

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

NAME OF COMMITTEE (In Full) Freedom Partners Action Fund, Inc. FEC IDENTIFICATION NUMBER C C00564765

Check if [X] 24-hour report [] 48-hour report [] New report [X] Amends report filed on 10 / 29 / 2014

Full Name of Payee I360 Mailing Address PO BOX 37046 City BALTIMORE State MD Zip Code 21297 Purpose of Expenditure MEDIA PLACEMENT - BROADCAST/CABLE/SATELLITE Category/Type Name of Federal Candidate JONI K. ERNST Support [X] Oppose [] Office Sought: [] President [X] Senate State: IA Calendar Year-To-Date Per Election for Office Sought 4512935.27

Date of Public Distribution/Dissemination 10 / 29 / 2014 Amount 665536.00 Transaction ID : SE24.205 Date of Disbursement or Obligation 10 / 23 / 2014 Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Full Name of Payee I360 Mailing Address PO BOX 37046 City BALTIMORE State MD Zip Code 21297 Purpose of Expenditure PHONE CALLS Category/Type Name of Federal Candidate JONI K. ERNST Support [X] Oppose [] Office Sought: [] President [X] Senate State: IA Calendar Year-To-Date Per Election for Office Sought 4512935.27

Date of Public Distribution/Dissemination 10 / 28 / 2014 Amount 15572.60 Transaction ID : SE24.231 Date of Disbursement or Obligation 11 / 10 / 2014 Disbursement For: [] Primary [X] General 2014 [] Other (specify)

Table with 2 columns: Description and Amount. (a) SUBTOTAL of Itemized Independent Expenditures 681108.60 (b) SUBTOTAL of Unitemized Independent Expenditures (c) TOTAL Independent Expenditures 681108.60

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 Thomas F. Maxwell III [Electronically Filed] Date 11 / 13 / 2014