                                                                                                                                                                                                                                                              |                    |                                                                                      | FEC IDENTIFICATION NUMBER ▼<br><b>C</b> C00499020                                                                                                                   |  |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on                                                                                                                                                                                |                    |                                                                                      | MM / DD / YYYY                                                                                                                                                      |  |
| Full Name of Payee<br><b>Heather Williamson</b>                                                                                                                                                                                                                                                                                                             |                    | Date of Public Distribution/Dissemination<br>MM / DD / YYYY<br><b>05 / 02 / 2014</b> |                                                                                                                                                                     |  |
| Mailing Address<br><b>1086 Topaz Dr</b>                                                                                                                                                                                                                                                                                                                     |                    | Amount<br><b>19.06</b>                                                               |                                                                                                                                                                     |  |
| City<br><b>Saratoga Springs</b>                                                                                                                                                                                                                                                                                                                             | State<br><b>UT</b> | Zip Code<br><b>84045</b>                                                             | Transaction ID : <b>SE.26969</b>                                                                                                                                    |  |
| Purpose of Expenditure<br><b>IE-Brannon-Travel</b>                                                                                                                                                                                                                                                                                                          |                    | Category/<br>Type <b>002</b>                                                         | Date of Disbursement or Obligation<br>MM / DD / YYYY<br><b>05 / 02 / 2014</b>                                                                                       |  |
| Name of Federal Candidate<br><b>GREGORY JOSEPH BRANNON</b>                                                                                                                                                                                                                                                                                                  |                    | <input checked="" type="checkbox"/> Support<br><input type="checkbox"/> Oppose       | Office Sought: <input type="checkbox"/> House District: <b>00</b><br><input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <b>NC</b> |  |
| Calendar Year-To-Date<br>Per Election for Office Sought                                                                                                                                                                                                                                                                                                     |                    | <b>141064.95</b>                                                                     | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶                   |  |
| Full Name of Payee<br><b>Heather Williamson</b>                                                                                                                                                                                                                                                                                                             |                    | Date of Public Distribution/Dissemination<br>MM / DD / YYYY<br><b>05 / 03 / 2014</b> |                                                                                                                                                                     |  |
| Mailing Address<br><b>1086 Topaz Dr</b>                                                                                                                                                                                                                                                                                                                     |                    | Amount<br><b>49.23</b>                                                               |                                                                                                                                                                     |  |
| City<br><b>Saratoga Springs</b>                                                                                                                                                                                                                                                                                                                             | State<br><b>UT</b> | Zip Code<br><b>84045</b>                                                             | Transaction ID : <b>SE.26995</b>                                                                                                                                    |  |
| Purpose of Expenditure<br><b>IE-Brannon-Travel</b>                                                                                                                                                                                                                                                                                                          |                    | Category/<br>Type <b>002</b>                                                         | Date of Disbursement or Obligation<br>MM / DD / YYYY<br><b>05 / 03 / 2014</b>                                                                                       |  |
| Name of Federal Candidate<br><b>GREGORY JOSEPH BRANNON</b>                                                                                                                                                                                                                                                                                                  |                    | <input checked="" type="checkbox"/> Support<br><input type="checkbox"/> Oppose       | Office Sought: <input type="checkbox"/> House District: <b>00</b><br><input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <b>NC</b> |  |
| Calendar Year-To-Date<br>Per Election for Office Sought                                                                                                                                                                                                                                                                                                     |                    | <b>142864.55</b>                                                                     | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶                   |  |
| (a) SUBTOTAL of Itemized Independent Expenditures.....                                                                                                                                                                                                                                                                                                      |                    | <b>68.29</b>                                                                         |                                                                                                                                                                     |  |
| (b) SUBTOTAL of Unitemized Independent Expenditures .....                                                                                                                                                                                                                                                                                                   |                    |                                                                                      |                                                                                                                                                                     |  |
| (c) TOTAL Independent Expenditures.....                                                                                                                                                                                                                                                                                                                     |                    |                                                                                      |                                                                                                                                                                     |  |
| Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. |                    |                                                                                      |                                                                                                                                                                     |  |
| Signature<br><b>R. Russ Walker</b>                                                                                                                                                                                                                                                                                                                          |                    | Date<br>MM / DD / YYYY<br><b>06 / 20 / 2014</b>                                      |                                                                                                                                                                     |  |
| [Electronically Filed]                                                                                                                                                                                                                                                                                                                                      |                    |                                                                                      |                                                                                                                                                                     |  |

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**PAGE 206 OF 207  
FOR LINE 24 OF FORM 3X

|                                                                                                                                                                                                                                                                                                                                                             |                    |                                                                                                                                                   |                                                                                                                                                                     |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------|---------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| NAME OF COMMITTEE (In Full)<br><b>FREEDOMWORKS FOR AMERICA</b>                                                                                                                                                                                                                                                                                              |                    | FEC IDENTIFICATION NUMBER ▼<br><b>C</b> C00499020                                                                                                 |                                                                                                                                                                     |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on                                                                                                                                                                                |                    | MM / DD / YYYY                                                                                                                                    |                                                                                                                                                                     |
| Full Name of Payee<br><b>Heather Williamson</b>                                                                                                                                                                                                                                                                                                             |                    | Date of Public Distribution/Dissemination<br>MM / DD / YYYY<br><b>05 / 05 / 2014</b>                                                              |                                                                                                                                                                     |
| Mailing Address<br><b>1086 Topaz Dr</b>                                                                                                                                                                                                                                                                                                                     |                    | Amount<br><b>1.70</b>                                                                                                                             |                                                                                                                                                                     |
| City<br><b>Saratoga Springs</b>                                                                                                                                                                                                                                                                                                                             | State<br><b>UT</b> | Zip Code<br><b>84045</b>                                                                                                                          | Transaction ID : <b>SE.27079</b>                                                                                                                                    |
| Purpose of Expenditure<br><b>IE-Brannon-Travel</b>                                                                                                                                                                                                                                                                                                          |                    | Category/Type<br><b>002</b>                                                                                                                       | Date of Disbursement or Obligation<br>MM / DD / YYYY<br><b>05 / 05 / 2014</b>                                                                                       |
| Name of Federal Candidate<br><b>GREGORY JOSEPH BRANNON</b>                                                                                                                                                                                                                                                                                                  |                    | <input checked="" type="checkbox"/> Support<br><input type="checkbox"/> Oppose                                                                    | Office Sought: <input type="checkbox"/> House District: <b>00</b><br><input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <b>NC</b> |
| Calendar Year-To-Date<br>Per Election for Office Sought<br><b>144391.63</b>                                                                                                                                                                                                                                                                                 |                    | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶ |                                                                                                                                                                     |
| Full Name of Payee<br><b>Heather Williamson</b>                                                                                                                                                                                                                                                                                                             |                    | Date of Public Distribution/Dissemination<br>MM / DD / YYYY<br><b>05 / 10 / 2014</b>                                                              |                                                                                                                                                                     |
| Mailing Address<br><b>1086 Topaz Dr</b>                                                                                                                                                                                                                                                                                                                     |                    | Amount<br><b>425.07</b>                                                                                                                           |                                                                                                                                                                     |
| City<br><b>Saratoga Springs</b>                                                                                                                                                                                                                                                                                                                             | State<br><b>UT</b> | Zip Code<br><b>84045</b>                                                                                                                          | Transaction ID : <b>SE.27210</b>                                                                                                                                    |
| Purpose of Expenditure<br><b>IE-Smith-Travel</b>                                                                                                                                                                                                                                                                                                            |                    | Category/Type<br><b>002</b>                                                                                                                       | Date of Disbursement or Obligation<br>MM / DD / YYYY<br><b>05 / 10 / 2014</b>                                                                                       |
| Name of Federal Candidate<br><b>BRYAN SMITH</b>                                                                                                                                                                                                                                                                                                             |                    | <input checked="" type="checkbox"/> Support<br><input type="checkbox"/> Oppose                                                                    | Office Sought: <input checked="" type="checkbox"/> House District: <b>02</b><br><input type="checkbox"/> President <input type="checkbox"/> Senate State: <b>ID</b> |
| Calendar Year-To-Date<br>Per Election for Office Sought<br><b>31164.45</b>                                                                                                                                                                                                                                                                                  |                    | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶ |                                                                                                                                                                     |
| (a) SUBTOTAL of Itemized Independent Expenditures..... ▶                                                                                                                                                                                                                                                                                                    |                    | <b>426.77</b>                                                                                                                                     |                                                                                                                                                                     |
| (b) SUBTOTAL of Unitemized Independent Expenditures ..... ▶                                                                                                                                                                                                                                                                                                 |                    |                                                                                                                                                   |                                                                                                                                                                     |
| (c) TOTAL Independent Expenditures..... ▶                                                                                                                                                                                                                                                                                                                   |                    |                                                                                                                                                   |                                                                                                                                                                     |
| Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. |                    |                                                                                                                                                   |                                                                                                                                                                     |
| Signature<br><b>R. Russ Walker</b>                                                                                                                                                                                                                                                                                                                          |                    | Date<br>MM / DD / YYYY<br><b>06 / 20 / 2014</b>                                                                                                   |                                                                                                                                                                     |
|                                                                                                                                                                                                                                                                                                                                                             |                    | [Electronically Filed]                                                                                                                            |                                                                                                                                                                     |

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**PAGE 207 OF 207  
FOR LINE 24 OF FORM 3X

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|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| NAME OF COMMITTEE (In Full)<br><b>FREEDOMWORKS FOR AMERICA</b>                                                                                                                                                                                                                                                                                              |                             | FEC IDENTIFICATION NUMBER ▼<br><b>C</b> C00499020                                                                                                 |                                                                                                                                                                     |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on                                                                                                                                                                                |                             | M M M / D D D / Y Y Y Y Y Y                                                                                                                       |                                                                                                                                                                     |
| Full Name of Payee<br><b>Heather Williamson</b>                                                                                                                                                                                                                                                                                                             |                             | Date of Public Distribution/Dissemination<br>M M M / D D D / Y Y Y Y Y Y<br><b>05 / 16 / 2014</b>                                                 |                                                                                                                                                                     |
| Mailing Address<br><b>1086 Topaz Dr</b>                                                                                                                                                                                                                                                                                                                     |                             | Amount<br><b>6.07</b>                                                                                                                             |                                                                                                                                                                     |
| City<br><b>Saratoga Springs</b>                                                                                                                                                                                                                                                                                                                             | State<br><b>UT</b>          | Zip Code<br><b>84045</b>                                                                                                                          | Transaction ID : <b>SE.27287</b>                                                                                                                                    |
| Purpose of Expenditure<br><b>IE-Smith-Travel</b>                                                                                                                                                                                                                                                                                                            | Category/Type<br><b>002</b> | Date of Disbursement or Obligation<br>M M M / D D D / Y Y Y Y Y Y<br><b>05 / 16 / 2014</b>                                                        |                                                                                                                                                                     |
| Name of Federal Candidate<br><b>BRYAN SMITH</b>                                                                                                                                                                                                                                                                                                             |                             | <input checked="" type="checkbox"/> Support<br><input type="checkbox"/> Oppose                                                                    | Office Sought: <input checked="" type="checkbox"/> House District: <b>02</b><br><input type="checkbox"/> President <input type="checkbox"/> Senate State: <b>ID</b> |
| Calendar Year-To-Date<br>Per Election for Office Sought<br><b>34200.06</b>                                                                                                                                                                                                                                                                                  |                             | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>2014 <input type="checkbox"/> Other (specify) ▶ |                                                                                                                                                                     |
| Full Name of Payee                                                                                                                                                                                                                                                                                                                                          |                             | Date of Public Distribution/Dissemination<br>M M M / D D D / Y Y Y Y Y Y                                                                          |                                                                                                                                                                     |
| Mailing Address                                                                                                                                                                                                                                                                                                                                             |                             | Amount                                                                                                                                            |                                                                                                                                                                     |
| City                                                                                                                                                                                                                                                                                                                                                        | State                       | Zip Code                                                                                                                                          | Date of Disbursement or Obligation<br>M M M / D D D / Y Y Y Y Y Y                                                                                                   |
| Purpose of Expenditure                                                                                                                                                                                                                                                                                                                                      | Category/Type               |                                                                                                                                                   |                                                                                                                                                                     |
| Name of Federal Candidate                                                                                                                                                                                                                                                                                                                                   |                             | <input type="checkbox"/> Support<br><input type="checkbox"/> Oppose                                                                               | Office Sought: <input type="checkbox"/> House District: _____<br><input type="checkbox"/> President <input type="checkbox"/> Senate State: _____                    |
| Calendar Year-To-Date<br>Per Election for Office Sought                                                                                                                                                                                                                                                                                                     |                             | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▶                 |                                                                                                                                                                     |
| (a) SUBTOTAL of Itemized Independent Expenditures..... ▶                                                                                                                                                                                                                                                                                                    |                             | <b>6.07</b>                                                                                                                                       |                                                                                                                                                                     |
| (b) SUBTOTAL of Unitemized Independent Expenditures ..... ▶                                                                                                                                                                                                                                                                                                 |                             |                                                                                                                                                   |                                                                                                                                                                     |
| (c) TOTAL Independent Expenditures..... ▶                                                                                                                                                                                                                                                                                                                   |                             | <b>372564.28</b>                                                                                                                                  |                                                                                                                                                                     |
| 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. |                             |                                                                                                                                                   |                                                                                                                                                                     |
| Signature<br><b>R. Russ Walker</b>                                                                                                                                                                                                                                                                                                                          |                             | Date<br>M M M / D D D / Y Y Y Y Y Y<br><b>06 / 20 / 2014</b>                                                                                      |                                                                                                                                                                     |
|                                                                                                                                                                                                                                                                                                                                                             |                             | [Electronically Filed]                                                                                                                            |                                                                                                                                                                     |