

**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)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12S)

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 Y
04 / 01 / 2014 To: M M / D D / Y Y Y Y Y Y
04 / 30 / 2014

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y Y 2014		595214.29
(b) Cash on Hand at Beginning of Reporting Period.....	639368.26	
(c) Total Receipts (from Line 19)	407575.02	1365921.10
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	1046943.28	1961135.39
7. Total Disbursements (from Line 31)	518202.14	1432394.25
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	528741.14	528741.14
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	



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

For further information contact:

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

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

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 M	/	D D D	/	Y Y Y Y Y Y
04	/	01	/	2014

To:

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	30	/	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).....

259898.40

753120.65

(ii) Unitemized

109876.62

575000.45

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ►

369775.02

1328121.10

(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) ►

369775.02

1328121.10

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).....

37800.00

37800.00

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

17. Other Federal Receipts

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

0.00

0.00

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3).....

0.00

0.00

(b) Levin Funds (from Schedule H5)

0.00

0.00

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

0.00

0.00

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

407575.02

1365921.10

20. Total Federal Receipts

(subtract Line 18(c) from Line 19) ►

407575.02

1365921.10

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	279916.06	736192.47
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	279916.06	736192.47
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)	238286.08	693164.52
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	100.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	100.00
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)) ..	518202.14	1432394.25
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	518202.14	1432394.25

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	369775.02	1328121.10
34. Total Contribution Refunds (from Line 28(d))	0.00	100.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	369775.02	1328021.10
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ►	279916.06	736192.47
37. Offsets to Operating Expenditures (from Line 15, page 3).....	37800.00	37800.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ►	242116.06	698392.47

: 97 `A-G79 @G B9CI G`H9LH`F9 @G H98 `HC`5 `F9DCFH`G7 <98I @G `CF`+H9A-N5H-CB

Form/Schedule: F3XN
Transaction ID :

The adjusting entries on line 21b to Freedomworks, Inc. are made to correct all in kinds from Freedomworks listed on 11a that were made for expenses related to independent expenditure and/or other disbursements and are not operating expenditures. FECfile automatically creates an expense on line 21b for every in kind entered, but several of these are for expenses that may be itemized on lines 24 and 29. All contributors who have given more than 200 calendar year to date and who did not provide employer and occupation information have been contacted to obtain this information. Once the information is received, the Committee will amend its reports to disclose the updated information.

Form/Schedule:
Transaction ID:

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)

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NAME OF COMMITTEE (In Full)

FREEDOMWORKS FOR AMERICA

Full Name (Last, First, Middle Initial)

A. James Adams

Mailing Address R73 Box 3394

City State Zip Code
 Alton MO 65606

FEC ID number of contributing
federal political committee.

C

Name of Employer

James Adams

Occupation

Farmer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
 04 / 29 / 2014

Transaction ID : SA11AI.27303

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. Mr. Steve Alford

Mailing Address 153 Saint John Ln

City State Zip Code
 Leesville LA 71446

FEC ID number of contributing
federal political committee.

C

Name of Employer

Alford Motors Inc

Occupation

Auto Dealer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
 04 / 21 / 2014

Transaction ID : SA11AI.27338

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. John Allen

Mailing Address 8701 County 9 Rd

City State Zip Code
 Eyota MN 55934

FEC ID number of contributing
federal political committee.

C

Name of Employer

John Allen

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
 04 / 28 / 2014

Transaction ID : SA11AI.27348

Amount of Each Receipt this Period

250.00

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

850.00

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. Mr. Erwin Allmann

Mailing Address 17 Cristine Cir

City State Zip Code
 Penfield NY 14526

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allison Allmann

Occupation

Industrial Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
 04 / 14 / 2014

Transaction ID : SA11AI.27354

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Kathie Bader

Mailing Address 1124 W Tokay St

City State Zip Code
 Lodi CA 95240

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
 04 / 13 / 2014

Transaction ID : SA11AI.27458

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

C. Kathie Bader

Mailing Address 1124 W Tokay St

City State Zip Code
 Lodi CA 95240

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
 04 / 13 / 2014

Transaction ID : SA11AI.27459

Amount of Each Receipt this Period

100.00

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

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

700.00

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

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

FREEDOMWORKS FOR AMERICA

Full Name (Last, First, Middle Initial)

A. Kathie Bader

Mailing Address 1124 W Tokay St

City State Zip Code
Lodi CA 95240

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 Y
04 / 13 / 2014

Transaction ID : SA11AI.27460

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. Kathie Bader

Mailing Address 1124 W Tokay St

City State Zip Code
Lodi CA 95240

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Retired

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
04 / 13 / 2014

Transaction ID : SA11AI.27461

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

C. Kathie Bader

Mailing Address 1124 W Tokay St

City State Zip Code
Lodi CA 95240

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 13 / 2014

Transaction ID : SA11AI.27462

Amount of Each Receipt this Period

100.00

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

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

300.00

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. Kathie Bader

Mailing Address 1124 W Tokay St

City State Zip Code
Lodi CA 95240

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
04 / 13 / 2014

Transaction ID : SA11AI.27463

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. Scott Banister

Mailing Address Po Box 997

City State Zip Code
Half Moon Bay CA 94019

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Angel Investor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

6000.00

Date of Receipt

M M / D D / Y Y Y Y
04 / 20 / 2014

Transaction ID : SA11AI.27504

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Scott Banister

Mailing Address Po Box 997

City State Zip Code
Half Moon Bay CA 94019

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Angel Investor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

6750.00

Date of Receipt

M M / D D / Y Y Y Y
04 / 20 / 2014

Transaction ID : SA11AI.27505

Amount of Each Receipt this Period

750.00

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

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

1850.00

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. Scott Banister

Mailing Address Po Box 997

City State Zip Code
 Half Moon Bay CA 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 ▼

7250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 / 20 / 2014

Transaction ID : SA11AI.27506

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Scott Banister

Mailing Address Po Box 997

City State Zip Code
 Half Moon Bay CA 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 ▼

7750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 / 20 / 2014

Transaction ID : SA11AI.27507

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. Scott Banister

Mailing Address Po Box 997

City State Zip Code
 Half Moon Bay CA 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 ▼

8000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 / 24 / 2014

Transaction ID : SA11AI.27509

Amount of Each Receipt this Period

250.00

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

1250.00

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. Scott Banister

Mailing Address Po Box 997

City State Zip Code
Half Moon Bay CA 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 ▼

8500.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 26 / 2014

Transaction ID : SA11AI.27508

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Ms. Zandra Bean

Mailing Address 8503 Massey Rd

City State Zip Code
Pilot Point TX 76258

FEC ID number of contributing
federal political committee.

C

Name of Employer

Zandra Bean

Occupation

Mgt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 29 / 2014

Transaction ID : SA11AI.27554

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. Mrs. Kim Bergstrom

Mailing Address 907 Iroquois Ave

City State Zip Code
Rockford IL 61102

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
04 / 28 / 2014

Transaction ID : SA11AI.27612

Amount of Each Receipt this Period

100.00

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

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

1100.00

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

Use separate schedule(s)
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(check only one)

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NAME OF COMMITTEE (In Full)

FREEDOMWORKS FOR AMERICA

Full Name (Last, First, Middle Initial)

A. Rhoda Binckes

Mailing Address 27171 Cordero Ln

City State Zip Code
 Mission Viejo CA 92691

FEC ID number of contributing federal political committee.

C

Name of Employer

Lucas Oil Products

Occupation

Accounting

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
 04 / 11 / 2014

Transaction ID : SA11AI.27637

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Rhoda Binckes

Mailing Address 27171 Cordero Ln

City State Zip Code
 Mission Viejo CA 92691

FEC ID number of contributing federal political committee.

C

Name of Employer

Lucas Oil Products

Occupation

Accounting

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y
 04 / 30 / 2014

Transaction ID : SA11AI.27636

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Mr. Kirk Blackmon

Mailing Address 3017 Alton Rd

City State Zip Code
 Ft Worth TX 76109

FEC ID number of contributing federal political committee.

C

Name of Employer

Bms Enterprises Inc.

Occupation

Cceo/owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

33333.00

Date of Receipt

M M / D D / Y Y Y Y Y
 04 / 17 / 2014

Transaction ID : SA11AI.27650

Amount of Each Receipt this Period

33333.00

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

34833.00

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

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

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

FOR LINE NUMBER: PAGE 14 OF 220

(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. Mr. Jerome Bleeg

Mailing Address 1999 Campbell Ave

City State Zip Code
San Jose CA 95125

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
04 / 03 / 2014

Transaction ID : SA11AI.27659

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

B. Mr. Mark Boone

Mailing Address 202 E. Ave Sierra Madre

City State Zip Code
Gilbert AZ 85296

FEC ID number of contributing
federal political committee.

C

Name of Employer

Medtronic

Occupation
Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 18 / 2014

Transaction ID : SA11AI.27708

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

C. Mr. Mark Boone

Mailing Address 202 E. Ave Sierra Madre

City State Zip Code
Gilbert AZ 85296

FEC ID number of contributing
federal political committee.

C

Name of Employer

Medtronic

Occupation
Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 18 / 2014

Transaction ID : SA11AI.27709

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**

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

FOR LINE NUMBER:
(check only one)

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☒ 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. Mark Boone

Mailing Address 202 E. Ave Sierra Madre

City State Zip Code
 Gilbert AZ 85296

FEC ID number of contributing
federal political committee.

C

Name of Employer

Medtronic

Occupation

Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

04 / 18 / 2014

Transaction ID : SA11AI.27710

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. Mr. Mark Boone

Mailing Address 202 E. Ave Sierra Madre

City State Zip Code
 Gilbert AZ 85296

FEC ID number of contributing
federal political committee.

C

Name of Employer

Medtronic

Occupation

Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

04 / 25 / 2014

Transaction ID : SA11AI.27711

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

C. Kenneth Boothe

Mailing Address 1001 East Fm 700

City State Zip Code
 Big Spring TX 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 ▼

300.00

Date of Receipt

04 / 06 / 2014

Transaction ID : SA11AI.27714

Amount of Each Receipt this Period

75.00

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

275.00

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)

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☒ 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. Gregory Boxold

Mailing Address 838 Kaahue St

City

Honolulu

State

HI

Zip Code

96825

FEC ID number of contributing
federal political committee.

C

Name of Employer

Ubs Financial Service

Occupation

Financial Advisor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 21 / 2014

Transaction ID : SA11AI.27738

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Mr. John Brandt

Mailing Address 2129 12th Ave E

City

Hibbing

State

MN

Zip Code

55746

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 21 / 2014

Transaction ID : SA11AI.27766

Amount of Each Receipt this Period

1000.00

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 ▼

250.00

Date of Receipt

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

Transaction ID : SA11AI.27771

Amount of Each Receipt this Period

50.00

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

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

1300.00

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 17 OF 220

☒ 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. 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 ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 14 / 2014

Transaction ID : SA11AI.27772

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

B. Mr. Peter Brown

Mailing Address 12003 S Gardner Rd

City

Cheney

State

WA

Zip Code

99004

FEC ID number of contributing
federal political committee.

C

Name of Employer

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
04 / 30 / 2014

Transaction ID : SA11AI.27829

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. W Michael Brown

Mailing Address 2910 Darnley Pl

City

Vienna

State

VA

Zip Code

22181

FEC ID number of contributing
federal political committee.

C

Name of Employer

Olympus Imported Auto Parts Corp

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
04 / 28 / 2014

Transaction ID : SA11AI.27841

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**

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

FOR LINE NUMBER: PAGE 18 OF 220

(check only one)

<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. W Michael Brown

Mailing Address 2910 Darnley PI

City	State	Zip Code
Vienna	VA	22181

FEC ID number of contributing federal political committee.

C

Name of Employer

Olympus Imported Auto Parts Corp

Occupation

Business Owner

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
04		28		2014

Transaction ID : SA11AI.27842

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. W Michael Brown

Mailing Address 2910 Darnley PI

City	State	Zip Code
Vienna	VA	22181

FEC ID number of contributing federal political committee.

C

Name of Employer

Olympus Imported Auto Parts Corp

Occupation

Business Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		28		2014

Transaction ID : SA11AI.27843

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. W Michael Brown

Mailing Address 2910 Darnley PI

City	State	Zip Code
Vienna	VA	22181

FEC ID number of contributing federal political committee.

C

Name of Employer

Olympus Imported Auto Parts Corp

Occupation

Business Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		28		2014

Transaction ID : SA11AI.27844

Amount of Each Receipt this Period

250.00

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

750.00

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)

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☒ 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. W Michael Brown

Mailing Address 2910 Darnley PI

City

Vienna

State

VA

Zip Code

22181

FEC ID number of contributing
federal political committee.

C

Name of Employer

Olympus Imported Auto Parts Corp

Occupation

Business Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

04 / 28 / 2014

Transaction ID : SA11AI.27845

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. W Michael Brown

Mailing Address 2910 Darnley PI

City

Vienna

State

VA

Zip Code

22181

FEC ID number of contributing
federal political committee.

C

Name of Employer

Olympus Imported Auto Parts Corp

Occupation

Business Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

04 / 28 / 2014

Transaction ID : SA11AI.27846

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. W Michael Brown

Mailing Address 2910 Darnley PI

City

Vienna

State

VA

Zip Code

22181

FEC ID number of contributing
federal political committee.

C

Name of Employer

Olympus Imported Auto Parts Corp

Occupation

Business Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1750.00

Date of Receipt

04 / 28 / 2014

Transaction ID : SA11AI.27847

Amount of Each Receipt this Period

250.00

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

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

750.00

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)

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☒ 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. W Michael Brown

Mailing Address 2910 Darnley PI

City

Vienna

State

VA

Zip Code

22181

FEC ID number of contributing
federal political committee.

C

Name of Employer

Olympus Imported Auto Parts Corp

Occupation

Business Owner

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

04 / 28 / 2014

Transaction ID : SA11AI.27848

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. W Michael Brown

Mailing Address 2910 Darnley PI

City

Vienna

State

VA

Zip Code

22181

FEC ID number of contributing
federal political committee.

C

Name of Employer

Olympus Imported Auto Parts Corp

Occupation

Business Owner

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

2250.00

Date of Receipt

04 / 28 / 2014

Transaction ID : SA11AI.27849

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. W Michael Brown

Mailing Address 2910 Darnley PI

City

Vienna

State

VA

Zip Code

22181

FEC ID number of contributing
federal political committee.

C

Name of Employer

Olympus Imported Auto Parts Corp

Occupation

Business Owner

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

04 / 30 / 2014

Transaction ID : SA11AI.27850

Amount of Each Receipt this Period

-250.00

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

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

250.00

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

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

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(check only one)

<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. W Michael Brown

Mailing Address 2910 Darnley PI

City	State	Zip Code
Vienna	VA	22181

FEC ID number of contributing federal political committee.

C

Name of Employer

Olympus Imported Auto Parts Corp

Occupation

Business Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	30	/	2014

Transaction ID : SA11AI.27851

Amount of Each Receipt this Period

-250.00

Full Name (Last, First, Middle Initial)

B. W Michael Brown

Mailing Address 2910 Darnley PI

City	State	Zip Code
Vienna	VA	22181

FEC ID number of contributing federal political committee.

C

Name of Employer

Olympus Imported Auto Parts Corp

Occupation

Business Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	30	/	2014

Transaction ID : SA11AI.27852

Amount of Each Receipt this Period

-250.00

Full Name (Last, First, Middle Initial)

C. W Michael Brown

Mailing Address 2910 Darnley PI

City	State	Zip Code
Vienna	VA	22181

FEC ID number of contributing federal political committee.

C

Name of Employer

Olympus Imported Auto Parts Corp

Occupation

Business Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	30	/	2014

Transaction ID : SA11AI.27853

Amount of Each Receipt this Period

-250.00

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

-750.00

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 PageFOR LINE NUMBER:
(check only one)

PAGE 22 OF 220

<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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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. W Michael Brown

Mailing Address 2910 Darnley PI

City

Vienna

State

VA

Zip Code

22181

FEC ID number of contributing
federal political committee.

C

Name of Employer

Olympus Imported Auto Parts Corp

Occupation

Business Owner

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	30	/	2014

Transaction ID : SA11AI.27854

Amount of Each Receipt this Period

-250.00

Full Name (Last, First, Middle Initial)

B. W Michael Brown

Mailing Address 2910 Darnley PI

City

Vienna

State

VA

Zip Code

22181

FEC ID number of contributing
federal political committee.

C

Name of Employer

Olympus Imported Auto Parts Corp

Occupation

Business Owner

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	30	/	2014

Transaction ID : SA11AI.27855

Amount of Each Receipt this Period

-250.00

Full Name (Last, First, Middle Initial)

C. W Michael Brown

Mailing Address 2910 Darnley PI

City

Vienna

State

VA

Zip Code

22181

FEC ID number of contributing
federal political committee.

C

Name of Employer

Olympus Imported Auto Parts Corp

Occupation

Business Owner

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	30	/	2014

Transaction ID : SA11AI.27856

Amount of Each Receipt this Period

-250.00

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

-750.00

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

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 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. W Michael Brown

Mailing Address 2910 Darnley Pl

City

Vienna

State

VA

Zip Code

22181

FEC ID number of contributing
federal political committee.

C

Name of Employer

Olympus Imported Auto Parts Corp

Occupation

Business Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

04 / 30 / 2014

Transaction ID : SA11AI.27857

Amount of Each Receipt this Period

-250.00

Full Name (Last, First, Middle Initial)

B. Mrs. Linda Bussing

Mailing Address P. O. Box 231

City

Argyle

State

NY

Zip Code

12809

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Info Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

04 / 16 / 2014

Transaction ID : SA11AI.27913

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 ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

04 / 30 / 2014

Transaction ID : SA11AI.27934

Amount of Each Receipt this Period

500.00

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

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

750.00

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)

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☒ 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. 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

M M / D D / Y Y Y Y Y Y
04 / 30 / 2014

Transaction ID : SA11AI.27935

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 ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 30 / 2014

Transaction ID : SA11AI.27936

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 ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 30 / 2014

Transaction ID : SA11AI.27937

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**

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. 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

04 / 30 / 2014

Transaction ID : SA11AI.27938

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 ▼

3000.00

Date of Receipt

04 / 30 / 2014

Transaction ID : SA11AI.27939

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 ▼

3500.00

Date of Receipt

04 / 30 / 2014

Transaction ID : SA11AI.27940

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**

Use separate schedule(s)
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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. Barbara Cameron

Mailing Address 4268 Pacifico Ln

City State Zip Code
 Las Vegas NV 89135

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 04 30 2014

Transaction ID : SA11AI.27941

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Barbara Cameron

Mailing Address 4268 Pacifico Ln

City State Zip Code
 Las Vegas NV 89135

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4500.00

Date of Receipt

M M / D D / Y Y Y Y Y
 04 30 2014

Transaction ID : SA11AI.27942

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. Ms. Elizabeth Candow

Mailing Address 3 Lafayette St

City State Zip Code
 Arlington MA 02474

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
 04 11 2014

Transaction ID : SA11AI.27971

Amount of Each Receipt this Period

50.00

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

1050.00

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
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(check only one)

<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. Lawrence Carr

Mailing Address P O Box 279

City	State	Zip Code
Altair	TX	77412

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
04	/	28	/	2014

Transaction ID : SA11AI.27996

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. Lawrence Carr

Mailing Address P O Box 279

City	State	Zip Code
Altair	TX	77412

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
04	/	28	/	2014

Transaction ID : SA11AI.27997

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

C. Lawrence Carr

Mailing Address P O Box 279

City	State	Zip Code
Altair	TX	77412

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
04	/	28	/	2014

Transaction ID : SA11AI.27998

Amount of Each Receipt this Period

50.00

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

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

250.00

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. Cynthia Chace

Mailing Address P. O. Box 66

City

Medicine Bow

State

WY

Zip Code

82329

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cynthia Chace

Occupation

Transcription

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

04 / 28 / 2014

Transaction ID : SA11AI.28040

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Cynthia Chace

Mailing Address P. O. Box 66

City

Medicine Bow

State

WY

Zip Code

82329

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cynthia Chace

Occupation

Transcription

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

04 / 28 / 2014

Transaction ID : SA11AI.28041

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Mr. Jack Chaney

Mailing Address 2683 Perry Hwy

City

Hadley

State

PA

Zip Code

16130

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Info Requested

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

04 / 04 / 2014

Transaction ID : SA11AI.28063

Amount of Each Receipt this Period

250.00

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

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

750.00

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. Michael Chodorcoff

Mailing Address 109 Jesse Ct

City State Zip Code
Montville NJ 07045

FEC ID number of contributing
federal political committee.

C

Name of Employer

Michael Chodorcoff

Occupation

Insurance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y
04 / 16 / 2014

Transaction ID : SA11AI.28086

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Mrs. Barbara Clark

Mailing Address 869 Longleaf Pl

City State Zip Code
Minden NV 89423

FEC ID number of contributing
federal political committee.

C

Name of Employer

Barbara Clark

Occupation

Real Estate Investment

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y
04 / 11 / 2014

Transaction ID : SA11AI.28096

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

C. Martin Cleveland

Mailing Address 5 Brentmeade Cv

City State Zip Code
Jackson TN 38305

FEC ID number of contributing
federal political committee.

C

Name of Employer

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
04 / 04 / 2014

Transaction ID : SA11AI.28115

Amount of Each Receipt this Period

225.00

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

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

825.00

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. Harvey Cody

Mailing Address 207 Paul Revere Dr

City State Zip Code
Houston TX 77024

FEC ID number of contributing
federal political committee.

C

Name of Employer

Petro Source Investments, Inc.

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
04 / 30 / 2014

Transaction ID : SA11AI.28122

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Rick Colglazier

Mailing Address 760 Freeman Ridge Rd.

City State Zip Code
Nashville IN 47448

FEC ID number of contributing
federal political committee.

C

Name of Employer

Rick Colglazier

Occupation

Financial Services

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 28 / 2014

Transaction ID : SA11AI.28127

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

C. Ms. Juanita Cooke

Mailing Address 4319 Iroquois Ave

City State Zip Code
Lakewood CA 90713

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 ▼

1800.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 11 / 2014

Transaction ID : SA11AI.28158

Amount of Each Receipt this Period

800.00

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

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

1350.00

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. Steven Cooper

Mailing Address 6619 Emerald Ash Ct

City State Zip Code
Humble TX 77346

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Sale/service Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 30 / 2014

Transaction ID : SA11AI.28163

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. Mr. William Corona

Mailing Address Po Box 61735

City State Zip Code
Sunnyvale CA 94088

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

335.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 28 / 2014

Transaction ID : SA11AI.28178

Amount of Each Receipt this Period

35.00

Full Name (Last, First, Middle Initial)

c. S. Christopher Costa

Mailing Address 1206 Clearfield Cir

City State Zip Code
Lutherville Timonium MD 21093

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Sales Person

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 23 / 2014

Transaction ID : SA11AI.28185

Amount of Each Receipt this Period

500.00

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

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

635.00

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

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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. Steven Cowles

Mailing Address 6212 Elati Ct

City

Alexandria

State

VA

Zip Code

22310

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cowles Ford Inc

Occupation

Auto Dealer

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	16	/	2014

Transaction ID : SA11AI.28206

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

B. Mr. Thomas Crabtree

Mailing Address 7859 Twin Ridge Drive

City

Glen Burnie

State

MD

Zip Code

21061

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	28	/	2014

Transaction ID : SA11AI.28221

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

C. Mr. Edwin Crebs

Mailing Address 1846 Granger Ct

City

Saint Helena

State

CA

Zip Code

94574

FEC ID number of contributing
federal political committee.

C

Name of Employer

Polaris Enterprise Group

Occupation

Underwriter

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	16	/	2014

Transaction ID : SA11AI.28234

Amount of Each Receipt this Period

500.00

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

3100.00

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

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for each category of the
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NAME OF COMMITTEE (In Full)

FREEDOMWORKS FOR AMERICA

Full Name (Last, First, Middle Initial)

A. Krys Crouch

Mailing Address 377 May Avenue

City State Zip Code
 Glen Ellyn IL 60137

FEC ID number of contributing
federal political committee.

C

Name of Employer

None

Occupation

Analyst

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
 04 / 17 / 2014

Transaction ID : SA11AI.28243

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. Stephen Deeter

Mailing Address 958 Halstead St

City State Zip Code
 Deltona FL 32725

FEC ID number of contributing
federal political committee.

C

Name of Employer

Stephen Deeter

Occupation

Truck Driver

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
 04 / 11 / 2014

Transaction ID : SA11AI.28345

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. Mr. Dennis Del Grosso

Mailing Address 2 Cogan Ave Ste 106

City State Zip Code
 Plattsburgh NY 12901

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 ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 / 30 / 2014

Transaction ID : SA11AI.28353

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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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. David Denzel

Mailing Address 7125 Northledge Dr

City State Zip Code
 Lockport NY 14094

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 04 / 14 / 2014

Transaction ID : SA11AI.28371

Amount of Each Receipt this Period

800.00

Full Name (Last, First, Middle Initial)

B. Mr. William Descher

Mailing Address 6520 Sunplex Dr

City State Zip Code
 Ocean Springs MS 39564

FEC ID number of contributing
federal political committee.

C

Name of Employer

Iod Enterprises Inc, Dbmcdonalds Res

Occupation
Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y
 04 / 11 / 2014

Transaction ID : SA11AI.28383

Amount of Each Receipt this Period

375.00

Full Name (Last, First, Middle Initial)

C. Ernest Dimaria

Mailing Address 3200 NE 43rd Pl

City State Zip Code
 Ocala FL 34479

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
 04 / 30 / 2014

Transaction ID : SA11AI.28409

Amount of Each Receipt this Period

75.00

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

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

1250.00

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 Donohue

Mailing Address 7 Vicksburg Ct

City

Madison

State

WI

Zip Code

53718

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

950.00

Date of Receipt

04 / 04 / 2014

Transaction ID : SA11AI.28443

Amount of Each Receipt this Period

750.00

Full Name (Last, First, Middle Initial)

B. Mark Doohen

Mailing Address 46845 276th Street

City

Lennox

State

SD

Zip Code

57039

FEC ID number of contributing
federal political committee.

C

Name of Employer

Avera Hosp

Occupation

Md

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

04 / 18 / 2014

Transaction ID : SA11AI.28453

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Mr. Donald J. Douglass

Mailing Address 150 Edgewater Way

City

Merritt Island

State

FL

Zip Code

32953

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

750.00

Date of Receipt

04 / 04 / 2014

Transaction ID : SA11AI.28463

Amount of Each Receipt this Period

300.00

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

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

1300.00

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. Martha Dunn

Mailing Address 320 Kings Mt. Rd.

City	State	Zip Code
Woodside	CA	94062

FEC ID number of contributing
federal political committee.

C

Name of Employer

Martha Dunn

Occupation

Riding Instructor

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
04	/	25	/	2014

Transaction ID : SA11AI.28511

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Martha Dunn

Mailing Address 320 Kings Mt. Rd.

City	State	Zip Code
Woodside	CA	94062

FEC ID number of contributing
federal political committee.

C

Name of Employer

Martha Dunn

Occupation

Riding Instructor

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
04	/	25	/	2014

Transaction ID : SA11AI.28512

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Tyler Durham

Mailing Address 1404 Auburn Rd

City	State	Zip Code
Notasulga	AL	36866

FEC ID number of contributing
federal political committee.

C

Name of Employer

Bennywhitehead Trucking

Occupation

Truck Driver

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
04	/	29	/	2014

Transaction ID : SA11AI.28523

Amount of Each Receipt this Period

250.00

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

750.00

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. Dennis Duvall

Mailing Address 11183 Kadota Ave

City State Zip Code
 Pomona CA 91766

FEC ID number of contributing
federal political committee.

C

Name of Employer

Dennis Duvall

Occupation

Property Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
 04 / 23 / 2014

Transaction ID : SA11AI.28534

Amount of Each Receipt this Period

350.00

Full Name (Last, First, Middle Initial)

B. Mr. Joe Eagleson

Mailing Address 12 Oak St

City State Zip Code
 Kennebunkport ME 04046

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
 04 / 30 / 2014

Transaction ID : SA11AI.28538

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. James Eller

Mailing Address 3587 Conrad Ave.

City State Zip Code
 San Diego CA 92117

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 ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y
 04 / 06 / 2014

Transaction ID : SA11AI.28585

Amount of Each Receipt this Period

200.00

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

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

1050.00

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. Debra Ensor

Mailing Address P. O. Box 770

City State Zip Code
 Simpsonville KY 40067

FEC ID number of contributing
federal political committee.

C

Name of Employer

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
 04 / 11 / 2014

Transaction ID : SA11AI.28606

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Lelia Farr

Mailing Address 1 Fair Oaks Dr

City State Zip Code
 Saint Louis MO 63124

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 04 / 29 / 2014

Transaction ID : SA11AI.28649

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Mrs. Elaine Fiveland

Mailing Address 27468 Prominence Rd

City State Zip Code
 Sun City CA 92586

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Medical Transcriber

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
 04 / 28 / 2014

Transaction ID : SA11AI.28690

Amount of Each Receipt this Period

100.00

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. Ms. Karen J. Fletcher

Mailing Address 846 Garfield St

City

Denver

State

CO

Zip Code

80206

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

04 / 03 / 2014

Transaction ID : SA11AI.28710

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. Forrest Foley

Mailing Address 1512 Cafe Dumonde

City

Conroe

State

TX

Zip Code

77304

FEC ID number of contributing
federal political committee.

C

Name of Employer

Forrest Foley

Occupation

Lawyer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

04 / 14 / 2014

Transaction ID : SA11AI.28720

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Mr. Eugene Frantz

Mailing Address 608 Stoney Run Rd

City

Pottsville

State

PA

Zip Code

17901

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

04 / 28 / 2014

Transaction ID : SA11AI.28759

Amount of Each Receipt this Period

100.00

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. Ms. Larrilee Frazier

Mailing Address 161 Brokenwood Lane

City State Zip Code
 Fairfield Glade TN 38558

FEC ID number of contributing
federal political committee.

C

Name of Employer

Hilltoppers, Inc.

Occupation

P.r. Coordinator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y
 04 / 26 / 2014

Transaction ID : SA11AI.28760

Amount of Each Receipt this Period

50.00

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 ▼

111412.75

Date of Receipt

M M / D D / Y Y Y Y Y
 04 / 23 / 2014

Transaction ID : SA11AI.32415

Amount of Each Receipt this Period

1828.47

In-kind - Travel

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 ▼

112972.18

Date of Receipt

M M / D D / Y Y Y Y Y
 04 / 28 / 2014

Transaction ID : SA11AI.32418

Amount of Each Receipt this Period

1559.43

In-kind - Travel

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

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

3437.90

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 ▼

114302.18

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 30 / 2014

Transaction ID : SA11AI.32416

Amount of Each Receipt this Period

80.00

In-kind - Registration Fee

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 ▼

114222.18

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 30 / 2014

Transaction ID : SA11AI.32417

Amount of Each Receipt this Period

1250.00

In-kind - Equipment Usage

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 ▼

123443.28

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 30 / 2014

Transaction ID : SA11AI.32490

Amount of Each Receipt this Period

9141.10

In-kind - Travel-Independent Expenditures

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

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

10471.10

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. Mr. Charles W. Frost

Mailing Address 176 S Collier Blvd Unit 405

City State Zip Code
 Marco Island FL 34145

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 ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
 04 / 28 / 2014

Transaction ID : SA11AI.28777

Amount of Each Receipt this Period

75.00

Full Name (Last, First, Middle Initial)

B. Jerome Fuemmeler

Mailing Address 461 County Road 257

City State Zip Code
 Armstrong MO 65230

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Jerome Fuemmeler

Farmer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
 04 / 21 / 2014

Transaction ID : SA11AI.28784

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

C. Robert Fuller

Mailing Address 10 10th st# 11-B

City State Zip Code
 Atlantic Beach FL 32233

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Self

Freelance Writer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

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

Transaction ID : SA11AI.28793

Amount of Each Receipt this Period

1000.00

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

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

1375.00

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. Wayne Gallo

Mailing Address P. O. Box 260167

City
Lakewood

State Zip Code
CO 80226

FEC ID number of contributing
federal political committee.

C

Name of Employer

Wayne Gallo

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 29 / 2014

Transaction ID : SA11AI.28820

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Connie Garrett

Mailing Address 14505 Valley View Drive

City
Skiatook

State Zip Code
OK 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 ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 08 / 2014

Transaction ID : SA11AI.28845

Amount of Each Receipt this Period

15.00

Full Name (Last, First, Middle Initial)

C. Daramana Gata

Mailing Address 2400 Westridge Dr

City
Plano

State Zip Code
TX 75075

FEC ID number of contributing
federal political committee.

C

Name of Employer

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
04 / 02 / 2014

Transaction ID : SA11AI.28854

Amount of Each Receipt this Period

250.00

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

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

765.00

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 ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1545.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 16 / 2014

Transaction ID : SA11AI.28909

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. 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 ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2545.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 19 / 2014

Transaction ID : SA11AI.28908

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

C. 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 ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2645.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 29 / 2014

Transaction ID : SA11AI.28910

Amount of Each Receipt this Period

100.00

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

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

1350.00

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. Jerry Glenn

Mailing Address 54 Fairway Dr

City

Southgate

State

KY

Zip Code

41071

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

04 / 11 / 2014

Transaction ID : SA11AI.28921

Amount of Each Receipt this Period

1500.00

Full Name (Last, First, Middle Initial)

B. Mr. Thomas Godfrey

Mailing Address 950 County Road Qq

City

Waupaca

State

WI

Zip Code

54981

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

04 / 15 / 2014

Transaction ID : SA11AI.28933

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

C. Margaret Goffreda

Mailing Address 55 Hunting Ridge Rd

City

Easton

State

CT

Zip Code

06612

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Info Requested

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

04 / 11 / 2014

Transaction ID : SA11AI.28938

Amount of Each Receipt this Period

500.00

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

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

2100.00

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 L. Grafton

Mailing Address 3320 S Justin St

City State Zip Code
Flagstaff AZ 86005

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
04 / 25 / 2014

Transaction ID : SA11AI.28963

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. Michael Greytak

Mailing Address 4909 122nd Ave Se

City State Zip Code
Bellevue WA 98006

FEC ID number of contributing
federal political committee.

C

Name of Employer

Michael Greytak

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
04 / 16 / 2014

Transaction ID : SA11AI.28998

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

C. Michael Greytak

Mailing Address 4909 122nd Ave Se

City State Zip Code
Bellevue WA 98006

FEC ID number of contributing
federal political committee.

C

Name of Employer

Michael Greytak

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
04 / 16 / 2014

Transaction ID : SA11AI.28999

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**

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. Michael Greytak

Mailing Address 4909 122nd Ave Se

City
Bellevue

State
WA

Zip Code
98006

FEC ID number of contributing
federal political committee.

C

Name of Employer

Michael Greytak

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

04 / 16 / 2014

Transaction ID : SA11AI.29000

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. Michael Greytak

Mailing Address 4909 122nd Ave Se

City
Bellevue

State
WA

Zip Code
98006

FEC ID number of contributing
federal political committee.

C

Name of Employer

Michael Greytak

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

04 / 16 / 2014

Transaction ID : SA11AI.29002

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

C. Michael Greytak

Mailing Address 4909 122nd Ave Se

City
Bellevue

State
WA

Zip Code
98006

FEC ID number of contributing
federal political committee.

C

Name of Employer

Michael Greytak

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

04 / 30 / 2014

Transaction ID : SA11AI.29001

Amount of Each Receipt this Period

100.00

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

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

250.00

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. Danna Grosvenor

Mailing Address 7410 W Layton Way

City State Zip Code
Littleton CO 80123

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
04 / 16 / 2014

Transaction ID : SA11AI.29014

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

B. Danna Grosvenor

Mailing Address 7410 W Layton Way

City State Zip Code
Littleton CO 80123

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 28 / 2014

Transaction ID : SA11AI.29015

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

C. Ms. Martha Haas

Mailing Address 5000 Sw 83rd St

City State Zip Code
Miami FL 33143

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
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
04 / 16 / 2014

Transaction ID : SA11AI.29034

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**Use separate schedule(s)
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(check only one)

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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. Mircea Halmajan

Mailing Address 407 Honeycomb Way

City

Jacksonville

State

FL

Zip Code

32259

FEC ID number of contributing
federal political committee.

C

Name of Employer

Patriot Transport

Occupation

Truck Driver

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	8		2	0	1	4

Transaction ID : SA11AI.29056

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. Mr. Richard Hardy

Mailing Address 41 Mcgregory Rd

City

Sturbridge

State

MA

Zip Code

01566

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	1		2	0	1	4

Transaction ID : SA11AI.29091

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

C. 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
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	8		2	0	1	4

Transaction ID : SA11AI.29254

Amount of Each Receipt this Period

100.00

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

500.00

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

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. Donald Hudson

Mailing Address 550 Randall Cir

City

Hummelstown

State

PA

Zip Code

17036

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 ▼

215.00

Date of Receipt

04 / 29 / 2014

Transaction ID : SA11AI.29356

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

B. Mr. Mark Hunter

Mailing Address 6201 Pickens St

City

Houston

State

TX

Zip Code

77007

FEC ID number of contributing
federal political committee.

C

Name of Employer

Southern Tire Mart

Occupation

Commercial Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

04 / 04 / 2014

Transaction ID : SA11AI.29376

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

C. George Jasper

Mailing Address 14907 Sun Harbor Dr.

City

Houston

State

TX

Zip Code

77062

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

04 / 14 / 2014

Transaction ID : SA11AI.29460

Amount of Each Receipt this Period

1000.00

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

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

1350.00

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. Mrs. Sandra Johnson

Mailing Address 2161 Menzel Pl.

City

Santa Clara

State

CA

Zip Code

95050

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 30 / 2014

Transaction ID : SA11AI.29494

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

B. Mr. Patrick Julian

Mailing Address 1101 Regency Ln

City

Libertyville

State

IL

Zip Code

60048

FEC ID number of contributing
federal political committee.

C

Name of Employer

Advanced Packaging & Fulfillment, Inc

Occupation

President

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 29 / 2014

Transaction ID : SA11AI.29534

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

C. Mr. Elliot Justin

Mailing Address 618 Autumn Ridge Rd

City

Bozeman

State

MT

Zip Code

59715

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Ceo

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 23 / 2014

Transaction ID : SA11AI.29543

Amount of Each Receipt this Period

500.00

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

750.00

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
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NAME OF COMMITTEE (In Full)

FREEDOMWORKS FOR AMERICA

Full Name (Last, First, Middle Initial)

A. Mr. George Kacek

Mailing Address 24 Westview Ave

City

Chelmsford

State

MA

Zip Code

01824

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

04 / 23 / 2014

Transaction ID : SA11AI.29549

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Joseph Kakaty

Mailing Address 9804 Moon Valley Pl

City

Las Vegas

State

NV

Zip Code

89134

FEC ID number of contributing
federal political committee.

C

Name of Employer

Edvisors Network

Occupation

Management

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

04 / 30 / 2014

Transaction ID : SA11AI.29555

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

C. Cary Katz

Mailing Address 9021 Grove Crest Ln

City

Las Vegas

State

NV

Zip Code

89134

FEC ID number of contributing
federal political committee.

C

Name of Employer

College Loan Corporation

Occupation

Board Member

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

50000.00

Date of Receipt

04 / 29 / 2014

Transaction ID : SA11AI.29575

Amount of Each Receipt this Period

50000.00

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

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

55250.00

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. Mrs. Julie Keith

Mailing Address 605 Falling Leaf Dr

City

Friendswood

State

TX

Zip Code

77546

FEC ID number of contributing
federal political committee.

C

Name of Employer

Ambox Ltd.

Occupation

Special Projects Mgr.

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

04 / 30 / 2014

Transaction ID : SA11AI.29584

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Mr. Don Kirchoff

Mailing Address 22814 Citron Cir

City

San Antonio

State

TX

Zip Code

78260

FEC ID number of contributing
federal political committee.

C

Name of Employer

Don Kirchoff

Occupation

Sales

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

400.00

Date of Receipt

04 / 30 / 2014

Transaction ID : SA11AI.29659

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

C. Cindy Kirkpatrick

Mailing Address 7009 Maryvale Ct

City

Indianapolis

State

IN

Zip Code

46214

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Info Requested

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

230.00

Date of Receipt

04 / 10 / 2014

Transaction ID : SA11AI.29665

Amount of Each Receipt this Period

115.00

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

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

565.00

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 Kleimola

Mailing Address 1149 Golf Club Lane

City

Crossville

State

TN

Zip Code

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 ▼

250.00

Date of Receipt

04 / 16 / 2014

Transaction ID : SA11AI.29682

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. Barbara Kleimola

Mailing Address 1149 Golf Club Lane

City

Crossville

State

TN

Zip Code

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 ▼

300.00

Date of Receipt

04 / 16 / 2014

Transaction ID : SA11AI.29683

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

C. Hugo Kloppe

Mailing Address 4415 Upper Bear River Rd

City

Ferndale

State

CA

Zip Code

95536

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Rancher

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

04 / 16 / 2014

Transaction ID : SA11AI.29689

Amount of Each Receipt this Period

250.00

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

400.00

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

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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. Wylie Koiner

Mailing Address 6501 Valley View Rd

City

Edmond

State

OK

Zip Code

73034

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Info Requested

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 07 / 2014

Transaction ID : SA11AI.29719

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

B. Mr. John Kotchian

Mailing Address 204 Skyline Dr

City

Middlebury

State

CT

Zip Code

06762

FEC ID number of contributing
federal political committee.

C

Name of Employer

Prudential Financial

Occupation

Insurance Agent

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 30 / 2014

Transaction ID : SA11AI.29730

Amount of Each Receipt this Period

150.00

Full Name (Last, First, Middle Initial)

C. Mr. Don Krahel

Mailing Address 51986 White Pine Dr

City

Saint Clairsville

State

OH

Zip Code

43950

FEC ID number of contributing
federal political committee.

C

Name of Employer

Don Krahel

Occupation

Marketing

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 24 / 2014

Transaction ID : SA11AI.29736

Amount of Each Receipt this Period

100.00

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

550.00

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
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(check only one)

<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. Mr. Don Krahel

Mailing Address 51986 White Pine Dr

City	State	Zip Code
Saint Clairsville	OH	43950

FEC ID number of contributing federal political committee.

C

Name of Employer

Don Krahel

Occupation

Marketing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
04	/	24	/	2014

Transaction ID : SA11AI.29737

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. Mr. Don Krahel

Mailing Address 51986 White Pine Dr

City	State	Zip Code
Saint Clairsville	OH	43950

FEC ID number of contributing federal political committee.

C

Name of Employer

Don Krahel

Occupation

Marketing

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
04	/	28	/	2014

Transaction ID : SA11AI.29738

Amount of Each Receipt this Period

-100.00

Full Name (Last, First, Middle Initial)

C. Mr. Vincent Kyle

Mailing Address 3802 Winkler Drive Ext Nw

City	State	Zip Code
Dover	OH	44622

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
04	/	11	/	2014

Transaction ID : SA11AI.29786

Amount of Each Receipt this Period

1000.00

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

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

1000.00

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

Use separate schedule(s)
for each category of the
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(check only one)

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NAME OF COMMITTEE (In Full)

FREEDOMWORKS FOR AMERICA

Full Name (Last, First, Middle Initial)

A. Deb Laudenslager

Mailing Address 8729 Lyon Valley Rd

City

New Tripoli

State

PA

Zip Code

18066

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

04 / 17 / 2014

Transaction ID : SA11AI.29856

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

B. Deb Laudenslager

Mailing Address 8729 Lyon Valley Rd

City

New Tripoli

State

PA

Zip Code

18066

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

04 / 17 / 2014

Transaction ID : SA11AI.29857

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

C. Deb Laudenslager

Mailing Address 8729 Lyon Valley Rd

City

New Tripoli

State

PA

Zip Code

18066

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

04 / 17 / 2014

Transaction ID : SA11AI.29858

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**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. William Laughlin

Mailing Address 3158 N. Mascot

City	State	Zip Code
Wichita	KS	67204

FEC ID number of contributing
federal political committee.

C

Name of Employer

William Laughlin

Occupation

Chiropractor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	09	/	2014

Transaction ID : SA11AI.29859

Amount of Each Receipt this Period

-10.00

Full Name (Last, First, Middle Initial)

B. William Laughlin

Mailing Address 3158 N. Mascot

City	State	Zip Code
Wichita	KS	67204

FEC ID number of contributing
federal political committee.

C

Name of Employer

William Laughlin

Occupation

Chiropractor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	09	/	2014

Transaction ID : SA11AI.29860

Amount of Each Receipt this Period

-10.00

Full Name (Last, First, Middle Initial)

C. William Laughlin

Mailing Address 3158 N. Mascot

City	State	Zip Code
Wichita	KS	67204

FEC ID number of contributing
federal political committee.

C

Name of Employer

William Laughlin

Occupation

Chiropractor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	09	/	2014

Transaction ID : SA11AI.29861

Amount of Each Receipt this Period

-10.00

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

-30.00

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
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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. William Laughlin

Mailing Address 3158 N. Mascot

City	State	Zip Code
Wichita	KS	67204

FEC ID number of contributing
federal political committee.

C

Name of Employer

William Laughlin

Occupation

Chiropractor

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
04	/	09	/	2014

Transaction ID : SA11AI.29862

Amount of Each Receipt this Period

-10.00

Full Name (Last, First, Middle Initial)

B. Mrs. Barbara Levich

Mailing Address 2651 Southwest 164th Place

City	State	Zip Code
Burien	WA	98166

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 M	/	D D D	/	Y Y Y Y Y Y
04	/	23	/	2014

Transaction ID : SA11AI.29966

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

C. Barbara Lewey

Mailing Address P. O. Box 167

City	State	Zip Code
Decorah	IA	52101

FEC ID number of contributing
federal political committee.

C

Name of Employer

Barbara Lewey

Occupation

Brewery Owner

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
04	/	16	/	2014

Transaction ID : SA11AI.29968

Amount of Each Receipt this Period

500.00

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

590.00

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 Lewey

Mailing Address P. O. Box 167

City	State	Zip Code
Decorah	IA	52101

FEC ID number of contributing
federal political committee.

C

Name of Employer

Barbara Lewey

Occupation

Brewery Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	16	/	2014

Transaction ID : SA11AI.29969

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Barbara Lewey

Mailing Address P. O. Box 167

City	State	Zip Code
Decorah	IA	52101

FEC ID number of contributing
federal political committee.

C

Name of Employer

Barbara Lewey

Occupation

Brewery Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	16	/	2014

Transaction ID : SA11AI.29970

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Frayda Lindemann

Mailing Address 1565 N Ocean Way

City	State	Zip Code
Palm Beach	FL	33480

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Info Requested

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
04	/	14	/	2014

Transaction ID : SA11AI.29988

Amount of Each Receipt this Period

250.00

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

750.00

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. Mrs. Mary Logasa

Mailing Address 957 Fairway Dr

City

Sonoma

State

CA

Zip Code

95476

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

M M / D D / Y Y Y Y Y
04 / 21 / 2014

Transaction ID : SA11AI.30028

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Ms. Alonah Lorenz

Mailing Address 160 40th Ave SE

City

Benson

State

MN

Zip Code

56215

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

M M / D D / Y Y Y Y Y
04 / 30 / 2014

Transaction ID : SA11AI.30044

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

C. Calvin T Lucy Jr

Mailing Address 13400 Kingsmill Rd

City

Midlothian

State

VA

Zip Code

23113

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

-35.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 28 / 2014

Transaction ID : SA11AI.30059

Amount of Each Receipt this Period

-35.00

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

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

265.00

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. Calvin T Lucy Jr

Mailing Address 13400 Kingsmill Rd

City State Zip Code
 Midlothian VA 23113

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

-70.00

Date of Receipt

04 / 28 / 2014

Transaction ID : SA11AI.30060

Amount of Each Receipt this Period

-35.00

Full Name (Last, First, Middle Initial)

B. Mr. Robert MacIsaac

Mailing Address 64 San Miguel Rd

City State Zip Code
 Pasadena CA 91105

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

04 / 14 / 2014

Transaction ID : SA11AI.30101

Amount of Each Receipt this Period

300.00

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
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

04 / 06 / 2014

Transaction ID : SA11AI.30115

Amount of Each Receipt this Period

100.00

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

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

365.00

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. James Mallett

Mailing Address 11924 E Lucky Ln

City

Wheatland

State

IN

Zip Code

47597

FEC ID number of contributing
federal political committee.

C

Name of Employer

James Mallett

Occupation

Landlord

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 14 / 2014

Transaction ID : SA11AI.30127

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. Mr. Victor Maslov

Mailing Address 87 Shore Drive

City

Nottingham

State

NH

Zip Code

03290

FEC ID number of contributing
federal political committee.

C

Name of Employer

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
04 / 01 / 2014

Transaction ID : SA11AI.30176

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Mr. Frank Matyac

Mailing Address 7600 Clark State Rd

City

Blacklick

State

OH

Zip Code

43004

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Info Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : SA11AI.30195

Amount of Each Receipt this Period

1000.00

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

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

2100.00

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

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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. 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 ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 28 / 2014

Transaction ID : SA11AI.30212

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Mrs. Roxsand McCreary

Mailing Address 5111 E Rockridge Rd

City

Phoenix

State

AZ

Zip Code

85018

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
04 / 30 / 2014

Transaction ID : SA11AI.30233

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

C. Ms. Mildred McElligott

Mailing Address 127 Shannon Rd

City

Lafayette

State

LA

Zip Code

70503

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

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
04 / 30 / 2014

Transaction ID : SA11AI.30243

Amount of Each Receipt this Period

300.00

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

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

650.00

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

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

FREEDOMWORKS FOR AMERICA

Full Name (Last, First, Middle Initial)

A. Mr. Randy Mears

Mailing Address 2400 Margolin Ln

City State Zip Code
 Clearwater FL 33764

FEC ID number of contributing federal political committee.

C

Name of Employer

Rannar Dev

Occupation

General Contractor

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
 04 / 09 / 2014

Transaction ID : SA11AI.30294

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Victoria Medley

Mailing Address 4202 Honey Oaks

City State Zip Code
 Seabrook TX 77586

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 ▼

599.98

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 04 / 21 / 2014

Transaction ID : SA11AI.30299

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

C. 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 ▼

600.00

Date of Receipt

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

Transaction ID : SA11AI.30325

Amount of Each Receipt this Period

200.00

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

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

650.00

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

Use separate schedule(s)
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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. Mrs. Joan Milam

Mailing Address 2673 Center Court Dr

City State Zip Code
Weston FL 33332

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
04 / 28 / 2014

Transaction ID : SA11AI.30355

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Mr. Dwight Miller

Mailing Address 1870 Northeast Beacon Court

City State Zip Code
Hillsboro OR 97124

FEC ID number of contributing
federal political committee.

C

Name of Employer

Millers Mini Mix Concrete

Occupation
Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 11 / 2014

Transaction ID : SA11AI.30368

Amount of Each Receipt this Period

600.00

Full Name (Last, First, Middle Initial)

C. Mr. Michael Miller

Mailing Address 4402 Boxwood Rd

City State Zip Code
Bethesda MD 20816

FEC ID number of contributing
federal political committee.

C

Name of Employer

Michael Miller

Occupation
Investments

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 28 / 2014

Transaction ID : SA11AI.30378

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. Michael Miller

Mailing Address 4402 Boxwood Rd

City

Bethesda

State

MD

Zip Code

20816

FEC ID number of contributing
federal political committee.

C

Name of Employer

Michael Miller

Occupation

Investments

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 28 / 2014

Transaction ID : SA11AI.30379

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Mr. Luis Mola

Mailing Address 2509 Castilla Isle

City

Fort Lauderdale

State

FL

Zip Code

33301

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Info Requested

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 01 / 2014

Transaction ID : SA11AI.30423

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. Mr. Jeffrey Moore

Mailing Address 2410 E T Ave

City

Portage

State

MI

Zip Code

49002

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

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
04 / 28 / 2014

Transaction ID : SA11AI.30432

Amount of Each Receipt this Period

250.00

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

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

1250.00

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. Dr. Barclay Morley

Mailing Address 3 Angelfish Cay Dr

City

Key Largo

State

FL

Zip Code

33037

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

04 / 21 / 2014

Transaction ID : SA11AI.30460

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Mr. Edward Morris

Mailing Address 3501 Cinderella Ln

City

Amarillo

State

TX

Zip Code

79121

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Consultant

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

04 / 10 / 2014

Transaction ID : SA11AI.30466

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. John Moselage

Mailing Address 1121 Shelton Ave Se

City

Renton

State

WA

Zip Code

98058

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Engineer

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

04 / 05 / 2014

Transaction ID : SA11AI.30490

Amount of Each Receipt this Period

100.00

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

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

850.00

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

Use separate schedule(s)
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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. John Moselage

Mailing Address 1121 Shelton Ave Se

City State Zip Code
 Renton WA 98058

FEC ID number of contributing federal political committee.

C

Name of Employer

The Boeing Co

Occupation

Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

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

Transaction ID : SA11AI.30491

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. John Moselage

Mailing Address 1121 Shelton Ave Se

City State Zip Code
 Renton WA 98058

FEC ID number of contributing federal political committee.

C

Name of Employer

The Boeing Co

Occupation

Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.00

Date of Receipt

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

Transaction ID : SA11AI.30492

Amount of Each Receipt this Period

60.00

Full Name (Last, First, Middle Initial)

C. Mr. Roy Mosser

Mailing Address P O Box 1066

City State Zip Code
 Decatur IL 62525

FEC ID number of contributing federal political committee.

C

Name of Employer

Roy Mosser

Occupation

Real Estate

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

451.40

Date of Receipt

M M / D D / Y Y Y Y Y
 04 28 2014

Transaction ID : SA11AI.30499

Amount of Each Receipt this Period

201.40

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

361.40

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. Jack Mullins

Mailing Address 224 Ridgewood Dr

City

Victoria

State

TX

Zip Code

77901

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 ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 14 / 2014

Transaction ID : SA11AI.30519

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

B. Sharon Nason

Mailing Address 4360 North Montana Ave.

City

Helena

State

MT

Zip Code

59602

FEC ID number of contributing
federal political committee.

C

Name of Employer

Sharon Nason

Occupation

Licensed Clinical Professional Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 30 / 2014

Transaction ID : SA11AI.30559

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Mr. Timothy Nelson

Mailing Address 4302 Esta Dr

City

Flint

State

MI

Zip Code

48506

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 ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 16 / 2014

Transaction ID : SA11AI.30576

Amount of Each Receipt this Period

100.00

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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NAME OF COMMITTEE (In Full)

FREEDOMWORKS FOR AMERICA

Full Name (Last, First, Middle Initial)

A. Mr. Peter Neves

Mailing Address 23820 Gyle Rd

City State Zip Code
Gerber CA 96035

FEC ID number of contributing
federal political committee.

C

Name of Employer

Peter Neves

Occupation

Farmer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

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

Transaction ID : SA11AI.30579

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Peter Nick

Mailing Address 6362 Glenknoll Dr

City State Zip Code
Yorba Linda CA 92886

FEC ID number of contributing
federal political committee.

C

Name of Employer

Worleyparsons

Occupation

Engineer

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
04 / 11 / 2014

Transaction ID : SA11AI.30595

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Mr. Patrick Padgett

Mailing Address 38 Stone Creek Park

City State Zip Code
Owensboro KY 42303

FEC ID number of contributing
federal political committee.

C

Name of Employer

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 Y
04 / 23 / 2014

Transaction ID : SA11AI.30727

Amount of Each Receipt this Period

250.00

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

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

1000.00

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

Use separate schedule(s)
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Detailed Summary Page

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(check only one)

<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. Elizabeth Page

Mailing Address 7145 Franklin Parke Blvd

City	State	Zip Code
Indianapolis	IN	46259

FEC ID number of contributing federal political committee.

C

Name of Employer

Eli Lilly & Co

Occupation

Research

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
04	/	14	/	2014

Transaction ID : SA11AI.30729

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Mr. Philip Palmer

Mailing Address 25 Covered Bridge Ln

City	State	Zip Code
Newark	DE	19711

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 M	/	D D D	/	Y Y Y Y Y Y
04	/	28	/	2014

Transaction ID : SA11AI.30737

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Mr. Nicholas Peay

Mailing Address 2965 Fairmount Blvd

City	State	Zip Code
Cleveland Heights	OH	44118

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	21	/	2014

Transaction ID : SA11AI.30800

Amount of Each Receipt this Period

4000.00

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

4750.00

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
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NAME OF COMMITTEE (In Full)

FREEDOMWORKS FOR AMERICA

Full Name (Last, First, Middle Initial)

A. Mr. Lowell Peterson

Mailing Address 16376 County Road 35 W

City State Zip Code
 Cokato MN 55321

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
 04 / 11 / 2014

Transaction ID : SA11AI.30851

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. Mrs. Suzette Pickett

Mailing Address 106 Ecclestone Drive

City State Zip Code
 Brampton AZ 85351

FEC ID number of contributing
federal political committee.

C

Name of Employer
Suzette Pickett

Occupation
Landscaper

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
 04 / 30 / 2014

Transaction ID : SA11AI.30883

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

C. Jim Pogue

Mailing Address Po Box 901

City State Zip Code
 Rolla MO 65402

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 Y
 04 / 03 / 2014

Transaction ID : SA11AI.30916

Amount of Each Receipt this Period

200.00

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. Richard L Poss

Mailing Address 568 Settlers Ridge Pkwy

City State Zip Code
 Woodbury MN 55129

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
 04 / 28 / 2014

Transaction ID : SA11AI.30943

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

B. Donald Prater

Mailing Address 8400 White Rd

City State Zip Code
 Orlando FL 32818

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
 04 / 23 / 2014

Transaction ID : SA11AI.30965

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

C. W.j. Putnam

Mailing Address 105 Dawson Trl

City State Zip Code
 Georgetown TX 78633

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
 04 / 28 / 2014

Transaction ID : SA11AI.30989

Amount of Each Receipt this Period

300.00

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

450.00

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. Carolyn Puzo

Mailing Address 125 S Main St

City State Zip Code
 N Brookfield MA 01535

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
 04 / 16 / 2014

Transaction ID : SA11AI.30991

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Ms. Leuretta M Rallens

Mailing Address PO Box 7749

City State Zip Code
 Mesa AZ 85216

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

M M / D D / Y Y Y Y Y
 04 / 03 / 2014

Transaction ID : SA11AI.31012

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

C. Ms. Leuretta M Rallens

Mailing Address PO Box 7749

City State Zip Code
 Mesa AZ 85216

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 ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
 04 / 16 / 2014

Transaction ID : SA11AI.31011

Amount of Each Receipt this Period

200.00

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

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

650.00

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

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

FREEDOMWORKS FOR AMERICA

Full Name (Last, First, Middle Initial)

A. 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 ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
 04 / 14 / 2014

Transaction ID : SA11AI.31018

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

B. Mr. Robert Rathert

Mailing Address 652 Bridgeway Ln

City State Zip Code
 Naples FL 34108

FEC ID number of contributing
federal political committee.

C

Name of Employer

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
 04 / 07 / 2014

Transaction ID : SA11AI.31027

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. 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

Occupation

Chiropractor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
 04 / 13 / 2014

Transaction ID : SA11AI.31028

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. Alton Rauch

Mailing Address 2510 Chestnut Ln

City State Zip Code
Easton PA 18040

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 ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 21 / 2014

Transaction ID : SA11AI.31029

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

B. Alton Rauch

Mailing Address 2510 Chestnut Ln

City State Zip Code
Easton PA 18040

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 ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 21 / 2014

Transaction ID : SA11AI.31030

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

C. Alton Rauch

Mailing Address 2510 Chestnut Ln

City State Zip Code
Easton PA 18040

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

M M / D D / Y Y Y Y Y Y
04 / 21 / 2014

Transaction ID : SA11AI.31031

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**

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

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NAME OF COMMITTEE (In Full)

FREEDOMWORKS FOR AMERICA

Full Name (Last, First, Middle Initial)

A. Alton Rauch

Mailing Address 2510 Chestnut Ln

City State Zip Code
 Easton PA 18040

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 ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y
 04 / 26 / 2014

Transaction ID : SA11AI.31032

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

B. Mr. Bill Rayl

Mailing Address 3818 N 2481 E

City State Zip Code
 Filer ID 83328

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y
 04 / 30 / 2014

Transaction ID : SA11AI.31035

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. Dave Reiland

Mailing Address 19498 Blue Ln E Po Box 159

City State Zip Code
 Emily MN 56447

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Network Executive Software, Inc

Software Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y
 04 / 07 / 2014

Transaction ID : SA11AI.31059

Amount of Each Receipt this Period

400.00

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

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

950.00

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. 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 ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 29 / 2014

Transaction ID : SA11AI.31067

Amount of Each Receipt this Period

35.00

Full Name (Last, First, Middle Initial)

B. Evelyn E. Richards

Mailing Address 411 Knotts Valley Ln

City State Zip Code
Cary NC 27519

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

-25.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 23 / 2014

Transaction ID : SA11AI.31086

Amount of Each Receipt this Period

-25.00

Full Name (Last, First, Middle Initial)

C. Evelyn E. Richards

Mailing Address 411 Knotts Valley Ln

City State Zip Code
Cary NC 27519

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

-50.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 23 / 2014

Transaction ID : SA11AI.31087

Amount of Each Receipt this Period

-25.00

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

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

-15.00

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. Evelyn E. Richards

Mailing Address 411 Knotts Valley Ln

City State Zip Code
Cary NC 27519

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

-75.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 23 / 2014

Transaction ID : SA11AI.31088

Amount of Each Receipt this Period

-25.00

Full Name (Last, First, Middle Initial)

B. Evelyn E. Richards

Mailing Address 411 Knotts Valley Ln

City State Zip Code
Cary NC 27519

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

-100.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 23 / 2014

Transaction ID : SA11AI.31089

Amount of Each Receipt this Period

-25.00

Full Name (Last, First, Middle Initial)

C. Evelyn E. Richards

Mailing Address 411 Knotts Valley Ln

City State Zip Code
Cary NC 27519

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

-135.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 23 / 2014

Transaction ID : SA11AI.31090

Amount of Each Receipt this Period

-35.00

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

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

-85.00

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. Evelyn E. Richards

Mailing Address 411 Knotts Valley Ln

City State Zip Code
 Cary NC 27519

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

-170.00

Date of Receipt

M M / D D / Y Y Y Y Y
 04 23 2014

Transaction ID : SA11AI.31091

Amount of Each Receipt this Period

-35.00

Full Name (Last, First, Middle Initial)

B. Evelyn E. Richards

Mailing Address 411 Knotts Valley Ln

City State Zip Code
 Cary NC 27519

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

-205.00

Date of Receipt

M M / D D / Y Y Y Y Y
 04 23 2014

Transaction ID : SA11AI.31092

Amount of Each Receipt this Period

-35.00

Full Name (Last, First, Middle Initial)

C. Evelyn E. Richards

Mailing Address 411 Knotts Valley Ln

City State Zip Code
 Cary NC 27519

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

-240.00

Date of Receipt

M M / D D / Y Y Y Y Y
 04 23 2014

Transaction ID : SA11AI.31093

Amount of Each Receipt this Period

-35.00

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

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

-105.00

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

Use separate schedule(s)
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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

FREEDOMWORKS FOR AMERICA

Full Name (Last, First, Middle Initial)

A. Mr. Robert Richardson

Mailing Address 54969 Woodhold Ct

City
Elkhart

State
IN

Zip Code
46516

FEC ID number of contributing
federal political committee.

C

Name of Employer

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
04 / 11 / 2014

Transaction ID : SA11AI.31101

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Mrs. Lori Riecken

Mailing Address 612 County Road U

City
Lyons

State
NE

Zip Code
68038

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

House Wife

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 11 / 2014

Transaction ID : SA11AI.31108

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

C. Mr. Mark Riehle

Mailing Address 9630 N County Road 800 E

City
Sunman

State
IN

Zip Code
47041

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 30 / 2014

Transaction ID : SA11AI.31109

Amount of Each Receipt this Period

50.00

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

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

350.00

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

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

FREEDOMWORKS FOR AMERICA

Full Name (Last, First, Middle Initial)

A. Mr. Frederick Robinson

Mailing Address P. O. Box 7906

City State Zip Code
 Aspen CO 81612

FEC ID number of contributing
federal political committee.

C

Name of Employer

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
 04 / 06 / 2014

Transaction ID : SA11AI.31135

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Ms. Ernestina Rodriguez

Mailing Address 9216 Samoline Ave

City State Zip Code
 Downey CA 90240

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 ▼

245.00

Date of Receipt

M M / D D / Y Y Y Y Y
 04 / 21 / 2014

Transaction ID : SA11AI.31154

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

C. Mr. John Roper

Mailing Address 15 Providence Rd

City State Zip Code
 Westford MA 01886

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

John Roper

Autobody

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y
 04 / 30 / 2014

Transaction ID : SA11AI.31175

Amount of Each Receipt this Period

100.00

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

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

625.00

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

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

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(check only one)

<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 Ross

Mailing Address 2115 Fife Ln

City	State	Zip Code
Charleston	SC	29414

FEC ID number of contributing federal political committee.

C

Name of Employer

Nancy Ross

Occupation

House Keeper

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	29	/	2014

Transaction ID : SA11AI.31188

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

B. Ms. Anne Ruble

Mailing Address 2866 Bardstown Rd

City	State	Zip Code
Lawrenceburg	KY	40342

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 M	/	D D D	/	Y Y Y Y Y Y
04	/	14	/	2014

Transaction ID : SA11AI.31198

Amount of Each Receipt this Period

150.00

Full Name (Last, First, Middle Initial)

C. Michael Ryan

Mailing Address 109 Donlin Ave

City	State	Zip Code
Pass Christian	MS	39571

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 M	/	D D D	/	Y Y Y Y Y Y
04	/	28	/	2014

Transaction ID : SA11AI.31232

Amount of Each Receipt this Period

100.00

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

450.00

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

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

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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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 ▼

7500.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 15 / 2014

Transaction ID : SA11AI.31280

Amount of Each Receipt this Period

4000.00

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 ▼

8000.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 16 / 2014

Transaction ID : SA11AI.31285

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 ▼

8200.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 22 / 2014

Transaction ID : SA11AI.31286

Amount of Each Receipt this Period

200.00

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

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

4700.00

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. 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 ▼

9200.00

Date of Receipt

M M / D D / Y Y Y Y Y
 04 / 25 / 2014

Transaction ID : SA11AI.31281

Amount of Each Receipt this Period

1000.00

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 ▼

10200.00

Date of Receipt

M M / D D / Y Y Y Y Y
 04 / 25 / 2014

Transaction ID : SA11AI.31282

Amount of Each Receipt this Period

1000.00

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 ▼

11200.00

Date of Receipt

M M / D D / Y Y Y Y Y
 04 / 25 / 2014

Transaction ID : SA11AI.31283

Amount of Each Receipt this Period

1000.00

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

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

3000.00

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. 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 ▼

12200.00

Date of Receipt

M M / D D / Y Y Y Y Y
 04 / 25 / 2014

Transaction ID : SA11AI.31284

Amount of Each Receipt this Period

1000.00

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 ▼

11200.00

Date of Receipt

M M / D D / Y Y Y Y Y
 04 / 25 / 2014

Transaction ID : SA11AI.31287

Amount of Each Receipt this Period

-1000.00

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 ▼

10200.00

Date of Receipt

M M / D D / Y Y Y Y Y
 04 / 25 / 2014

Transaction ID : SA11AI.31288

Amount of Each Receipt this Period

-1000.00

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

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

-1000.00

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

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for each category of the
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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 ▼

9200.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 25 / 2014

Transaction ID : SA11AI.31289

Amount of Each Receipt this Period

-1000.00

Full Name (Last, First, Middle Initial)

B. Mr. Thomas Sawyer

Mailing Address 43 Elfreths Ct

City State Zip Code
Newtown PA 18940

FEC ID number of contributing
federal political committee.

C

Name of Employer

Applied Ergonomics Consulting

Occupation

Ergonomics Engineering

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID : SA11AI.31306

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. Ms. Joan Schmidt

Mailing Address 4506 Providence Point PI Se

City State Zip Code
Issaquah WA 98029

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 01 / 2014

Transaction ID : SA11AI.31333

Amount of Each Receipt this Period

150.00

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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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. Daniel Schoenholz

Mailing Address 33252 740 Rd

City
Imperial

State
NE

Zip Code
69033

FEC ID number of contributing
federal political committee.

C

Name of Employer

FVC

Occupation

Agribusiness

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 30 / 2014

Transaction ID : SA11AI.31346

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. Mr. Charles Sears

Mailing Address 3609 Via La Selva

City

Palos Verdes Estates

State

CA

Zip Code

90274

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
04 / 07 / 2014

Transaction ID : SA11AI.31395

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. Dale Sebring

Mailing Address 1840 Bitterroot Dr.

City

Twin Falls

State

ID

Zip Code

83301

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 30 / 2014

Transaction ID : SA11AI.31400

Amount of Each Receipt this Period

75.00

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

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

675.00

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NAME OF COMMITTEE (In Full)

FREEDOMWORKS FOR AMERICA

Full Name (Last, First, Middle Initial)

A. Mrs. Pamela Seyer

Mailing Address 1819 Cheswick Pl

City

Saint Louis

State

MO

Zip Code

63122

FEC ID number of contributing
federal political committee.

C

Name of Employer

Incarnate Word Parish

Occupation

Receptionist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

04 / 01 / 2014

Transaction ID : SA11AI.31422

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Mrs. Linda Siptak

Mailing Address 308 Tanglewood Trl

City

Gonzales

State

TX

Zip Code

78629

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

04 / 29 / 2014

Transaction ID : SA11AI.31491

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

C. Jean T. Smith

Mailing Address 12806 Us Highway 191

City

Pinedale

State

WY

Zip Code

82941

FEC ID number of contributing
federal political committee.

C

Name of Employer

Jean Smith

Occupation

Artist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

04 / 01 / 2014

Transaction ID : SA11AI.31543

Amount of Each Receipt this Period

1000.00

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

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

1550.00

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. Margaret K. Smith

Mailing Address 9732 Lindsey Blake Ln

City State Zip Code
 Great Falls VA 22066

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 Y
 04 / 16 / 2014

Transaction ID : SA11AI.31550

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. Mrs. Marion Spinks

Mailing Address 1441 Campus Road

City State Zip Code
 Elizabethtown PA 17022

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 / 24 / 2014

Transaction ID : SA11AI.31609

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

C. Mrs. Charles Steele

Mailing Address 26349 Rio Ave

City State Zip Code
 Carmel CA 93923

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Info Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 / 09 / 2014

Transaction ID : SA11AI.31642

Amount of Each Receipt this Period

1000.00

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. Mr. Duane Stephens

Mailing Address 12010 Kuykendahl Rd Suite 300

City State Zip Code
Houston TX 77067

FEC ID number of contributing
federal political committee.

C

Name of Employer

Indepth Exploration Llc

Occupation

Oil and Gas Exploration

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 29 / 2014

Transaction ID : SA11AI.31649

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

B. Mr. Norman M Stern

Mailing Address 4017 Sable Loop Dr

City State Zip Code
Lake Wales FL 33859

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

-15.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 02 / 2014

Transaction ID : SA11AI.31651

Amount of Each Receipt this Period

-15.00

Full Name (Last, First, Middle Initial)

C. Mr. Norman M Stern

Mailing Address 4017 Sable Loop Dr

City State Zip Code
Lake Wales FL 33859

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

-30.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 02 / 2014

Transaction ID : SA11AI.31652

Amount of Each Receipt this Period

-15.00

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

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

20.00

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. Norman M Stern

Mailing Address 4017 Sable Loop Dr

City State Zip Code
Lake Wales FL 33859

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

-45.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 02 / 2014

Transaction ID : SA11AI.31653

Amount of Each Receipt this Period

-15.00

Full Name (Last, First, Middle Initial)

B. Mr. Norman M Stern

Mailing Address 4017 Sable Loop Dr

City State Zip Code
Lake Wales FL 33859

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

-60.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 02 / 2014

Transaction ID : SA11AI.31654

Amount of Each Receipt this Period

-15.00

Full Name (Last, First, Middle Initial)

C. Mr. Norman M Stern

Mailing Address 4017 Sable Loop Dr

City State Zip Code
Lake Wales FL 33859

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

-75.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 02 / 2014

Transaction ID : SA11AI.31655

Amount of Each Receipt this Period

-15.00

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

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

-45.00

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NAME OF COMMITTEE (In Full)

FREEDOMWORKS FOR AMERICA

Full Name (Last, First, Middle Initial)

A. Mr. Norman M Stern

Mailing Address 4017 Sable Loop Dr

City

Lake Wales

State

FL

Zip Code

33859

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

-90.00

Date of Receipt

04 / 02 / 2014

Transaction ID : SA11AI.31656

Amount of Each Receipt this Period

-15.00

Full Name (Last, First, Middle Initial)

B. Mr. Richard C. Stone

Mailing Address 3939 Ocean Dr Apt B401

City

Vero Beach

State

FL

Zip Code

32963

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

04 / 21 / 2014

Transaction ID : SA11AI.31693

Amount of Each Receipt this Period

150.00

Full Name (Last, First, Middle Initial)

c. 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

Pilot

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

04 / 30 / 2014

Transaction ID : SA11AI.31715

Amount of Each Receipt this Period

500.00

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

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

635.00

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 P. Stroman

Mailing Address 10883 Otis Cir

City

Westminster

State

CO

Zip Code

80020

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Info Requested

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

04 / 01 / 2014

Transaction ID : SA11AI.31717

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Mr. Joseph Sturkey

Mailing Address P. O. Box 28749

City

San Jose

State

CA

Zip Code

95159

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

04 / 05 / 2014

Transaction ID : SA11AI.31724

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Mr. Joseph Sturkey

Mailing Address P. O. Box 28749

City

San Jose

State

CA

Zip Code

95159

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

04 / 07 / 2014

Transaction ID : SA11AI.31723

Amount of Each Receipt this Period

1000.00

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

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

1750.00

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. Glenn Summerlin

Mailing Address 1133 Ragley Hall Rd NE

City State Zip Code
 Atlanta GA 30319

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
 04 / 16 / 2014

Transaction ID : SA11AI.31735

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. Mr. Alan Sundstrom

Mailing Address 2435 N Central Expy Ste 1200

City State Zip Code
 Richardson TX 75080

FEC ID number of contributing
federal political committee.

C

Name of Employer

Alan C. Sundstrom Cpa

Occupation
Cpa

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
 04 / 28 / 2014

Transaction ID : SA11AI.31739

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

C. Mr. Richard Swenson

Mailing Address 7011 W Sandpiper Ct

City State Zip Code
 Milwaukee WI 53223

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 04 / 28 / 2014

Transaction ID : SA11AI.31758

Amount of Each Receipt this Period

1000.00

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

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

1400.00

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 C. Tallman

Mailing Address 29 Pebble Beach Drive

City State Zip Code
 Bedford NH 03110

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
 04 / 23 / 2014

Transaction ID : SA11AI.31768

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

B. Susan Taylor

Mailing Address 2700 Millstream Dr

City State Zip Code
 Plano TX 75075

FEC ID number of contributing
federal political committee.

C

Name of Employer

Susan Taylor

Occupation
Real Estate

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
 04 / 01 / 2014

Transaction ID : SA11AI.31791

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

C. Richard Thum

Mailing Address 9606 Huebner Rd
 Ste 1

City State Zip Code
 San Antonio TX 78240

FEC ID number of contributing
federal political committee.

C

Name of Employer

Five Star Cleaners

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
 04 / 14 / 2014

Transaction ID : SA11AI.31825

Amount of Each Receipt this Period

150.00

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. Lona Ttee

Mailing Address 4103 205th Ave Se

City State Zip Code
 Sammamish WA 98075

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

04 / 21 / 2014

Transaction ID : SA11AI.31897

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Scott Tucker

Mailing Address 271 Ems C29 Ln

City State Zip Code
 Warsaw IN 46582

FEC ID number of contributing
federal political committee.

C

Name of Employer

Maple Leaf Farms, Inc.

Occupation

Co-president / Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

04 / 13 / 2014

Transaction ID : SA11AI.31904

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Gary Turnidge

Mailing Address 14820 N. Newport Hwy

City State Zip Code
 Mead WA 99021

FEC ID number of contributing
federal political committee.

C

Name of Employer

Gary Turnidge

Occupation

Entrepreneur

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

04 / 30 / 2014

Transaction ID : SA11AI.31915

Amount of Each Receipt this Period

200.00

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

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

700.00

SCHEDULE A (FEC Form 3X)**ITEMIZED RECEIPTS**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. Kim Utley

Mailing Address 205 Doris Dr

City	State	Zip Code
Lucas	TX	75002

FEC ID number of contributing
federal political committee.

C

Name of Employer

Sims Inc

Occupation

Programmer

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
04	/	12	/	2014

Transaction ID : SA11AI.31933

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Mr. David Valle

Mailing Address 34 Cherry Laurel Dr

City	State	Zip Code
Fredericksburg	VA	22405

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fbi

Occupation

Budget Analyst

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	28	/	2014

Transaction ID : SA11AI.31939

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

C. Ms. Marilyn Vancil

Mailing Address 14005 Se 10th St

City	State	Zip Code
Bellevue	WA	98007

FEC ID number of contributing
federal political committee.

C

Name of Employer

City of Seattle

Occupation

Engineer

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
04	/	28	/	2014

Transaction ID : SA11AI.31952

Amount of Each Receipt this Period

100.00

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

650.00

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

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NAME OF COMMITTEE (In Full)

FREEDOMWORKS FOR AMERICA

Full Name (Last, First, Middle Initial)

A. Ms. Donna Vernier

Mailing Address 12535 N Flying Hawk Trl

City State Zip Code
Prescott AZ 86305

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
04 / 30 / 2014

Transaction ID : SA11AI.31975

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. Audrey Vokes

Mailing Address 5635 Boulder Creek Dr Sw

City State Zip Code
Rochester MN 55902

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 11 / 2014

Transaction ID : SA11AI.31997

Amount of Each Receipt this Period

225.00

Full Name (Last, First, Middle Initial)

C. Mr. William Waldock

Mailing Address 117 E Washington Row

City State Zip Code
Sandusky OH 44870

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Investments

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 30 / 2014

Transaction ID : SA11AI.32021

Amount of Each Receipt this Period

250.00

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

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

575.00

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

Use separate schedule(s)
for each category of the
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(check only one)

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NAME OF COMMITTEE (In Full)

FREEDOMWORKS FOR AMERICA

Full Name (Last, First, Middle Initial)

A. Ms. Marsha Weinstein

Mailing Address 609 Spruce Ln

City Villanova State PA Zip Code 19085

FEC ID number of contributing federal political committee.

C

Name of Employer

Awesome Foods

Occupation

Business Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

04 / 01 / 2014

Transaction ID : SA11AI.32118

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Jerry West

Mailing Address 151 St George Pl

City Bermuda Run State NC Zip Code 27006

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

04 / 21 / 2014

Transaction ID : SA11AI.32141

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. Mr. Michel Wilcox

Mailing Address 1985 W Henderson Rd Ste 217

City Columbus State OH Zip Code 43220

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

04 / 06 / 2014

Transaction ID : SA11AI.32200

Amount of Each Receipt this Period

250.00

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

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

1750.00

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. 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 ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
 04 / 15 / 2014

Transaction ID : SA11AI.32201

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

B. George Williamson

Mailing Address 3101 Club Dr

City State Zip Code
 Raleigh NC 27613

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

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
 04 / 16 / 2014

Transaction ID : SA11AI.32230

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

C. Mrs. Stacy Wood

Mailing Address 2711 Dali

City State Zip Code
 Dallas TX 75287

FEC ID number of contributing
federal political committee.

C

Name of Employer

Frisco Roughrider Baseball

Occupation

Ticket Office - Part-time

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
 04 / 28 / 2014

Transaction ID : SA11AI.32284

Amount of Each Receipt this Period

50.00

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

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

400.00

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

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

FREEDOMWORKS FOR AMERICA

Full Name (Last, First, Middle Initial)

A. Frank Woodbridge

Mailing Address 4079 Emerald Pines Drive

City State Zip Code
Commerce Twp MI 48390

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
04 24 2014

Transaction ID : SA11AI.32285

Amount of Each Receipt this Period

150.00

Full Name (Last, First, Middle Initial)

B. Frank Woodbridge

Mailing Address 4079 Emerald Pines Drive

City State Zip Code
Commerce Twp MI 48390

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 24 2014

Transaction ID : SA11AI.32286

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

C. Frank Woodbridge

Mailing Address 4079 Emerald Pines Drive

City State Zip Code
Commerce Twp MI 48390

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 24 2014

Transaction ID : SA11AI.32287

Amount of Each Receipt this Period

25.00

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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NAME OF COMMITTEE (In Full)

FREEDOMWORKS FOR AMERICA

Full Name (Last, First, Middle Initial)

A. Frank Woodbridge

Mailing Address 4079 Emerald Pines Drive

City State Zip Code
Commerce Twp MI 48390

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 24 / 2014

Transaction ID : SA11AI.32288

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

B. Frank Woodbridge

Mailing Address 4079 Emerald Pines Drive

City State Zip Code
Commerce Twp MI 48390

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 Y
04 / 24 / 2014

Transaction ID : SA11AI.32289

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

C. Frank Woodbridge

Mailing Address 4079 Emerald Pines Drive

City State Zip Code
Commerce Twp MI 48390

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

525.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 25 / 2014

Transaction ID : SA11AI.32290

Amount of Each Receipt this Period

25.00

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

75.00

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

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. Mrs. Katherine Worden

Mailing Address 131 Southland Dr

City

Lumberton

State

TX

Zip Code

77657

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

220.00

Date of Receipt

04 / 28 / 2014

Transaction ID : SA11AI.32298

Amount of Each Receipt this Period

35.00

Full Name (Last, First, Middle Initial)

B. Mr. Bernard Wright

Mailing Address 93 Northrup St

City

Bridgewater

State

CT

Zip Code

06752

FEC ID number of contributing
federal political committee.

C

Name of Employer

Bernard Wright Jr

Occupation

Arborist

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

04 / 02 / 2014

Transaction ID : SA11AI.32308

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

C. Ms. Cindy Youell

Mailing Address 351 Prima Vera Cv

City

Altamonte Spg

State

FL

Zip Code

32714

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Homemaker

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

04 / 28 / 2014

Transaction ID : SA11AI.32329

Amount of Each Receipt this Period

1000.00

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

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

1335.00

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. Fred M. Young Jr.

Mailing Address 3201 Michigan Blvd

City
Racine

State
WI

Zip Code
53402

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

75000.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 15 / 2014

Transaction ID : SA11AI.32333

Amount of Each Receipt this Period

75000.00

Full Name (Last, First, Middle Initial)

B. Timothy Youngern

Mailing Address PO Box 693

City
Berwyn

State
PA

Zip Code
19312

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Unemployed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

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

Transaction ID : SA11AI.32343

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. Lori Zimmer

Mailing Address 1409 Sylvan Lane

City
Cape Girardeau

State
MO

Zip Code
63701

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 18 / 2014

Transaction ID : SA11AI.32364

Amount of Each Receipt this Period

200.00

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

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

75700.00

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. Mr. Clifford Zimmerman

Mailing Address 8342 Gibraltar St

City

Spring Hill

State

FL

Zip Code

34608

FEC ID number of contributing
federal political committee.

C

Name of Employer

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
04 / 11 / 2014

Transaction ID : SA11AI.32366

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Laura Zulueta

Mailing Address 2008 Greyhawk Place

City

Apex

State

NC

Zip Code

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 ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 29 / 2014

Transaction ID : SA11AI.32372

Amount of Each Receipt this Period

100.00

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)..... ►

600.00

259898.40

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

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<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. Direct Mail Marketing Group

Mailing Address 22780 Indian Creek Dr., Ste. 100

City	State	Zip Code
Dulles	VA	20166

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

37800.00

Date of Receipt

04 / 17 / 2014

Transaction ID : SA15.32375

Amount of Each Receipt this Period

37800.00

Vendor Refund-Orig expense 3/21/14

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

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

Amount of Each Receipt this Period

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

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

37800.00

37800.00

<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

<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

Category/
Type

304.00

State: District:

MM / DD / YYYY

Category/
Type

252.00

State: District:

Category/
Type

105939.60

State: District:

106495.60

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

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<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. Delta Airlines

Mailing Address PO Box 20706

City	State	Zip Code
Atlanta	GA	30320

Purpose of Disbursement
PAC Travel

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<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
04		28		2014

Transaction ID : SB21B.32409

Amount of Each Disbursement this Period

262.00

Full Name (Last, First, Middle Initial)

B. Direct Mail Marketing Group

Mailing Address 22780 Indian Creek Dr., Ste. 100

City	State	Zip Code
Dulles	VA	20166

Purpose of Disbursement
PAC Direct Mail Fundraising

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<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
04		04		2014

Transaction ID : SB21B.32380

Amount of Each Disbursement this Period

20044.79

Full Name (Last, First, Middle Initial)

C. Direct Mail Marketing Group

Mailing Address 22780 Indian Creek Dr., Ste. 100

City	State	Zip Code
Dulles	VA	20166

Purpose of Disbursement
PAC Printing/Postage

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<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
04		11		2014

Transaction ID : SB21B.32383

Amount of Each Disbursement this Period

2794.29

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

23101.08

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<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

8729.70

1549.03

2025.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
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☐ 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. Fedex-Shipping

Mailing Address 13155 Noel Rd.

City Dallas State TX Zip Code 75240

Purpose of Disbursement
Shipping

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 Y
04 / 18 / 2014
Transaction ID : SB21B.32410

Amount of Each Disbursement this Period

214.28

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
List Rental-Standard Market Rate

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 Y
04 / 10 / 2014
Transaction ID : SB21B.32378

Amount of Each Disbursement this Period

4500.00

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
PAC Online Ad-Standard Market Rate

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 Y
04 / 10 / 2014
Transaction ID : SB21B.32379

Amount of Each Disbursement this Period

217.00

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

4931.28

**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 114 OF 220

☒ 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
04		23		2014

Mailing Address 400 N Capitol St., NW
Suite 735

City Washington State DC Zip Code 20001

Purpose of Disbursement
PAC Fundraising Letters

Candidate Name

Category/
Type**Transaction ID : SB21B.32414**

Amount of Each Disbursement this Period

49014.06

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
04		23		2014

Mailing Address 400 N Capitol St., NW
Suite 735

City Washington State DC Zip Code 20001

Purpose of Disbursement
In-kind - Travel

Candidate Name

Category/
Type**Transaction ID : SB21B.32422**

Amount of Each Disbursement this Period

1828.47

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
04		28		2014

Mailing Address 400 N Capitol St., NW
Suite 735

City Washington State DC Zip Code 20001

Purpose of Disbursement
In-kind - Travel

Candidate Name

Category/
Type**Transaction ID : SB21B.32419**

Amount of Each Disbursement this Period

1559.43

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

State: District:

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

52401.96

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

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<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

Category/
Type

32751.83

Category/
Type

1250.00

Category/
Type

34081.83

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR 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.

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4				3	0		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 - Travel-Independent Expenditures

Candidate Name

Category/
Type**Transaction ID : SB21B.32491**

Amount of Each Disbursement this Period

9141.10

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	4				3	0		2	0	1	4		

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

Category/
Type**Transaction ID : SB21B.32492**

Amount of Each Disbursement this Period

-9141.10

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

State: District:

Full Name (Last, First, Middle Initial)

C. Global Pay

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4				3	0		2	0	1	4		

Mailing Address 10 Glenlake Pkwy, NE

City Atlanta State GA Zip Code 30328

Purpose of Disbursement
Merchant Fees

Candidate Name

Category/
Type**Transaction ID : SB21B.32403**

Amount of Each Disbursement this Period

67.05

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)..... ►

67.05

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR 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. Global Pay

Mailing Address 10 Glenlake Pkwy, NE

City Atlanta State GA Zip Code 30328

Purpose of Disbursement
Merchant Fees

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
04 30 2014
Transaction ID : SB21B.32404

Amount of Each Disbursement this Period

326.93

Full Name (Last, First, Middle Initial)

B. JW, LLC

Mailing Address 771 Corporate Drive Suite 300

City Lexington State KY Zip Code 40503

Purpose of Disbursement
Rent

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
04 28 2014
Transaction ID : SB21B.32376

Amount of Each Disbursement this Period

1843.88

Full Name (Last, First, Middle Initial)

C. Linemark

Mailing Address 501 Prince Georges Blvd

City Upper Marlboro State MD Zip Code 20774

Purpose of Disbursement
PAC Data Managemetrn

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
04 11 2014
Transaction ID : SB21B.32384

Amount of Each Disbursement this Period

2033.67

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

4204.48

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR 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. Linemark

Mailing Address 501 Prince Georges Blvd

City Upper Marlboro State MD Zip Code 20774

Purpose of Disbursement
PAC Printing/Postage

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
04 28 2014
Transaction ID : SB21B.32399

Amount of Each Disbursement this Period

2054.36

Full Name (Last, First, Middle Initial)

B. Lowe's

Mailing Address 150 American Lane

City Bowling Green State KY Zip Code 42104

Purpose of Disbursement
Office Supplies

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
04 28 2014
Transaction ID : SB21B.32412

Amount of Each Disbursement this Period

898.40

Full Name (Last, First, Middle Initial)

C. O'Connor Consulting Services

Mailing Address 4770 Howard Place

City Chesapeake Beach State MD Zip Code 20732

Purpose of Disbursement
Accounting Services

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
04 08 2014
Transaction ID : SB21B.32381

Amount of Each Disbursement this Period

6592.50

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

9545.26

<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

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)

PAGE 120 OF 220

☒ 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. Specialty Data Solutions

Mailing Address 114 W 2nd St.

City State Zip Code
 Frederick MD 21701

Purpose of Disbursement
 PAC Fundraising Letter

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
 04 / 11 / 2014

Transaction ID : SB21B.32386

Amount of Each Disbursement this Period

800.00

Full Name (Last, First, Middle Initial)

B. Specialty Data Solutions

Mailing Address 114 W 2nd St.

City State Zip Code
 Frederick MD 21701

Purpose of Disbursement
 PAC Fundraising Letter

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
 04 / 18 / 2014

Transaction ID : SB21B.32389

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

C. Specialty Data Solutions

Mailing Address 114 W 2nd St.

City State Zip Code
 Frederick MD 21701

Purpose of Disbursement
 PAC Fundraising Letter

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
 04 / 25 / 2014

Transaction ID : SB21B.32388

Amount of Each Disbursement this Period

900.00

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

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

2200.00

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

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<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. Voter Gravity

Mailing Address 121 East Main St.

City	State	Zip Code
Purcellville	VA	20132

Purpose of Disbursement
Software

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<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 Y
04		28		2014

Transaction ID : SB21B.32400

Amount of Each Disbursement this Period

4600.00

Full Name (Last, First, Middle Initial)

B. Webster, Chamberlain & Bean, LLP

Mailing Address 1747 Pennsylvania Avenue NW

City	State	Zip Code
Washington	DC	20006

Purpose of Disbursement
Legal Fees

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<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 Y
04		18		2014

Transaction ID : SB21B.32391

Amount of Each Disbursement this Period

52.50

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<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 Y
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Amount of Each Disbursement this Period

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

4652.50

279827.86

Full Name of Payee AOL Advertising LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 21 / 2014	
Mailing Address 770 Broadway-6th Floor		Amount 2100.00	
City New York	State NY	Zip Code 10003	Transaction ID : SE.26721
Purpose of Expenditure IE-Joyce-Online Ads	Category/ Type	004	Date of Disbursement or Obligation MM / DD / YYYY 04 / 21 / 2014
Name of Federal Candidate DAVID P JOYCE	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> President <input checked="" type="checkbox"/> House	District: 14 State: OH
Calendar Year-To-Date Per Election for Office Sought	20882.68		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ➤	7000.00
(b) SUBTOTAL of Unitemized Independent Expenditures ➤	
(c) TOTAL Independent Expenditures..... ➤	

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 123 OF 220
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) FREEDOMWORKS FOR AMERICA		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C 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 Arrowhead Graphics, Inc.		Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 01 / 2014	
Mailing Address 508 Houston St		Amount 17453.75	
City Greensboro	State NC	Zip Code 27401	Transaction ID : SE.12054
Purpose of Expenditure IE-Brannon-Yard Signs	Category/Type 004	Date of Disbursement or Obligation MM / DD / YYYY 04 / 01 / 2014	
Name of Federal Candidate GREGORY JOSEPH BRANNON		<input checked="" type="checkbox"/> Support Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> Oppose <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NC	
Calendar Year-To-Date Per Election for Office Sought 98073.94		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee Arrowhead Graphics, Inc.		Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 03 / 2014	
Mailing Address 508 Houston St		Amount 429.45	
City Greensboro	State NC	Zip Code 27401	Transaction ID : SE.32424
Purpose of Expenditure IE-Brannon-Signage/Shipping	Category/Type 004	Date of Disbursement or Obligation MM / DD / YYYY 04 / 03 / 2014	
Name of Federal Candidate GREGORY JOSEPH BRANNON		<input checked="" type="checkbox"/> Support Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> Oppose <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NC	
Calendar Year-To-Date Per Election for Office Sought 98600.44		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	17883.20
(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
05 / 20 / 2014

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 124 OF 220
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) FREEDOMWORKS FOR AMERICA		FEC IDENTIFICATION NUMBER ▼ C 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 Arrowhead Graphics, Inc.		Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 16 / 2014
Mailing Address 508 Houston St		Amount 133.42
City Greensboro	State NC	Zip Code 27401
Purpose of Expenditure IE-Brannon-Signage/Shipping	Category/Type 004	Transaction ID : SE.32449 Date of Disbursement or Obligation MM / DD / YYYY 04 / 16 / 2014
Name of Federal Candidate GREGORY JOSEPH BRANNON		Office Sought: <input checked="" type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NC
Calendar Year-To-Date Per Election for Office Sought 105054.28		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee Arrowhead Graphics, Inc.		Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 25 / 2014
Mailing Address 508 Houston St		Amount 61.78
City Greensboro	State NC	Zip Code 27401
Purpose of Expenditure IE-Brannon-Yard Signs-Shipping	Category/Type 004	Transaction ID : SE.26833 Date of Disbursement or Obligation MM / DD / YYYY 04 / 25 / 2014
Name of Federal Candidate GREGORY JOSEPH BRANNON		Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NC
Calendar Year-To-Date Per Election for Office Sought 125125.40		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	195.20
(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
05 / 20 / 2014

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 125 OF 220
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) FREEDOMWORKS FOR AMERICA		FEC IDENTIFICATION NUMBER ▼ C 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 Arrowhead Graphics, Inc.		Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 28 / 2014
Mailing Address 508 Houston St		Amount 11989.00
City Greensboro	State NC	Zip Code 27401
Purpose of Expenditure IE-McDaniel-Yard Signs	Category/Type 004	Transaction ID : SE.26817 Date of Disbursement or Obligation MM / DD / YYYY 04 / 28 / 2014
Name of Federal Candidate CHRISTOPHER BRIAN MCDANIEL		Office Sought: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: MS
Calendar Year-To-Date Per Election for Office Sought 155249.52		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee Arrowhead Graphics, Inc.		Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 28 / 2014
Mailing Address 508 Houston St		Amount 4400.00
City Greensboro	State NC	Zip Code 27401
Purpose of Expenditure IE-Brannon-Yard Signs	Category/Type 004	Transaction ID : SE.26830 Date of Disbursement or Obligation MM / DD / YYYY 04 / 28 / 2014
Name of Federal Candidate GREGORY JOSEPH BRANNON		Office Sought: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NC
Calendar Year-To-Date Per Election for Office Sought 129688.07		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	16389.00
(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
05 / 20 / 2014

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 126 OF 220
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) FREEDOMWORKS FOR AMERICA			FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C 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 MM / DD / YYYY					
Full Name of Payee Arrowhead Graphics, Inc.			Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 28 / 2014		
Mailing Address 508 Houston St			Amount 2000.00		
City Greensboro	State NC	Zip Code 27401	Transaction ID : SE.26831		
Purpose of Expenditure IE-Brannon-Door Hangers		Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 04 / 28 / 2014		
Name of Federal Candidate GREGORY JOSEPH BRANNON			<input checked="" type="checkbox"/> Support Office Sought: <input type="checkbox"/> House District: <u>00</u> <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 131688.07			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee Bluegrass Extended Stay			Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 02 / 2014		
Mailing Address 2753 Richmond Rd.			Amount 62.45		
City Lexington	State KY	Zip Code 40509	Transaction ID : SE.12072		
Purpose of Expenditure IE-McConnell-Travel		Category/ Type 002	Date of Disbursement or Obligation MM / DD / YYYY 04 / 02 / 2014		
Name of Federal Candidate MITCH MCCONNELL			<input type="checkbox"/> Support Office Sought: <input type="checkbox"/> House District: <u>00</u> <input checked="" type="checkbox"/> Oppose <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>KY</u>		
Calendar Year-To-Date Per Election for Office Sought 248707.56			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			2062.45		
(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 05 / 20 / 2014		

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 127 OF 220
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) FREEDOMWORKS FOR AMERICA		FEC IDENTIFICATION NUMBER ▼ C 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 Bright Roll		Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 10 / 2014	
Mailing Address 343 Sansome St. Ste. 600		Amount 2500.00	
City San Francisco	State CA	Zip Code 94104	Transaction ID : SE.32434
Purpose of Expenditure IE-Brannon-Online Ads	Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 04 / 10 / 2014	
Name of Federal Candidate GREGORY JOSEPH BRANNON		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NC
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	
102094.65			
Full Name of Payee Bright Roll		Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 11 / 2014	
Mailing Address 343 Sansome St. Ste. 600		Amount 3000.00	
City San Francisco	State CA	Zip Code 94104	Transaction ID : SE.32437
Purpose of Expenditure IE-McConnell-Online Ads	Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 04 / 11 / 2014	
Name of Federal Candidate MITCH MCCONNELL		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: KY
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	
264488.40			
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶		5500.00	
(b) SUBTOTAL of Unitemized Independent Expenditures ▶			
(c) TOTAL Independent Expenditures..... ▶			
Under penalty of perjury I certify that the independent 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 05 / 20 / 2014	

Full Name of Payee Bright Roll		Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 21 / 2014	
Mailing Address 343 Sansome St. Ste. 600		Amount 2250.00	
City San Francisco	State CA	Zip Code 94104	Transaction ID : SE.26724 Date of Disbursement or Obligation MM / DD / YYYY 04 / 21 / 2014
Purpose of Expenditure IE-Joyce-Online Ads		Category/ Type 004	
Name of Federal Candidate DAVID P JOYCE		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> Senate District: 14 State: OH
Calendar Year-To-Date Per Election for Office Sought		26007.68	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....	▶	<div>4750.00</div>
(b) SUBTOTAL of Unitemized Independent Expenditures	▶	<div></div>
(c) TOTAL Independent Expenditures.....	▶	<div></div>

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Signature

SCHEDULE E (FEC Form 3X)
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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) FREEDOMWORKS FOR AMERICA		FEC IDENTIFICATION NUMBER ▼ C 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 Bright Roll		Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 21 / 2014	
Mailing Address 343 Sansome St. Ste. 600		Amount 5250.00	
City San Francisco	State CA	Zip Code 94104	Transaction ID : SE.26725
Purpose of Expenditure IE-Lynch-Online Ads		Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 04 / 21 / 2014
Name of Federal Candidate MATT LYNCH		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 14 <input type="checkbox"/> President <input type="checkbox"/> Senate State: OH
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	
		31257.68	

Full Name of Payee Bright Roll		Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 25 / 2014	
Mailing Address 343 Sansome St. Ste. 600		Amount 604.87	
City San Francisco	State CA	Zip Code 94104	Transaction ID : SE.32489
Purpose of Expenditure IE-McConnell-Online Ads		Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 04 / 25 / 2014
Name of Federal Candidate MITCH MCCONNELL		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: KY
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	
		265502.92	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	5854.87
(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
05 / 20 / 2014

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 130 OF 220
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) FREEDOMWORKS FOR AMERICA		FEC IDENTIFICATION NUMBER ▼ C 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 Bright Roll		Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 30 / 2014	
Mailing Address 343 Sansome St. Ste. 600		Amount 629.63	
City San Francisco	State CA	Zip Code 94104	Transaction ID : SE.26882
Purpose of Expenditure IE-Joyce-Online Ads		Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 04 / 30 / 2014
Name of Federal Candidate DAVID P JOYCE		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 14 <input type="checkbox"/> President <input type="checkbox"/> Senate State: OH
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee Bright Roll		Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 30 / 2014	
Mailing Address 343 Sansome St. Ste. 600		Amount 1259.26	
City San Francisco	State CA	Zip Code 94104	Transaction ID : SE.26883
Purpose of Expenditure IE-Lynch-Online Ads		Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 04 / 30 / 2014
Name of Federal Candidate MATT LYNCH		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 14 <input type="checkbox"/> President <input type="checkbox"/> Senate State: OH
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶		1888.89	
(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 <i>R. Russ Walker</i>		Date MM / DD / YYYY 05 / 20 / 2014	
		[Electronically Filed]	

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NAME OF COMMITTEE (In Full) FREEDOMWORKS FOR AMERICA			FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;">C 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 Chick Fil-A			Date of Public Distribution/Dissemination <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> <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">04 / 04 / 2014</div>		
Mailing Address 5001 Shelbyville Rd.			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">265.00</div>		
City Louisville		State KY	Zip Code 40299		Transaction ID : SE.12083
Purpose of Expenditure IE-McConnell-Catering		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>		Date of Disbursement or Obligation <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> <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">04 / 04 / 2014</div>	
Name of Federal Candidate MITCH MCCONNELL			Office Sought: <input type="checkbox"/> House District: <u>00</u> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>KY</u>		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">255946.32</div>			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee Color Craft			Date of Public Distribution/Dissemination <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> <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">04 / 08 / 2014</div>		
Mailing Address 22645 Sally Ride Drive			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">193.90</div>		
City Sterling		State VA	Zip Code 20164		Transaction ID : SE.12094
Purpose of Expenditure IE-Bevin-Direct Mail		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>		Date of Disbursement or Obligation <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> <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">04 / 08 / 2014</div>	
Name of Federal Candidate MATTHEW GRISWOLD BEVIN			Office Sought: <input type="checkbox"/> House District: <u>00</u> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>KY</u>		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">257910.76</div>			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			<div style="border: 1px solid black; padding: 2px; display: inline-block;">458.90</div>		
(b) SUBTOTAL of Unitemized Independent Expenditures ▶			<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>		
(c) TOTAL Independent Expenditures..... ▶			<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <i>R. Russ Walker</i>			Date <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> <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">05 / 20 / 2014</div>		
[Electronically Filed]					

Full Name of Payee Color Craft		Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 08 / 2014	
Mailing Address 22645 Sally Ride Drive		Amount 155.12	
City Sterling	State VA	Zip Code 20164	Transaction ID : SE.12133
Purpose of Expenditure IE-McDaniel-Direct Mail		Category/ Type 003	Date of Disbursement or Obligation MM / DD / YYYY 04 / 08 / 2014
Name of Federal Candidate CHRISTOPHER BRIAN MCDANIEL		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President District: 00 State: MS
Calendar Year-To-Date Per Election for Office Sought 93718.28		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee Color Craft		Date of Public Distribution/Dissemination <div> <div>MM / DD / YYYY</div> <div>04 / 08 / 2014</div> </div>	
Mailing Address 22645 Sally Ride Drive		Amount <div> <div>193.90</div> </div>	
City Sterling	State VA	Zip Code 20164	Transaction ID : SE.32433 Date of Disbursement or Obligation <div> <div>MM / DD / YYYY</div> <div>04 / 08 / 2014</div> </div>
Purpose of Expenditure IE-Brannon-Direct Mail		Category/ Type 003	
Name of Federal Candidate GREGORY JOSEPH BRANNON		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NC
Calendar Year-To-Date Per Election for Office Sought		<div> <div>99154.45</div> </div>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....	▶	<div>349.02</div>
(b) SUBTOTAL of Unitemized Independent Expenditures	▶	<div></div>
(c) TOTAL Independent Expenditures.....	▶	<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.

Date _____

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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NAME OF COMMITTEE (In Full) FREEDOMWORKS FOR AMERICA			FEC IDENTIFICATION NUMBER ▼ C 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 Joel Davis			Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 01 / 2014		
Mailing Address 200 S. 2nd Ave.			Amount 4000.00		
City Paden City		State WV	Zip Code 26159		Transaction ID : SE.12039
Purpose of Expenditure IE-Bevin-Strategic Consulting		Category/Type 001		Date of Disbursement or Obligation MM / DD / YYYY 04 / 01 / 2014	
Name of Federal Candidate MATTHEW GRISWOLD BEVIN			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate			District: 00 State: KY		
Calendar Year-To-Date Per Election for Office Sought			240551.93		
Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General			2014 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee Delta Airlines			Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 03 / 2014		
Mailing Address PO Box 20706			Amount 1002.00		
City Atlanta		State GA	Zip Code 30320		Transaction ID : SE.12067
Purpose of Expenditure IE-McConnell-Travel		Category/Type 002		Date of Disbursement or Obligation MM / DD / YYYY 04 / 03 / 2014	
Name of Federal Candidate MITCH MCCONNELL			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate			District: 00 State: KY		
Calendar Year-To-Date Per Election for Office Sought			249866.66		
Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General			2014 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			5002.00		
(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.					
Signature R. Russ Walker			Date MM / DD / YYYY 05 / 20 / 2014		

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) FREEDOMWORKS FOR AMERICA		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C 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 Direct Mail Marketing Group		Date of Public Distribution/Dissemination MM / DD / YYYY <div style="display: flex; justify-content: space-around;"><div>04</div><div>08</div><div>2014</div></div>	
Mailing Address 22780 Indian Creek Dr., Ste. 100		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">202.89</div>	
City Dulles	State VA	Zip Code 20166	Transaction ID : SE.12092
Purpose of Expenditure IE-Bevin-Direct Mail	Category/ Type	<div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	Date of Disbursement or Obligation MM / DD / YYYY <div style="display: flex; justify-content: space-around;"><div>04</div><div>08</div><div>2014</div></div>
Name of Federal Candidate MATTHEW GRISWOLD BEVIN		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <u>00</u> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>KY</u>
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;">257716.86</div>	
		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee Direct Mail Marketing Group		Date of Public Distribution/Dissemination MM / DD / YYYY <div style="display: flex; justify-content: space-around;"><div>04</div><div>08</div><div>2014</div></div>	
Mailing Address 22780 Indian Creek Dr., Ste. 100		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">162.31</div>	
City Dulles	State VA	Zip Code 20166	Transaction ID : SE.12132
Purpose of Expenditure IE-McDaniel-Direct Mail	Category/ Type	<div style="border: 1px solid black; padding: 2px; display: inline-block;">003</div>	Date of Disbursement or Obligation MM / DD / YYYY <div style="display: flex; justify-content: space-around;"><div>04</div><div>08</div><div>2014</div></div>
Name of Federal Candidate CHRISTOPHER BRIAN MCDANIEL		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <u>00</u> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>MS</u>
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;">93563.16</div>	
		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;">365.20</div>
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
(c) TOTAL Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

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R. Russ Walker

[Electronically Filed]

Date

 MM / DD / YYYY

05

20

2014

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 135 OF 220
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) FREEDOMWORKS FOR AMERICA			FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;">C 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 M / D D D / Y Y Y Y Y Y</div>				
Full Name of Payee Direct Mail Marketing Group			Date of Public Distribution/Dissemination <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M M / D D D / Y Y Y Y Y Y</div> <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">04 / 08 / 2014</div>	
Mailing Address 22780 Indian Creek Dr., Ste. 100			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">202.89</div>	
City Dulles		State VA	Zip Code 20166	
Purpose of Expenditure IE-Brannon-Direct Mail		Category/ Type	<div style="border: 1px solid black; padding: 2px; display: inline-block;">003</div> Transaction ID : SE.32432 Date of Disbursement or Obligation <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M M / D D D / Y Y Y Y Y Y</div> <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">04 / 08 / 2014</div>	
Name of Federal Candidate GREGORY JOSEPH BRANNON			Office Sought: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate District: 00 State: NC	
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	
<div style="border: 1px solid black; padding: 2px; display: inline-block;">98960.55</div>			<div style="border: 1px solid black; padding: 2px; display: inline-block;">98960.55</div>	
Full Name of Payee Facebook			Date of Public Distribution/Dissemination <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M M / D D D / Y Y Y Y Y Y</div> <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">04 / 21 / 2014</div>	
Mailing Address 15161 Collection Center Dr.			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">1600.00</div>	
City Chicago		State IL	Zip Code 60693	
Purpose of Expenditure IE-Joyce-Online Ads		Category/ Type	<div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div> Transaction ID : SE.26726 Date of Disbursement or Obligation <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M M / D D D / Y Y Y Y Y Y</div> <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">04 / 21 / 2014</div>	
Name of Federal Candidate DAVID P JOYCE			Office Sought: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose <input type="checkbox"/> President <input type="checkbox"/> Senate District: 14 State: OH	
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	
<div style="border: 1px solid black; padding: 2px; display: inline-block;">32857.68</div>			<div style="border: 1px solid black; padding: 2px; display: inline-block;">32857.68</div>	
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			<div style="border: 1px solid black; padding: 2px; display: inline-block;">1802.89</div>	
(b) SUBTOTAL of Unitemized Independent Expenditures ▶			<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>	
(c) TOTAL Independent Expenditures..... ▶			<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Signature R. Russ Walker			Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M M / D D D / Y Y Y Y Y Y</div> <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">05 / 20 / 2014</div>	
[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) FREEDOMWORKS FOR AMERICA		FEC IDENTIFICATION NUMBER ▼ C 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 Facebook		Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 21 / 2014	
Mailing Address 15161 Collection Center Dr.		Amount 1600.00	
City Chicago	State IL	Zip Code 60693	Transaction ID : SE.26728
Purpose of Expenditure IE-Lynch-Online Ads	Category/Type 004	Date of Disbursement or Obligation MM / DD / YYYY 04 / 21 / 2014	
Name of Federal Candidate MATT LYNCH		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 14 <input type="checkbox"/> President <input type="checkbox"/> Senate State: OH
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	
		34457.68	

Full Name of Payee Facebook		Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 30 / 2014	
Mailing Address 15161 Collection Center Dr.		Amount 4249.26	
City Chicago	State IL	Zip Code 60693	Transaction ID : SE.26859
Purpose of Expenditure IE-Sasse-Online Ads	Category/Type 004	Date of Disbursement or Obligation MM / DD / YYYY 04 / 30 / 2014	
Name of Federal Candidate BENJAMIN E SASSE		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NE
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	
		5237.57	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	5849.26
(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
05 / 20 / 2014

Signature

Full Name of Payee Freedomworks, Inc.		Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 01 / 2014	
Mailing Address 400 N Capitol St., NW Suite 735		Amount 93.18	
City Washington	State DC	Zip Code 20001	Transaction ID : SE.12044 Date of Disbursement or Obligation MM / DD / YYYY 04 / 01 / 2014
Purpose of Expenditure IE-McConnell-Email/Social Media/Printing		Category/ Type 004	
Name of Federal Candidate MITCH MCCONNELL		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: KY
Calendar Year-To-Date Per Election for Office Sought 248645.11		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ►	

(a) SUBTOTAL of Itemized Independent Expenditures.....	▶	4093.18
(b) SUBTOTAL of Unitemized Independent Expenditures	▶	
(c) TOTAL Independent Expenditures.....	▶	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 138 OF 220
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) FREEDOMWORKS FOR AMERICA			FEC IDENTIFICATION NUMBER ▼ C 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 Freedomworks, Inc.			Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 01 / 2014		
Mailing Address 400 N Capitol St., NW Suite 735			Amount 38.82		
City Washington		State DC	Zip Code 20001		Transaction ID : SE.12058 Date of Disbursement or Obligation MM / DD / YYYY 04 / 01 / 2014
Purpose of Expenditure IE-Hagan-Email/Social Media/Printing		Category/ Type 004			
Name of Federal Candidate KAY R HAGAN			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: <u>00</u> <input type="checkbox"/> President State: <u>NC</u>		
Calendar Year-To-Date Per Election for Office Sought 98112.76			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee Freedomworks, Inc.			Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 01 / 2014		
Mailing Address 400 N Capitol St., NW Suite 735			Amount 38.82		
City Washington		State DC	Zip Code 20001		Transaction ID : SE.26847 Date of Disbursement or Obligation MM / DD / YYYY 04 / 01 / 2014
Purpose of Expenditure IE-Sasse-Email/Social Media/Printing		Category/ Type 004			
Name of Federal Candidate BENJAMIN E SASSE			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: <u>00</u> <input type="checkbox"/> President State: <u>NE</u>		
Calendar Year-To-Date Per Election for Office Sought 166.60			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			77.64		
(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 05 / 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) FREEDOMWORKS FOR AMERICA	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C 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 Freedomworks, Inc.		Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY 04 / 02 / 2014</div> </div>	
Mailing Address 400 N Capitol St., NW Suite 735		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">157.10</div>	
City Washington	State DC	Zip Code 20001	Transaction ID : SE.12074 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY 04 / 02 / 2014</div> </div>
Purpose of Expenditure IE-McConnell-Email/Social Media/Printing		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	
Name of Federal Candidate MITCH MCCONNELL		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: KY
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;">248864.66</div>	
		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee Freedomworks, Inc.		Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY 04 / 02 / 2014</div> </div>	
Mailing Address 400 N Capitol St., NW Suite 735		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">108.44</div>	
City Washington	State DC	Zip Code 20001	Transaction ID : SE.12125 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY 04 / 02 / 2014</div> </div>
Purpose of Expenditure IE-McDaniel-Email/Social Media/Printing		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	
Name of Federal Candidate CHRISTOPHER BRIAN MCDANIEL		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: MS
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;">90777.76</div>	
		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;">265.54</div>
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
(c) TOTAL Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

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

R. Russ Walker
[Electronically Filed]

Date

MM / DD / YYYY
05 / 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) FREEDOMWORKS FOR AMERICA			FEC IDENTIFICATION NUMBER ▼ C 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 Freedomworks, Inc.			Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 04 / 02 / 2014		
Mailing Address 400 N Capitol St., NW Suite 735			Amount 58.23		
City Washington		State DC	Zip Code 20001		Transaction ID : SE.32425
Purpose of Expenditure IE-Hagan-Email/Social Media/Printing		Category/Type 004		Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 04 / 02 / 2014	
Name of Federal Candidate KAY R HAGAN			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: <u>00</u> <input type="checkbox"/> President State: <u>NC</u>		
Calendar Year-To-Date Per Election for Office Sought 98170.99			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee Freedomworks, Inc.			Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 04 / 03 / 2014		
Mailing Address 400 N Capitol St., NW Suite 735			Amount 887.83		
City Washington		State DC	Zip Code 20001		Transaction ID : SE.12075
Purpose of Expenditure IE-McConnell-Email/Social Media/Printing		Category/Type 004		Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 04 / 03 / 2014	
Name of Federal Candidate MITCH MCCONNELL			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: <u>00</u> <input type="checkbox"/> President State: <u>KY</u>		
Calendar Year-To-Date Per Election for Office Sought 253083.54			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			946.06		
(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> <div style="text-align: right;">[Electronically Filed]</div>			Date M M M / D D D / Y Y Y Y Y Y 05 / 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) FREEDOMWORKS FOR AMERICA			FEC IDENTIFICATION NUMBER ▼ C 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: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M M</div> / <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">D D D</div> / <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">Y Y Y Y Y Y</div>					
Full Name of Payee Freedomworks, Inc.			Date of Public Distribution/Dissemination <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">04</div> / <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">03</div> / <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">2014</div>		
Mailing Address 400 N Capitol St., NW Suite 735			Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">1328.04</div>		
City Washington		State DC	Zip Code 20001		Transaction ID : SE.12076
Purpose of Expenditure IE-McConnell-Travel		Category/Type <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">002</div>		Date of Disbursement or Obligation <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">04</div> / <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">03</div> / <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">2014</div>	
Name of Federal Candidate MITCH MCCONNELL			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: <u>00</u> <input type="checkbox"/> President State: <u>KY</u>		
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">254411.58</div>			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee Freedomworks, Inc.			Date of Public Distribution/Dissemination <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">04</div> / <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">03</div> / <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">2014</div>		
Mailing Address 400 N Capitol St., NW Suite 735			Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">23.73</div>		
City Washington		State DC	Zip Code 20001		Transaction ID : SE.12089
Purpose of Expenditure IE-McConnell-Travel		Category/Type <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">002</div>		Date of Disbursement or Obligation <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">04</div> / <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">03</div> / <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">2014</div>	
Name of Federal Candidate MITCH MCCONNELL			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: <u>00</u> <input type="checkbox"/> President State: <u>KY</u>		
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">254435.31</div>			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">1351.77</div>		
(b) SUBTOTAL of Unitemized Independent Expenditures ▶			<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"></div>		
(c) TOTAL Independent Expenditures..... ▶			<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"></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> <div style="text-align: right;">[Electronically Filed]</div>			Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">05</div> / <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">20</div> / <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">2014</div>		

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) FREEDOMWORKS FOR AMERICA			FEC IDENTIFICATION NUMBER ▼ C 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 Freedomworks, Inc.			Date of Public Distribution/Dissemination 04 / 03 / 2014		
Mailing Address 400 N Capitol St., NW Suite 735			Amount 89.03		
City Washington		State DC	Zip Code 20001		Transaction ID : SE.12126
Purpose of Expenditure IE-McDaniel-Email/Social Media/Printing		Category/Type 004		Date of Disbursement or Obligation 04 / 03 / 2014	
Name of Federal Candidate CHRISTOPHER BRIAN MCDANIEL			<input checked="" type="checkbox"/> Support Office Sought: <input type="checkbox"/> House District: <u>00</u> <input type="checkbox"/> Oppose <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>MS</u>		
Calendar Year-To-Date Per Election for Office Sought 90866.79			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee Freedomworks, Inc.			Date of Public Distribution/Dissemination 04 / 03 / 2014		
Mailing Address 400 N Capitol St., NW Suite 735			Amount 77.64		
City Washington		State DC	Zip Code 20001		Transaction ID : SE.26848
Purpose of Expenditure IE-Sasse-Email/Social Media/Printing		Category/Type 004		Date of Disbursement or Obligation 04 / 03 / 2014	
Name of Federal Candidate BENJAMIN E SASSE			<input checked="" type="checkbox"/> Support Office Sought: <input type="checkbox"/> House District: <u>00</u> <input type="checkbox"/> Oppose <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>NE</u>		
Calendar Year-To-Date Per Election for Office Sought 244.24			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			166.67		
(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> <div style="text-align: right;">[Electronically Filed]</div>			Date 05 / 20 / 2014		

Full Name of Payee Freedomworks, Inc.		Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 03 / 2014	
Mailing Address 400 N Capitol St., NW Suite 735		Amount 38.82	
City Washington	State DC	Zip Code 20001	Transaction ID : SE.32427 Date of Disbursement or Obligation MM / DD / YYYY 04 / 03 / 2014
Purpose of Expenditure IE-Pryor-Email/Social Media/Printing		Category/ Type 004	
Name of Federal Candidate MARK LUNSFORD PRYOR		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: AR
Calendar Year-To-Date Per Election for Office Sought 7877.75		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....	▶	116.46
(b) SUBTOTAL of Unitemized Independent Expenditures	▶	
(c) TOTAL 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) FREEDOMWORKS FOR AMERICA			FEC IDENTIFICATION NUMBER ▼ C 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 Freedomworks, Inc.			Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 04 / 2014		
Mailing Address 400 N Capitol St., NW Suite 735			Amount 537.14		
City Washington		State DC	Zip Code 20001		Transaction ID : SE.12085
Purpose of Expenditure IE-McConnell-Travel		Category/Type 002		Date of Disbursement or Obligation MM / DD / YYYY 04 / 04 / 2014	
Name of Federal Candidate MITCH MCCONNELL			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: <u>00</u> <input type="checkbox"/> President State: <u>KY</u>		
Calendar Year-To-Date Per Election for Office Sought 256483.46			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee Freedomworks, Inc.			Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 04 / 2014		
Mailing Address 400 N Capitol St., NW Suite 735			Amount 807.46		
City Washington		State DC	Zip Code 20001		Transaction ID : SE.12086
Purpose of Expenditure IE-McConnell-Email/Social Media/Prnting		Category/Type 004		Date of Disbursement or Obligation MM / DD / YYYY 04 / 04 / 2014	
Name of Federal Candidate MITCH MCCONNELL			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: <u>00</u> <input type="checkbox"/> President State: <u>KY</u>		
Calendar Year-To-Date Per Election for Office Sought 257290.92			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			1344.60		
(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> <div style="text-align: right;">[Electronically Filed]</div>			Date MM / DD / YYYY 05 / 20 / 2014		

Full Name of Payee Freedomworks, Inc.		Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 04 / 2014	
Mailing Address 400 N Capitol St., NW Suite 735		Amount 1.94	
City Washington	State DC	Zip Code 20001	Transaction ID : SE.32428 Date of Disbursement or Obligation MM / DD / YYYY 04 / 04 / 2014
Purpose of Expenditure IE-Begich-Email/Social Media/Printing		Category/ Type 004	
Name of Federal Candidate MARK BEGICH		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: AK
Calendar Year-To-Date Per Election for Office Sought 887.60		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ►	

(a) SUBTOTAL of Itemized Independent Expenditures.....	▶	1100.95
(b) SUBTOTAL of Unitemized Independent Expenditures	▶	
(c) TOTAL Independent Expenditures.....	▶	

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 146 OF 220
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) FREEDOMWORKS FOR AMERICA			FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;">C 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 M / D D D / Y Y Y Y Y Y</div>				
Full Name of Payee Freedomworks, Inc.			Date of Public Distribution/Dissemination <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M M / D D D / Y Y Y Y Y Y</div> <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">04 / 04 / 2014</div>	
Mailing Address 400 N Capitol St., NW Suite 735			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">1.94</div>	
City Washington		State DC	Zip Code 20001	
Purpose of Expenditure IE-Pryor-Email/Social Media/Printing		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>		Transaction ID : SE.32429 Date of Disbursement or Obligation <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M M / D D D / Y Y Y Y Y Y</div> <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">04 / 04 / 2014</div>
Name of Federal Candidate MARK LUNSFORD PRYOR			Office Sought: <input type="checkbox"/> House District: <u>00</u> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>AR</u>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">7879.69</div>			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____	
Full Name of Payee Freedomworks, Inc.			Date of Public Distribution/Dissemination <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M M / D D D / Y Y Y Y Y Y</div> <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">04 / 04 / 2014</div>	
Mailing Address 400 N Capitol St., NW Suite 735			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">1.94</div>	
City Washington		State DC	Zip Code 20001	
Purpose of Expenditure IE-Landrieu-Email/Social Media/Printing		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>		Transaction ID : SE.32430 Date of Disbursement or Obligation <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M M / D D D / Y Y Y Y Y Y</div> <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">04 / 04 / 2014</div>
Name of Federal Candidate MARY L LANDRIEU			Office Sought: <input type="checkbox"/> House District: <u>00</u> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>LA</u>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">7893.41</div>			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____	
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.88</div>	
(b) SUBTOTAL of Unitemized Independent Expenditures ▶			<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>	
(c) TOTAL Independent Expenditures..... ▶			<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Signature <i>R. Russ Walker</i>			Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M M / D D D / Y Y Y Y Y Y</div> <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">05 / 20 / 2014</div>	
[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) FREEDOMWORKS FOR AMERICA		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C 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 MM / DD / YYYY		

Full Name of Payee Freedomworks, Inc.		Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 04 / 2014	
Mailing Address 400 N Capitol St., NW Suite 735		Amount 1.94	
City Washington	State DC	Zip Code 20001	Transaction ID : SE.32431
Purpose of Expenditure IE-Hagan-Email/Social Media/Printing	Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 04 / 04 / 2014	
Name of Federal Candidate KAY R HAGAN		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President State: NC	
Calendar Year-To-Date Per Election for Office Sought 98680.02		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee Freedomworks, Inc.		Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 04 / 2014	
Mailing Address 400 N Capitol St., NW Suite 735		Amount -265.00	
City Washington	State DC	Zip Code 20001	Transaction ID : SE.32493
Purpose of Expenditure IE-McConnell-Travel--Adjustment	Category/ Type 002	Date of Disbursement or Obligation MM / DD / YYYY 04 / 04 / 2014	
Name of Federal Candidate MITCH MCCONNELL		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President State: KY	
Calendar Year-To-Date Per Election for Office Sought 257025.92		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	-263.06
(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
 05 / 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) FREEDOMWORKS FOR AMERICA			FEC IDENTIFICATION NUMBER ▼ C 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 Freedomworks, Inc.			Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 05 / 2014		
Mailing Address 400 N Capitol St., NW Suite 735			Amount 208.29		
City Washington		State DC	Zip Code 20001		Transaction ID : SE.12087
Purpose of Expenditure IE-McConnell-Travel		Category/ Type 002		Date of Disbursement or Obligation MM / DD / YYYY 04 / 05 / 2014	
Name of Federal Candidate MITCH MCCONNELL			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: <u>00</u> <input type="checkbox"/> President State: <u>KY</u>		
Calendar Year-To-Date Per Election for Office Sought 257234.21			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee Freedomworks, Inc.			Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 05 / 2014		
Mailing Address 400 N Capitol St., NW Suite 735			Amount 745.84		
City Washington		State DC	Zip Code 20001		Transaction ID : SE.12128
Purpose of Expenditure IE-McDaniel-Travel		Category/ Type 002		Date of Disbursement or Obligation MM / DD / YYYY 04 / 05 / 2014	
Name of Federal Candidate CHRISTOPHER BRIAN MCDANIEL			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: <u>00</u> <input type="checkbox"/> President State: <u>MS</u>		
Calendar Year-To-Date Per Election for Office Sought 92711.64			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			954.13		
(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 05 / 20 / 2014		

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 149 OF 220
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) FREEDOMWORKS FOR AMERICA			FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C 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 MM / DD / YYYY					
Full Name of Payee Freedomworks, Inc.			Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 06 / 2014		
Mailing Address 400 N Capitol St., NW Suite 735			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">210.94</div>		
City Washington		State DC	Zip Code 20001		Transaction ID : SE.12088
Purpose of Expenditure IE-McConnell-Travel		Category/Type <div style="border: 1px solid black; padding: 0 5px;">002</div>		Date of Disbursement or Obligation MM / DD / YYYY 04 / 06 / 2014	
Name of Federal Candidate MITCH MCCONNELL			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: <u>00</u> <input type="checkbox"/> President State: <u>KY</u>		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">257445.15</div>			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee Freedomworks, Inc.			Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 06 / 2014		
Mailing Address 400 N Capitol St., NW Suite 735			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">30.00</div>		
City Washington		State DC	Zip Code 20001		Transaction ID : SE.12091
Purpose of Expenditure IE-McConnell-Travel		Category/Type <div style="border: 1px solid black; padding: 0 5px;">002</div>		Date of Disbursement or Obligation MM / DD / YYYY 04 / 06 / 2014	
Name of Federal Candidate MITCH MCCONNELL			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: <u>00</u> <input type="checkbox"/> President State: <u>KY</u>		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">257475.15</div>			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			<div style="border: 1px solid black; padding: 2px; display: inline-block;">240.94</div>		
(b) SUBTOTAL of Unitemized Independent Expenditures ▶			<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>		
(c) TOTAL Independent Expenditures..... ▶			<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>R. Russ Walker</u> <div style="text-align: right;">[Electronically Filed]</div>			Date MM / DD / YYYY 05 / 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) FREEDOMWORKS FOR AMERICA			FEC IDENTIFICATION NUMBER ▼ C 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 Freedomworks, Inc.			Date of Public Distribution/Dissemination 04 / 06 / 2014		
Mailing Address 400 N Capitol St., NW Suite 735			Amount 609.29		
City Washington		State DC	Zip Code 20001		Transaction ID : SE.12130
Purpose of Expenditure IE-McDaniel-Travel		Category/Type 002		Date of Disbursement or Obligation 04 / 06 / 2014	
Name of Federal Candidate CHRISTOPHER BRIAN MCDANIEL			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: <u>00</u> <input type="checkbox"/> President State: <u>MS</u>		
Calendar Year-To-Date Per Election for Office Sought 93320.93			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee Freedomworks, Inc.			Date of Public Distribution/Dissemination 04 / 07 / 2014		
Mailing Address 400 N Capitol St., NW Suite 735			Amount 38.82		
City Washington		State DC	Zip Code 20001		Transaction ID : SE.12095
Purpose of Expenditure IE-McConnell-Email/Social Media/Prnting		Category/Type 004		Date of Disbursement or Obligation 04 / 07 / 2014	
Name of Federal Candidate MITCH MCCONNELL			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: <u>00</u> <input type="checkbox"/> President State: <u>KY</u>		
Calendar Year-To-Date Per Election for Office Sought 257513.97			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			648.11		
(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 05 / 20 / 2014		

[Electronically Filed]

Full Name of Payee Freedomworks, Inc.		Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 07 / 2014	
Mailing Address 400 N Capitol St., NW Suite 735		Amount 79.92	
City Washington	State DC	Zip Code 20001	Transaction ID : SE.12131 Date of Disbursement or Obligation MM / DD / YYYY 04 / 07 / 2014
Purpose of Expenditure IE-McDaniel-Email/Social Media/Printing		Category/ Type 004	
Name of Federal Candidate CHRISTOPHER BRIAN MCDANIEL		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President District: 00 State: MS
Calendar Year-To-Date Per Election for Office Sought 93400.85		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee Freedomworks, Inc.		Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 07 / 2014	
Mailing Address 400 N Capitol St., NW Suite 735		Amount 77.64	
City Washington	State DC	Zip Code 20001	Transaction ID : SE.32435 Date of Disbursement or Obligation MM / DD / YYYY 04 / 07 / 2014
Purpose of Expenditure IE-Hagan-Email/Social Media/Printing		Category/ Type 004	
Name of Federal Candidate KAY R HAGAN		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NC
Calendar Year-To-Date Per Election for Office Sought		98757.66	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ►

(a) SUBTOTAL of Itemized Independent Expenditures.....	▶	157.56
(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

Full Name of Payee Freedomworks, Inc.		Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 08 / 2014	
Mailing Address 400 N Capitol St., NW Suite 735		Amount 2.28	
City Washington	State DC	Zip Code 20001	Transaction ID : SE.32436 Date of Disbursement or Obligation MM / DD / YYYY 04 / 08 / 2014
Purpose of Expenditure IE-Hagan-Email/Social Media/Printing		Category/ Type 004	
Name of Federal Candidate KAY R HAGAN		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NC
Calendar Year-To-Date Per Election for Office Sought 99156.73		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....	▶	21.69
(b) SUBTOTAL of Unitemized Independent Expenditures	▶	
(c) TOTAL 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) FREEDOMWORKS FOR AMERICA			FEC IDENTIFICATION NUMBER ▼ C 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 / D D / Y Y Y Y					
Full Name of Payee Freedomworks, Inc.			Date of Public Distribution/Dissemination 04 / 09 / 2014		
Mailing Address 400 N Capitol St., NW Suite 735			Amount 77.64		
City Washington		State DC	Zip Code 20001		Transaction ID : SE.12096
Purpose of Expenditure IE-McConnell-Email/Social Media/Prnting		Category/Type 004		Date of Disbursement or Obligation 04 / 09 / 2014	
Name of Federal Candidate MITCH MCCONNELL			<input type="checkbox"/> Support <input type="checkbox"/> Office Sought: <input type="checkbox"/> House District: <u>00</u> <input checked="" type="checkbox"/> Oppose <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>KY</u>		
Calendar Year-To-Date Per Election for Office Sought 261488.40			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee Freedomworks, Inc.			Date of Public Distribution/Dissemination 04 / 09 / 2014		
Mailing Address 400 N Capitol St., NW Suite 735			Amount 77.64		
City Washington		State DC	Zip Code 20001		Transaction ID : SE.26849
Purpose of Expenditure IE-Sasse-Email/Social Media/Printing		Category/Type 004		Date of Disbursement or Obligation 04 / 09 / 2014	
Name of Federal Candidate BENJAMIN E SASSE			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Office Sought: <input type="checkbox"/> House District: <u>00</u> <input type="checkbox"/> Oppose <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>NE</u>		
Calendar Year-To-Date Per Election for Office Sought 321.88			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			155.28		
(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.					
Signature <u>R. Russ Walker</u> <div style="text-align: right;">[Electronically Filed]</div>			Date 05 / 20 / 2014		

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ITEMIZED INDEPENDENT EXPENDITURESPAGE 154 OF 220
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) FREEDOMWORKS FOR AMERICA		FEC IDENTIFICATION NUMBER ▼ C 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 Freedomworks, Inc.		Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 09 / 2014
Mailing Address 400 N Capitol St., NW Suite 735		Amount 79.92
City Washington	State DC	Zip Code 20001
Purpose of Expenditure IE-Hagan-Email/Social Media/Printing	Category/ Type 004	Transaction ID : SE.32438 Date of Disbursement or Obligation MM / DD / YYYY 04 / 09 / 2014
Name of Federal Candidate KAY R HAGAN		Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> Senate State: NC
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee Freedomworks, Inc.		Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 10 / 2014
Mailing Address 400 N Capitol St., NW Suite 735		Amount 399.58
City Washington	State DC	Zip Code 20001
Purpose of Expenditure IE-Sasse-Email/Social Media/Printing	Category/ Type 004	Transaction ID : SE.26850 Date of Disbursement or Obligation MM / DD / YYYY 04 / 10 / 2014
Name of Federal Candidate BENJAMIN E SASSE		Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> Senate State: NE
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	479.50
(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
05 / 20 / 2014

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 155 OF 220
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) FREEDOMWORKS FOR AMERICA			FEC IDENTIFICATION NUMBER ▼ C 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 Freedomworks, Inc.			Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 10 / 2014		
Mailing Address 400 N Capitol St., NW Suite 735			Amount <div style="border: 1px solid black; padding: 2px;">69.62</div>		
City Washington	State DC	Zip Code 20001	Transaction ID : SE.32442		
Purpose of Expenditure IE-Hagan-Email/Social Media/Printing		Category/Type <div style="border: 1px solid black; padding: 2px;">004</div>	Date of Disbursement or Obligation MM / DD / YYYY 04 / 10 / 2014		
Name of Federal Candidate KAY R HAGAN			Office Sought: <input type="checkbox"/> House District: <u>00</u> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>NC</u> <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px;">102164.27</div>			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶		

Full Name of Payee Freedomworks, Inc.			Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 11 / 2014		
Mailing Address 400 N Capitol St., NW Suite 735			Amount <div style="border: 1px solid black; padding: 2px;">77.64</div>		
City Washington	State DC	Zip Code 20001	Transaction ID : SE.12137		
Purpose of Expenditure IE-McDaniel-Email/Social Media/Printing		Category/Type <div style="border: 1px solid black; padding: 2px;">004</div>	Date of Disbursement or Obligation MM / DD / YYYY 04 / 11 / 2014		
Name of Federal Candidate CHRISTOPHER BRIAN MCDANIEL			Office Sought: <input type="checkbox"/> House District: <u>00</u> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>MS</u> <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px;">97826.33</div>			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶		

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px;">147.26</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

Signature _____

[Electronically Filed]

Date

MM / DD / YYYY

MM / DD / YYYY

MM / DD / YYYY

05

20

2014

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 156 OF 220
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) FREEDOMWORKS FOR AMERICA			FEC IDENTIFICATION NUMBER ▼ C 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 Freedomworks, Inc.			Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 11 / 2014		
Mailing Address 400 N Capitol St., NW Suite 735			Amount 83.24		
City Washington		State DC	Zip Code 20001		Transaction ID : SE.26851
Purpose of Expenditure IE-Sasse-Email/Social Media/Printing		Category/Type 004		Date of Disbursement or Obligation MM / DD / YYYY 04 / 11 / 2014	
Name of Federal Candidate BENJAMIN E SASSE			<input checked="" type="checkbox"/> Support Office Sought: <input type="checkbox"/> House District: <u>00</u> <input type="checkbox"/> Oppose <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>NE</u>		
Calendar Year-To-Date Per Election for Office Sought 804.70			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee Freedomworks, Inc.			Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 11 / 2014		
Mailing Address 400 N Capitol St., NW Suite 735			Amount 38.82		
City Washington		State DC	Zip Code 20001		Transaction ID : SE.32443
Purpose of Expenditure IE-McConnell-Email/Social Media/Printing		Category/Type 004		Date of Disbursement or Obligation MM / DD / YYYY 04 / 11 / 2014	
Name of Federal Candidate MITCH MCCONNELL			<input type="checkbox"/> Support Office Sought: <input type="checkbox"/> House District: <u>00</u> <input checked="" type="checkbox"/> Oppose <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>KY</u>		
Calendar Year-To-Date Per Election for Office Sought 264527.22			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			122.06		
(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 05 / 20 / 2014		

[Electronically Filed]

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 157 OF 220
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) FREEDOMWORKS FOR AMERICA		FEC IDENTIFICATION NUMBER ▼ C 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;"> M M M D D D Y Y Y Y Y Y </div> <div style="border-top: 1px solid black; height: 15px;"></div> </div>	

Full Name of Payee Freedomworks, Inc.			Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px;"> <div style="display: flex; justify-content: space-between;"> M M D D Y Y Y Y </div> <div style="border-top: 1px solid black; height: 15px;"></div> </div>		
Mailing Address 400 N Capitol St., NW Suite 735			Amount <div style="border: 1px solid black; padding: 2px;"> <div style="display: flex; justify-content: space-between;"> 04 11 2014 </div> <div style="border-top: 1px solid black; height: 15px;"></div> </div>		
City Washington	State DC	Zip Code 20001	Transaction ID : SE.32444		
Purpose of Expenditure IE-Hagan-Email/Social Media/Printing		Category/ Type 004	Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px;"> <div style="display: flex; justify-content: space-between;"> M M D D Y Y Y Y </div> <div style="border-top: 1px solid black; height: 15px;"></div> </div>		
Name of Federal Candidate KAY R HAGAN		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NC		
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px;"> <div style="display: flex; justify-content: space-between;"> 10 22 62 </div> <div style="border-top: 1px solid black; height: 15px;"></div> </div>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶		

Full Name of Payee Freedomworks, Inc.			Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px;"> <div style="display: flex; justify-content: space-between;"> M M D D Y Y Y Y </div> <div style="border-top: 1px solid black; height: 15px;"></div> </div>		
Mailing Address 400 N Capitol St., NW Suite 735			Amount <div style="border: 1px solid black; padding: 2px;"> <div style="display: flex; justify-content: space-between;"> 04 12 2014 </div> <div style="border-top: 1px solid black; height: 15px;"></div> </div>		
City Washington	State DC	Zip Code 20001	Transaction ID : SE.32445		
Purpose of Expenditure IE-Brannon-Travel		Category/ Type 002	Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px;"> <div style="display: flex; justify-content: space-between;"> M M D D Y Y Y Y </div> <div style="border-top: 1px solid black; height: 15px;"></div> </div>		
Name of Federal Candidate GREGORY JOSEPH BRANNON		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NC		
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px;"> <div style="display: flex; justify-content: space-between;"> 10 22 97 </div> <div style="border-top: 1px solid black; height: 15px;"></div> </div>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶		

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px;"> <div style="display: flex; justify-content: space-between;"> 133 45 </div> <div style="border-top: 1px solid black; height: 15px;"></div> </div>
(b) SUBTOTAL of Unitemized Independent Expenditures▶	<div style="border: 1px solid black; padding: 2px;"> <div style="display: flex; justify-content: space-between;"> </div> <div style="border-top: 1px solid black; height: 15px;"></div> </div>
(c) TOTAL Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px;"> <div style="display: flex; justify-content: space-between;"> </div> <div style="border-top: 1px solid black; height: 15px;"></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

M M
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Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 158 OF 220
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) FREEDOMWORKS FOR AMERICA			FEC IDENTIFICATION NUMBER ▼ C 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 Freedomworks, Inc.			Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 14 / 2014		
Mailing Address 400 N Capitol St., NW Suite 735			Amount 109.73		
City Washington		State DC	Zip Code 20001		Transaction ID : SE.12141
Purpose of Expenditure IE-McDaniel-Email/Social Media/Printing		Category/Type 004		Date of Disbursement or Obligation MM / DD / YYYY 04 / 14 / 2014	
Name of Federal Candidate CHRISTOPHER BRIAN MCDANIEL			<input checked="" type="checkbox"/> Support Office Sought: <input type="checkbox"/> House District: <u>00</u> <input type="checkbox"/> Oppose <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>MS</u>		
Calendar Year-To-Date Per Election for Office Sought 103436.06			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee Freedomworks, Inc.			Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 14 / 2014		
Mailing Address 400 N Capitol St., NW Suite 735			Amount 22.27		
City Washington		State DC	Zip Code 20001		Transaction ID : SE.32446
Purpose of Expenditure IE-McConnell-Email/Social Media/Printing		Category/Type 004		Date of Disbursement or Obligation MM / DD / YYYY 04 / 14 / 2014	
Name of Federal Candidate MITCH MCCONNELL			<input type="checkbox"/> Support Office Sought: <input type="checkbox"/> House District: <u>00</u> <input checked="" type="checkbox"/> Oppose <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>KY</u>		
Calendar Year-To-Date Per Election for Office Sought 264549.49			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			132.00		
(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.					
Signature <u>R. Russ Walker</u> <div style="text-align: right;">[Electronically Filed]</div>			Date MM / DD / YYYY 05 / 20 / 2014		

Full Name of Payee Freedomworks, Inc.		Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 15 / 2014	
Mailing Address 400 N Capitol St., NW Suite 735		Amount 18.94	
City Washington	State DC	Zip Code 20001	Transaction ID : SE.26754 Date of Disbursement or Obligation MM / DD / YYYY 04 / 15 / 2014
Purpose of Expenditure IE-Smith-Email/Social Media/Printing		Category/ Type 004	
Name of Federal Candidate BRYAN SMITH		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 02 <input type="checkbox"/> President <input type="checkbox"/> Senate State: ID
Calendar Year-To-Date Per Election for Office Sought 18457.40		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....	▶	76.31
(b) SUBTOTAL of Unitemized Independent Expenditures	▶	
(c) TOTAL Independent Expenditures.....	▶	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 160 OF 220
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) FREEDOMWORKS FOR AMERICA		FEC IDENTIFICATION NUMBER ▼ C 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 Freedomworks, Inc.		Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 15 / 2014	
Mailing Address 400 N Capitol St., NW Suite 735		Amount 114.06	
City Washington	State DC	Zip Code 20001	Transaction ID : SE.26767
Purpose of Expenditure IE-McDaniel-Email/Social Media/Printing		Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 04 / 15 / 2014
Name of Federal Candidate CHRISTOPHER BRIAN MCDANIEL		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: MS
Calendar Year-To-Date Per Election for Office Sought		103550.12	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee Freedomworks, Inc.		Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 15 / 2014	
Mailing Address 400 N Capitol St., NW Suite 735		Amount 101.26	
City Washington	State DC	Zip Code 20001	Transaction ID : SE.26852
Purpose of Expenditure IE-Sasse-Email/Social Media/Printing		Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 04 / 15 / 2014
Name of Federal Candidate BENJAMIN E SASSE		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NE
Calendar Year-To-Date Per Election for Office Sought		905.96	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	215.32
(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
05 / 20 / 2014

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 161 OF 220
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) FREEDOMWORKS FOR AMERICA			FEC IDENTIFICATION NUMBER ▼ C 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 Freedomworks, Inc.			Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 15 / 2014		
Mailing Address 400 N Capitol St., NW Suite 735			Amount 18.94		
City Washington	State DC	Zip Code 20001	Transaction ID : SE.27006		
Purpose of Expenditure IE-Birman-Email/Social Media/Printing		Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 04 / 15 / 2014		
Name of Federal Candidate IGOR A BIRMAN		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 07 <input type="checkbox"/> President <input type="checkbox"/> Senate State: CA		
Calendar Year-To-Date Per Election for Office Sought 290.03			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶		

Full Name of Payee Freedomworks, Inc.			Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 15 / 2014		
Mailing Address 400 N Capitol St., NW Suite 735			Amount 2.28		
City Washington	State DC	Zip Code 20001	Transaction ID : SE.27172		
Purpose of Expenditure IE-Loudermilk-Email/Social Media/Printing		Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 04 / 15 / 2014		
Name of Federal Candidate BARRY LOUDERMILK		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 11 <input type="checkbox"/> President <input type="checkbox"/> Senate State: GA		
Calendar Year-To-Date Per Election for Office Sought 287.10			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶		

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	21.22
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

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

R. Russ Walker

Signature _____

[Electronically Filed]

Date MM / DD / YYYY
05 / 20 / 2014

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 162 OF 220
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) FREEDOMWORKS FOR AMERICA		FEC IDENTIFICATION NUMBER ▼ C 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 Freedomworks, Inc.		Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 04 / 15 / 2014	
Mailing Address 400 N Capitol St., NW Suite 735		Amount 53.54	
City Washington	State DC	Zip Code 20001	Transaction ID : SE.32450
Purpose of Expenditure IE-McConnell-Email/Social Media/Printing		Category/ Type 004	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 04 / 15 / 2014
Name of Federal Candidate MITCH MCCONNELL		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <u>00</u> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>KY</u>
Calendar Year-To-Date Per Election for Office Sought		264603.03	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶
Full Name of Payee Freedomworks, Inc.		Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 04 / 15 / 2014	
Mailing Address 400 N Capitol St., NW Suite 735		Amount 57.76	
City Washington	State DC	Zip Code 20001	Transaction ID : SE.32451
Purpose of Expenditure IE-Hagan-Email/Social Media/Printing		Category/ Type 004	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 04 / 15 / 2014
Name of Federal Candidate KAY R HAGAN		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <u>00</u> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>NC</u>
Calendar Year-To-Date Per Election for Office Sought		104912.85	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures.....		111.30	
(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 <i>R. Russ Walker</i>		Date M M M / D D D / Y Y Y Y Y Y 05 / 20 / 2014	
		[Electronically Filed]	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 163 OF 220
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) FREEDOMWORKS FOR AMERICA			FEC IDENTIFICATION NUMBER ▼ C 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: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M M / D D D / Y Y Y Y Y Y</div>					
Full Name of Payee Freedomworks, Inc.			Date of Public Distribution/Dissemination <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M M / D D D / Y Y Y Y Y Y</div> 04 / 15 / 2014		
Mailing Address 400 N Capitol St., NW Suite 735			Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">7.30</div>		
City Washington		State DC	Zip Code 20001		Transaction ID : SE.32452
Purpose of Expenditure IE-Amash-Email/Social Media/Printing		Category/Type 004		Date of Disbursement or Obligation <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M M / D D D / Y Y Y Y Y Y</div> 04 / 15 / 2014	
Name of Federal Candidate JUSTIN AMASH			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House District: 03 <input type="checkbox"/> President <input type="checkbox"/> Senate State: MI
Calendar Year-To-Date Per Election for Office Sought			<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">7.30</div>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶
Full Name of Payee Freedomworks, Inc.			Date of Public Distribution/Dissemination <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M M / D D D / Y Y Y Y Y Y</div> 04 / 15 / 2014		
Mailing Address 400 N Capitol St., NW Suite 735			Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">7.30</div>		
City Washington		State DC	Zip Code 20001		Transaction ID : SE.32454
Purpose of Expenditure IE-Bongino-Email/Social Media/Printing		Category/Type 004		Date of Disbursement or Obligation <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M M / D D D / Y Y Y Y Y Y</div> 04 / 15 / 2014	
Name of Federal Candidate DANIEL BONGINO			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House District: 06 <input type="checkbox"/> President <input type="checkbox"/> Senate State: MD
Calendar Year-To-Date Per Election for Office Sought			<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">263.90</div>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures.....▶			<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">14.60</div>		
(b) SUBTOTAL of Unitemized Independent Expenditures▶			<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"></div>		
(c) TOTAL Independent Expenditures.....▶			<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"></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>			[Electronically Filed]		Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M M / D D D / Y Y Y Y Y Y</div> 05 / 20 / 2014

Full Name of Payee Freedomworks, Inc.		Date of Public Distribution/Dissemination <div> <div>MM / DD / YYYY</div> <div>04 / 15 / 2014</div> </div>	
Mailing Address 400 N Capitol St., NW Suite 735		Amount <div> <div></div> <div>18.94</div> </div>	
City Washington	State DC	Zip Code 20001	Transaction ID : SE.32456 Date of Disbursement or Obligation <div> <div>MM / DD / YYYY</div> <div>04 / 15 / 2014</div> </div>
Purpose of Expenditure IE-Love-Email/Social Media/Printing		Category/ Type <div> <div>004</div> </div>	
Name of Federal Candidate MIA LOVE		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate
District: <u>04</u> State: <u>UT</u>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ► _____	
Calendar Year-To-Date Per Election for Office Sought		<div> <div></div> <div>18.94</div> </div>	

(a) SUBTOTAL of Itemized Independent Expenditures.....	▶	21.22
(b) SUBTOTAL of Unitemized Independent Expenditures	▶	
(c) TOTAL Independent Expenditures.....	▶	

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

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 165 OF 220
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) FREEDOMWORKS FOR AMERICA			FEC IDENTIFICATION NUMBER ▼ C 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 Freedomworks, Inc.			Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 15 / 2014		
Mailing Address 400 N Capitol St., NW Suite 735			Amount 18.94		
City Washington	State DC	Zip Code 20001	Transaction ID : SE.32458		
Purpose of Expenditure IE-McClintock-Email/Social Media/Printing		Category/Type 004	Date of Disbursement or Obligation MM / DD / YYYY 04 / 15 / 2014		
Name of Federal Candidate THOMAS MCCLINTOCK		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 04 State: CA		
Calendar Year-To-Date Per Election for Office Sought 18.94			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶		

Full Name of Payee Freedomworks, Inc.			Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 15 / 2014		
Mailing Address 400 N Capitol St., NW Suite 735			Amount 16.20		
City Washington	State DC	Zip Code 20001	Transaction ID : SE.32460		
Purpose of Expenditure IE-Didier-Email/Social Media/Printing		Category/Type 004	Date of Disbursement or Obligation MM / DD / YYYY 04 / 15 / 2014		
Name of Federal Candidate CLINT DIDIER		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 04 State: WA		
Calendar Year-To-Date Per Election for Office Sought 16.20			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶		

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	35.14
(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

MM / DD / YYYY

MM / DD / YYYY

05 / 20 / 2014

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 166 OF 220
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) FREEDOMWORKS FOR AMERICA			FEC IDENTIFICATION NUMBER ▼ C 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 Freedomworks, Inc.			Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 16 / 2014		
Mailing Address 400 N Capitol St., NW Suite 735			Amount 239.74		
City Washington	State DC	Zip Code 20001	Transaction ID : SE.26714		
Purpose of Expenditure IE-Lynch-Email/Social Media/Printing		Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 04 / 16 / 2014		
Name of Federal Candidate MATT LYNCH		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 14 <input type="checkbox"/> President <input type="checkbox"/> Senate State: OH		
Calendar Year-To-Date Per Election for Office Sought 8269.50			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶		

Full Name of Payee Freedomworks, Inc.			Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 16 / 2014		
Mailing Address 400 N Capitol St., NW Suite 735			Amount 2.28		
City Washington	State DC	Zip Code 20001	Transaction ID : SE.26755		
Purpose of Expenditure IE-Smith-Email/Social Media/Printing		Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 04 / 16 / 2014		
Name of Federal Candidate BRYAN SMITH		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 02 <input type="checkbox"/> President <input type="checkbox"/> Senate State: ID		
Calendar Year-To-Date Per Election for Office Sought 18459.68			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶		

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	242.02
(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

MM / DD / YYYY

MM / DD / YYYY

05 / 20 / 2014

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 167 OF 220
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) FREEDOMWORKS FOR AMERICA		FEC IDENTIFICATION NUMBER ▼ C 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 . . . / . . . / </div>	

Full Name of Payee Freedomworks, Inc.			Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px;"> M M M / D D D / Y Y Y Y Y Y 04 / 16 / 2014 </div>		
Mailing Address 400 N Capitol St., NW Suite 735			Amount <div style="border: 1px solid black; padding: 2px;"> 37.37 </div>		
City Washington	State DC	Zip Code 20001	Transaction ID : SE.26766		
Purpose of Expenditure IE-McDaniel-Travel		Category/ Type 002	Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px;"> M M M / D D D / Y Y Y Y Y Y 04 / 16 / 2014 </div>		
Name of Federal Candidate CHRISTOPHER BRIAN MCDANIEL		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: MS		
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px;"> 103587.49 </div>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶		

Full Name of Payee Freedomworks, Inc.			Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px;"> M M M / D D D / Y Y Y Y Y Y 04 / 16 / 2014 </div>		
Mailing Address 400 N Capitol St., NW Suite 735			Amount <div style="border: 1px solid black; padding: 2px;"> 2.28 </div>		
City Washington	State DC	Zip Code 20001	Transaction ID : SE.26768		
Purpose of Expenditure IE-McDaniel-Email/Social Media/Printing		Category/ Type 004	Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px;"> M M M / D D D / Y Y Y Y Y Y 04 / 16 / 2014 </div>		
Name of Federal Candidate CHRISTOPHER BRIAN MCDANIEL		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: MS		
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px;"> 103589.77 </div>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶		

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px;"> 39.65 </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
 05 / 20 / 2014

Signature

Full Name of Payee Freedomworks, Inc.		Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 16 / 2014	
Mailing Address 400 N Capitol St., NW Suite 735		Amount 2.28	
City Washington	State DC	Zip Code 20001	Transaction ID : SE.26853 Date of Disbursement or Obligation MM / DD / YYYY 04 / 16 / 2014
Purpose of Expenditure IE-Sasse-Email/Social Media/Printing		Category/ Type 004	
Name of Federal Candidate BENJAMIN E SASSE		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NE
Calendar Year-To-Date Per Election for Office Sought 908.24		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee Freedomworks, Inc.		Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 16 / 2014	
Mailing Address 400 N Capitol St., NW Suite 735		Amount 2.28	
City Washington	State DC	Zip Code 20001	Transaction ID : SE.27007 Date of Disbursement or Obligation MM / DD / YYYY 04 / 16 / 2014
Purpose of Expenditure IE-Birman-Email/Social Media/Printing		Category/ Type 004	
Name of Federal Candidate IGOR A BIRMAN		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President District: 07 State: CA
Calendar Year-To-Date Per Election for Office Sought 292.31		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....	▶	4.56
(b) SUBTOTAL of Unitemized Independent Expenditures	▶	
(c) TOTAL Independent Expenditures.....	▶	

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

Date _____

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 169 OF 220
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) FREEDOMWORKS FOR AMERICA			FEC IDENTIFICATION NUMBER ▼ C 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 / D D / Y Y Y Y					
Full Name of Payee Freedomworks, Inc.			Date of Public Distribution/Dissemination 04 / 16 / 2014		
Mailing Address 400 N Capitol St., NW Suite 735			Amount 8.01		
City Washington		State DC	Zip Code 20001		Transaction ID : SE.32448
Purpose of Expenditure IE-Brannon-Travel		Category/Type 002		Date of Disbursement or Obligation 04 / 16 / 2014	
Name of Federal Candidate GREGORY JOSEPH BRANNON			<input checked="" type="checkbox"/> Support Office Sought: <input type="checkbox"/> House District: <u>00</u> <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 104920.86			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee Freedomworks, Inc.			Date of Public Distribution/Dissemination 04 / 16 / 2014		
Mailing Address 400 N Capitol St., NW Suite 735			Amount 2.74		
City Washington		State DC	Zip Code 20001		Transaction ID : SE.32462
Purpose of Expenditure IE-McConnell-Email/Social Media/Printing		Category/Type 004		Date of Disbursement or Obligation 04 / 16 / 2014	
Name of Federal Candidate MITCH MCCONNELL			<input type="checkbox"/> Support Office Sought: <input type="checkbox"/> House District: <u>00</u> <input checked="" type="checkbox"/> Oppose <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>KY</u>		
Calendar Year-To-Date Per Election for Office Sought 264605.77			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			10.75		
(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.					
Signature <u>R. Russ Walker</u> <div style="text-align: right;">[Electronically Filed]</div>			Date 05 / 20 / 2014		

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 170 OF 220
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) FREEDOMWORKS FOR AMERICA			FEC IDENTIFICATION NUMBER ▼ C 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 Freedomworks, Inc.			Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 16 / 2014		
Mailing Address 400 N Capitol St., NW Suite 735			Amount 2.28		
City Washington		State DC	Zip Code 20001		Transaction ID : SE.32463
Purpose of Expenditure IE-Hagan-Email/Social Media/Printing		Category/Type 004		Date of Disbursement or Obligation MM / DD / YYYY 04 / 16 / 2014	
Name of Federal Candidate KAY R HAGAN			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: <u>00</u> <input type="checkbox"/> President State: <u>NC</u>		
Calendar Year-To-Date Per Election for Office Sought 105056.56			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee Freedomworks, Inc.			Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 16 / 2014		
Mailing Address 400 N Capitol St., NW Suite 735			Amount 2.28		
City Washington		State DC	Zip Code 20001		Transaction ID : SE.32464
Purpose of Expenditure IE-Amash-Email/Social Media/Printing		Category/Type 004		Date of Disbursement or Obligation MM / DD / YYYY 04 / 16 / 2014	
Name of Federal Candidate JUSTIN AMASH			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: <u>03</u> <input type="checkbox"/> President State: <u>MI</u>		
Calendar Year-To-Date Per Election for Office Sought 9.58			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			4.56		
(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 05 / 20 / 2014		

[Electronically Filed]

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 171 OF 220
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) FREEDOMWORKS FOR AMERICA		FEC IDENTIFICATION NUMBER ▼ C 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 Freedomworks, Inc.			Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 16 / 2014		
Mailing Address 400 N Capitol St., NW Suite 735			Amount 2.28		
City Washington	State DC	Zip Code 20001	Transaction ID : SE.32465		
Purpose of Expenditure IE-Love-Email/Social Media/Printing		Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 04 / 16 / 2014		
Name of Federal Candidate MIA LOVE		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate		District: 04 State: UT
Calendar Year-To-Date Per Election for Office Sought 21.22			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶		

Full Name of Payee Freedomworks, Inc.			Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 16 / 2014		
Mailing Address 400 N Capitol St., NW Suite 735			Amount 2.28		
City Washington	State DC	Zip Code 20001	Transaction ID : SE.32466		
Purpose of Expenditure IE-McClintock-Email/Social Media/Printing		Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 04 / 16 / 2014		
Name of Federal Candidate THOMAS MCCLINTOCK		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate		District: 04 State: CA
Calendar Year-To-Date Per Election for Office Sought 21.22			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶		

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	4.56
(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
 05 / 20 / 2014

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 172 OF 220
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) FREEDOMWORKS FOR AMERICA		FEC IDENTIFICATION NUMBER ▼ C 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;"> MM / DD / YYYY </div> </div>	

Full Name of Payee Freedomworks, Inc.		Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 16 / 2014	
Mailing Address 400 N Capitol St., NW Suite 735		Amount 2.28	
City Washington	State DC	Zip Code 20001	Transaction ID : SE.32467
Purpose of Expenditure IE-Didier-Email/Social Media/Printing		Category/Type 004	Date of Disbursement or Obligation MM / DD / YYYY 04 / 16 / 2014
Name of Federal Candidate CLINT DIDIER		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 04 <input type="checkbox"/> President <input type="checkbox"/> Senate State: WA
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee Freedomworks, Inc.		Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 17 / 2014	
Mailing Address 400 N Capitol St., NW Suite 735		Amount 249.79	
City Washington	State DC	Zip Code 20001	Transaction ID : SE.26715
Purpose of Expenditure IE-Lynch-Email/Social Media/Printing		Category/Type 004	Date of Disbursement or Obligation MM / DD / YYYY 04 / 17 / 2014
Name of Federal Candidate MATT LYNCH		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 14 <input type="checkbox"/> President <input type="checkbox"/> Senate State: OH
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	252.07
(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.

R. Russ Walker

[Electronically Filed]

Date

 MM / DD / YYYY
05 / 20 / 2014

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 173 OF 220
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) FREEDOMWORKS FOR AMERICA		FEC IDENTIFICATION NUMBER ▼ C 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 Freedomworks, Inc.		Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 04 / 17 / 2014	
Mailing Address 400 N Capitol St., NW Suite 735		Amount 66.25	
City Washington	State DC	Zip Code 20001	Transaction ID : SE.26756
Purpose of Expenditure IE-Smith-Email/Social Media/Printing		Category/ Type 004	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 04 / 17 / 2014
Name of Federal Candidate BRYAN SMITH		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 02 <input type="checkbox"/> President <input type="checkbox"/> Senate State: ID
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee Freedomworks, Inc.		Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 04 / 17 / 2014	
Mailing Address 400 N Capitol St., NW Suite 735		Amount 42.70	
City Washington	State DC	Zip Code 20001	Transaction ID : SE.26769
Purpose of Expenditure IE-McDaniel-Travel		Category/ Type 002	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 04 / 17 / 2014
Name of Federal Candidate CHRISTOPHER BRIAN MCDANIEL		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: MS
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶		108.95	
(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 <i>R. Russ Walker</i>		Date M M M / D D D / Y Y Y Y Y Y 05 / 20 / 2014	
		[Electronically Filed]	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 174 OF 220
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) FREEDOMWORKS FOR AMERICA			FEC IDENTIFICATION NUMBER ▼ C 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 / D D / Y Y Y Y					
Full Name of Payee Freedomworks, Inc.			Date of Public Distribution/Dissemination 04 / 17 / 2014		
Mailing Address 400 N Capitol St., NW Suite 735			Amount 61.60		
City Washington		State DC	Zip Code 20001		Transaction ID : SE.32468
Purpose of Expenditure IE-McConnell-Email/Social Media/Printing		Category/Type 004		Date of Disbursement or Obligation 04 / 17 / 2014	
Name of Federal Candidate MITCH MCCONNELL			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: <u>00</u> <input type="checkbox"/> President State: <u>KY</u>		
Calendar Year-To-Date Per Election for Office Sought 264667.37			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee Freedomworks, Inc.			Date of Public Distribution/Dissemination 04 / 18 / 2014		
Mailing Address 400 N Capitol St., NW Suite 735			Amount 438.39		
City Washington		State DC	Zip Code 20001		Transaction ID : SE.26716
Purpose of Expenditure IE-Lynch-Email/Social Media/Printing		Category/Type 004		Date of Disbursement or Obligation 04 / 18 / 2014	
Name of Federal Candidate MATT LYNCH			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: <u>14</u> <input type="checkbox"/> President State: <u>OH</u>		
Calendar Year-To-Date Per Election for Office Sought 8957.68			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			499.99		
(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 05 / 20 / 2014		

[Electronically Filed]

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 175 OF 220
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) FREEDOMWORKS FOR AMERICA			FEC IDENTIFICATION NUMBER ▼ C 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 Freedomworks, Inc.			Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 18 / 2014		
Mailing Address 400 N Capitol St., NW Suite 735			Amount 507.15		
City Washington	State DC	Zip Code 20001	Transaction ID : SE.26775		
Purpose of Expenditure IE-McDaniel-Travel		Category/ Type 002	Date of Disbursement or Obligation MM / DD / YYYY 04 / 18 / 2014		
Name of Federal Candidate CHRISTOPHER BRIAN MCDANIEL		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: MS		
Calendar Year-To-Date Per Election for Office Sought 104139.62			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶		

Full Name of Payee Freedomworks, Inc.			Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 18 / 2014		
Mailing Address 400 N Capitol St., NW Suite 735			Amount 36.91		
City Washington	State DC	Zip Code 20001	Transaction ID : SE.32469		
Purpose of Expenditure IE-McConnell-Email/Social Media/Printing		Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 04 / 18 / 2014		
Name of Federal Candidate MITCH MCCONNELL		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: KY		
Calendar Year-To-Date Per Election for Office Sought 264704.28			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶		

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	544.06
(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
05 / 20 / 2014

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 176 OF 220
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) FREEDOMWORKS FOR AMERICA			FEC IDENTIFICATION NUMBER ▼ C 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 / D D / Y Y Y Y					
Full Name of Payee Freedomworks, Inc.			Date of Public Distribution/Dissemination 04 / 21 / 2014		
Mailing Address 400 N Capitol St., NW Suite 735			Amount 194.09		
City Washington		State DC	Zip Code 20001		Transaction ID : SE.26733
Purpose of Expenditure IE-Lynch-Email/Social Media/Printing		Category/Type 004		Date of Disbursement or Obligation 04 / 21 / 2014	
Name of Federal Candidate MATT LYNCH			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: <u>14</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>OH</u>		
Calendar Year-To-Date Per Election for Office Sought 41651.77			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee Freedomworks, Inc.			Date of Public Distribution/Dissemination 04 / 21 / 2014		
Mailing Address 400 N Capitol St., NW Suite 735			Amount 51.76		
City Washington		State DC	Zip Code 20001		Transaction ID : SE.26771
Purpose of Expenditure IE-McDaniel-Email/Social Media/Printing		Category/Type 004		Date of Disbursement or Obligation 04 / 21 / 2014	
Name of Federal Candidate CHRISTOPHER BRIAN MCDANIEL			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: <u>00</u> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>MS</u>		
Calendar Year-To-Date Per Election for Office Sought 104191.38			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			245.85		
(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> <div style="text-align: right;">[Electronically Filed]</div>			Date 05 / 20 / 2014		

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 177 OF 220
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) FREEDOMWORKS FOR AMERICA		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C 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 Freedomworks, Inc.		Date of Public Distribution/Dissemination MM / DD / YYYY <div style="border: 1px solid black; padding: 2px; display: inline-block;">04 / 21 / 2014</div>	
Mailing Address 400 N Capitol St., NW Suite 735		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">421.96</div>	
City Washington	State DC	Zip Code 20001	Transaction ID : SE.26773
Purpose of Expenditure IE-McDaniel-Travel	Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY <div style="border: 1px solid black; padding: 2px; display: inline-block;">04 / 21 / 2014</div>	
Name of Federal Candidate CHRISTOPHER BRIAN MCDANIEL		<input checked="" type="checkbox"/> Support Office Sought: <input type="checkbox"/> House District: <u>00</u> <input type="checkbox"/> Oppose <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>MS</u>	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee Freedomworks, Inc.		Date of Public Distribution/Dissemination MM / DD / YYYY <div style="border: 1px solid black; padding: 2px; display: inline-block;">04 / 21 / 2014</div>	
Mailing Address 400 N Capitol St., NW Suite 735		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">4.56</div>	
City Washington	State DC	Zip Code 20001	Transaction ID : SE.26788
Purpose of Expenditure IE-Hagan-Email/Social Media/Printing	Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY <div style="border: 1px solid black; padding: 2px; display: inline-block;">04 / 21 / 2014</div>	
Name of Federal Candidate KAY R HAGAN		<input type="checkbox"/> Support Office Sought: <input type="checkbox"/> House District: <u>00</u> <input checked="" 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		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;">426.52</div>
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
(c) TOTAL Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

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

R. Russ Walker

[Electronically Filed]

Date

 MM / DD / YYYY

05 / 20 / 2014

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 178 OF 220
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) FREEDOMWORKS FOR AMERICA		FEC IDENTIFICATION NUMBER ▼ C 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 Freedomworks, Inc.		Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 21 / 2014	
Mailing Address 400 N Capitol St., NW Suite 735		Amount 4.56	
City Washington	State DC	Zip Code 20001	Transaction ID : SE.32470
Purpose of Expenditure IE-McConnell-Email/Social Media/Printing	Category/Type 004		Date of Disbursement or Obligation MM / DD / YYYY 04 / 21 / 2014
Name of Federal Candidate MITCH MCCONNELL		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: KY	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	
264708.84			
Full Name of Payee Freedomworks, Inc.		Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 22 / 2014	
Mailing Address 400 N Capitol St., NW Suite 735		Amount 2.74	
City Washington	State DC	Zip Code 20001	Transaction ID : SE.26758
Purpose of Expenditure IE-Smith-Email/Social Media/Printing	Category/Type 004		Date of Disbursement or Obligation MM / DD / YYYY 04 / 22 / 2014
Name of Federal Candidate BRYAN SMITH		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: 02 <input type="checkbox"/> President <input type="checkbox"/> Senate State: ID	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	
28524.67			
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶		7.30	
(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 <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY</div> <div>05 / 20 / 2014</div> </div>	
[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) FREEDOMWORKS FOR AMERICA		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C 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; text-align: center;">M M M</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">D D D</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 100px; text-align: center;">Y Y Y Y Y Y Y Y</div>		

Full Name of Payee Freedomworks, Inc.		Date of Public Distribution/Dissemination <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">M M M</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">D D D</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 100px; text-align: center;">Y Y Y Y Y Y Y Y</div>	
Mailing Address 400 N Capitol St., NW Suite 735		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;">77.28</div>	
City Washington	State DC	Zip Code 20001	Transaction ID : SE.26772
Purpose of Expenditure IE-McDaniel-Email/Social Media/Printing	Category/ Type	Date of Disbursement or Obligation <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">M M M</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">D D D</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 100px; text-align: center;">Y Y Y Y Y Y Y Y</div>	
Name of Federal Candidate CHRISTOPHER BRIAN MCDANIEL		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <u>00</u> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>MS</u>
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee Freedomworks, Inc.		Date of Public Distribution/Dissemination <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">M M M</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">D D D</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 100px; text-align: center;">Y Y Y Y Y Y Y Y</div>	
Mailing Address 400 N Capitol St., NW Suite 735		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;">201.76</div>	
City Washington	State DC	Zip Code 20001	Transaction ID : SE.26774
Purpose of Expenditure IE-McDaniel-Travel	Category/ Type	Date of Disbursement or Obligation <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">M M M</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">D D D</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 100px; text-align: center;">Y Y Y Y Y Y Y Y</div>	
Name of Federal Candidate CHRISTOPHER BRIAN MCDANIEL		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <u>00</u> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>MS</u>
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;">279.04</div>
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;"> </div>
(c) TOTAL Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;"> </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 Y Y

Signature

Full Name of Payee Freedomworks, Inc.		Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 22 / 2014	
Mailing Address 400 N Capitol St., NW Suite 735		Amount 201.39	
City Washington	State DC	Zip Code 20001	Transaction ID : SE.26795
Purpose of Expenditure IE-Lynch-Email/Social Media/Printing	Category/ Type	004	Date of Disbursement or Obligation MM / DD / YYYY 04 / 22 / 2014
Name of Federal Candidate MATT LYNCH	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> President	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 14 State: OH
Calendar Year-To-Date Per Election for Office Sought	66860.16	Disbursement For:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....	▶	204.13
(b) SUBTOTAL of Unitemized Independent Expenditures	▶	
(c) TOTAL Independent Expenditures.....	▶	

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

Date _____

Signature

Full Name of Payee Freedomworks, Inc.		Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 22 / 2014	
Mailing Address 400 N Capitol St., NW Suite 735		Amount 2.74	
City Washington	State DC	Zip Code 20001	Transaction ID : SE.32471 Date of Disbursement or Obligation MM / DD / YYYY 04 / 22 / 2014
Purpose of Expenditure IE-McConnell-Email/Social Media/Printing		Category/ Type 004	
Name of Federal Candidate MITCH MCCONNELL		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: KY
Calendar Year-To-Date Per Election for Office Sought 264711.58		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....	▶	<div style="border: 1px solid black; height: 20px; margin-bottom: 5px;"></div> <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> 6.62 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures	▶	<div style="border: 1px solid black; height: 20px; margin-bottom: 5px;"></div> <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> </div>
(c) TOTAL Independent Expenditures.....	▶	<div style="border: 1px solid black; height: 20px; margin-bottom: 5px;"></div> <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> </div>

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 182 OF 220
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) FREEDOMWORKS FOR AMERICA		FEC IDENTIFICATION NUMBER ▼ C 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 Freedomworks, Inc.		Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 04 / 23 / 2014	
Mailing Address 400 N Capitol St., NW Suite 735		Amount 5.49	
City Washington	State DC	Zip Code 20001	Transaction ID : SE.26801
Purpose of Expenditure IE-Lynch-Email/Social Media/Printing		Category/ Type 004	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 04 / 23 / 2014
Name of Federal Candidate MATT LYNCH		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 14 <input type="checkbox"/> President <input type="checkbox"/> Senate State: OH
Calendar Year-To-Date Per Election for Office Sought 66865.65		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee Freedomworks, Inc.		Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 04 / 23 / 2014	
Mailing Address 400 N Capitol St., NW Suite 735		Amount 106.26	
City Washington	State DC	Zip Code 20001	Transaction ID : SE.26808
Purpose of Expenditure IE-McDaniel-Email/Social Media/Printing		Category/ Type 004	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 04 / 23 / 2014
Name of Federal Candidate CHRISTOPHER BRIAN MCDANIEL		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: MS
Calendar Year-To-Date Per Election for Office Sought 140001.64		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 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.			
Signature <i>R. Russ Walker</i>		Date M M M / D D D / Y Y Y Y Y Y 05 / 20 / 2014	
		[Electronically Filed]	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 183 OF 220
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) FREEDOMWORKS FOR AMERICA			FEC IDENTIFICATION NUMBER ▼ C 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: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M M</div> / <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">D D D</div> / <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">Y Y Y Y Y Y</div>					
Full Name of Payee Freedomworks, Inc.			Date of Public Distribution/Dissemination <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">04</div> / <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">23</div> / <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">2014</div>		
Mailing Address 400 N Capitol St., NW Suite 735			Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">774.83</div>		
City Washington		State DC	Zip Code 20001		Transaction ID : SE.26809
Purpose of Expenditure IE-McDaniel-Travel		Category/Type 002		Date of Disbursement or Obligation <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">04</div> / <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">23</div> / <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">2014</div>	
Name of Federal Candidate CHRISTOPHER BRIAN MCDANIEL			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President State: MS		
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">140776.47</div>			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee Freedomworks, Inc.			Date of Public Distribution/Dissemination <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">04</div> / <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">23</div> / <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">2014</div>		
Mailing Address 400 N Capitol St., NW Suite 735			Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">2.74</div>		
City Washington		State DC	Zip Code 20001		Transaction ID : SE.26832
Purpose of Expenditure IE-Hagan-Email/Social Media/Printing		Category/Type 004		Date of Disbursement or Obligation <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">04</div> / <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">23</div> / <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">2014</div>	
Name of Federal Candidate KAY R HAGAN			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President State: NC		
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">125058.60</div>			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">777.57</div>		
(b) SUBTOTAL of Unitemized Independent Expenditures ▶			<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"></div>		
(c) TOTAL Independent Expenditures..... ▶			<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"></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 R. Russ Walker			Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">05</div> / <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">20</div> / <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">2014</div>		

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 184 OF 220
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) FREEDOMWORKS FOR AMERICA			FEC IDENTIFICATION NUMBER ▼ C 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 Freedomworks, Inc.		Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 04 / 23 / 2014		
Mailing Address 400 N Capitol St., NW Suite 735		Amount 16.88		
City Washington	State DC	Zip Code 20001	Transaction ID : SE.26855	
Purpose of Expenditure IE-Sasse-Email/Social Media/Printing		Category/ Type 004	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 04 / 23 / 2014	
Name of Federal Candidate BENJAMIN E SASSE		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NE	
Calendar Year-To-Date Per Election for Office Sought		929.00	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee Freedomworks, Inc.		Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 04 / 23 / 2014		
Mailing Address 400 N Capitol St., NW Suite 735		Amount 2.28		
City Washington	State DC	Zip Code 20001	Transaction ID : SE.27008	
Purpose of Expenditure IE-Birman-Email/Social Media/Printing		Category/ Type 004	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 04 / 23 / 2014	
Name of Federal Candidate IGOR A BIRMAN		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 07 <input type="checkbox"/> President <input type="checkbox"/> Senate State: CA	
Calendar Year-To-Date Per Election for Office Sought		294.59	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures.....		19.16		
(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 <i>R. Russ Walker</i>		Date M M M / D D D / Y Y Y Y Y Y 05 / 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) FREEDOMWORKS FOR AMERICA			FEC IDENTIFICATION NUMBER ▼ C 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 Freedomworks, Inc.			Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 23 / 2014		
Mailing Address 400 N Capitol St., NW Suite 735			Amount 2.74		
City Washington	State DC	Zip Code 20001	Transaction ID : SE.27116		
Purpose of Expenditure IE-Smith-Email/Social Media/Printing		Category/Type 004	Date of Disbursement or Obligation MM / DD / YYYY 04 / 23 / 2014		
Name of Federal Candidate BRYAN SMITH		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 02 <input type="checkbox"/> President <input type="checkbox"/> Senate State: ID		
Calendar Year-To-Date Per Election for Office Sought 28527.41			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶		

Full Name of Payee Freedomworks, Inc.			Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 23 / 2014		
Mailing Address 400 N Capitol St., NW Suite 735			Amount 25.52		
City Washington	State DC	Zip Code 20001	Transaction ID : SE.32472		
Purpose of Expenditure IE-McConnell-Email/Social Media/Printing		Category/Type 004	Date of Disbursement or Obligation MM / DD / YYYY 04 / 23 / 2014		
Name of Federal Candidate MITCH MCCONNELL		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: KY		
Calendar Year-To-Date Per Election for Office Sought 264737.10			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶		

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	28.26
(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
05 / 20 / 2014

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 186 OF 220
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) FREEDOMWORKS FOR AMERICA		FEC IDENTIFICATION NUMBER ▼ C 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 Freedomworks, Inc.		Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 23 / 2014	
Mailing Address 400 N Capitol St., NW Suite 735		Amount 11.77	
City Washington	State DC	Zip Code 20001	Transaction ID : SE.32473
Purpose of Expenditure IE-Shannon-Email/Social Media/Printing		Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 04 / 23 / 2014
Name of Federal Candidate T W SHANNON		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: OK
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee Freedomworks, Inc.		Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 24 / 2014	
Mailing Address 400 N Capitol St., NW Suite 735		Amount 80.38	
City Washington	State DC	Zip Code 20001	Transaction ID : SE.26802
Purpose of Expenditure IE-Lynch-Email/Social Media/Printing		Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 04 / 24 / 2014
Name of Federal Candidate MATT LYNCH		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 14 <input type="checkbox"/> President <input type="checkbox"/> Senate State: OH
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶		92.15	
(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 <i>R. Russ Walker</i>		Date MM / DD / YYYY 05 / 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) FREEDOMWORKS FOR AMERICA		FEC IDENTIFICATION NUMBER ▼ C 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 Freedomworks, Inc.			Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 24 / 2014		
Mailing Address 400 N Capitol St., NW Suite 735			Amount 103.52		
City Washington	State DC	Zip Code 20001	Transaction ID : SE.26810		
Purpose of Expenditure IE-McDaniel-Email/Social Media/Printing		Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 04 / 24 / 2014		
Name of Federal Candidate CHRISTOPHER BRIAN MCDANIEL		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: MS		
Calendar Year-To-Date Per Election for Office Sought 140879.99			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶		

Full Name of Payee Freedomworks, Inc.			Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 24 / 2014		
Mailing Address 400 N Capitol St., NW Suite 735			Amount 890.61		
City Washington	State DC	Zip Code 20001	Transaction ID : SE.26811		
Purpose of Expenditure IE-McDaniel-Travel		Category/ Type 002	Date of Disbursement or Obligation MM / DD / YYYY 04 / 24 / 2014		
Name of Federal Candidate CHRISTOPHER BRIAN MCDANIEL		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: MS		
Calendar Year-To-Date Per Election for Office Sought 141770.60			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶		

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	994.13
(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
 05 / 20 / 2014

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 188 OF 220
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) FREEDOMWORKS FOR AMERICA			FEC IDENTIFICATION NUMBER ▼ C 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 Freedomworks, Inc.			Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 24 / 2014		
Mailing Address 400 N Capitol St., NW Suite 735			Amount 5.02		
City Washington State DC Zip Code 20001		Transaction ID : SE.26834 Date of Disbursement or Obligation MM / DD / YYYY 04 / 24 / 2014			
Purpose of Expenditure IE-Hagan-Email/Social Media/Printing		Category/Type 004			
Name of Federal Candidate KAY R HAGAN			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NC		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee Freedomworks, Inc.			Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 24 / 2014		
Mailing Address 400 N Capitol St., NW Suite 735			Amount 6.62		
City Washington State DC Zip Code 20001		Transaction ID : SE.26856 Date of Disbursement or Obligation MM / DD / YYYY 04 / 24 / 2014			
Purpose of Expenditure IE-Sasse-Email/Social Media/Printing		Category/Type 004			
Name of Federal Candidate BENJAMIN E SASSE			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NE		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			11.64		
(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 R. Russ Walker			Date MM / DD / YYYY 05 / 20 / 2014		

[Electronically Filed]

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 189 OF 220
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) FREEDOMWORKS FOR AMERICA			FEC IDENTIFICATION NUMBER ▼ C 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 Freedomworks, Inc.			Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 24 / 2014		
Mailing Address 400 N Capitol St., NW Suite 735			Amount 2.28		
City Washington	State DC	Zip Code 20001	Transaction ID : SE.27009 Date of Disbursement or Obligation MM / DD / YYYY 04 / 24 / 2014		
Purpose of Expenditure IE-Birman-Email/Social Media/Printing		Category/ Type 004			
Name of Federal Candidate IGOR A BIRMAN		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <u>07</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>CA</u>		
Calendar Year-To-Date Per Election for Office Sought 296.87			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee Freedomworks, Inc.			Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 24 / 2014		
Mailing Address 400 N Capitol St., NW Suite 735			Amount 12.23		
City Washington	State DC	Zip Code 20001	Transaction ID : SE.32475 Date of Disbursement or Obligation MM / DD / YYYY 04 / 24 / 2014		
Purpose of Expenditure IE-Schultz-Email/Social Media/Printing		Category/ Type 004			
Name of Federal Candidate MATTHEW DAVID SCHULTZ		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <u>03</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>IA</u>		
Calendar Year-To-Date Per Election for Office Sought 230.99			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			14.51		
(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 <i>R. Russ Walker</i>		[Electronically Filed]		Date MM / DD / YYYY 05 / 20 / 2014	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 190 OF 220
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) FREEDOMWORKS FOR AMERICA			FEC IDENTIFICATION NUMBER ▼ C 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 Freedomworks, Inc.			Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 25 / 2014		
Mailing Address 400 N Capitol St., NW Suite 735			Amount 217.51		
City Washington	State DC	Zip Code 20001	Transaction ID : SE.26812 Date of Disbursement or Obligation MM / DD / YYYY 04 / 25 / 2014		
Purpose of Expenditure IE-McDaniel-Email/Social Media/Printing		Category/ Type 004			
Name of Federal Candidate CHRISTOPHER BRIAN MCDANIEL		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <u>00</u> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>MS</u>		
Calendar Year-To-Date Per Election for Office Sought 141988.11			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee Freedomworks, Inc.			Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 25 / 2014		
Mailing Address 400 N Capitol St., NW Suite 735			Amount 723.42		
City Washington	State DC	Zip Code 20001	Transaction ID : SE.26814 Date of Disbursement or Obligation MM / DD / YYYY 04 / 25 / 2014		
Purpose of Expenditure IE-McDaniel-Travel		Category/ Type 002			
Name of Federal Candidate CHRISTOPHER BRIAN MCDANIEL		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <u>00</u> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>MS</u>		
Calendar Year-To-Date Per Election for Office Sought 142711.53			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			940.93		
(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 05 / 20 / 2014	

Full Name of Payee Freedomworks, Inc.		Date of Public Distribution/Dissemination <div> <div>MM / DD / YYYY</div> <div>04 / 25 / 2014</div> </div>	
Mailing Address 400 N Capitol St., NW Suite 735		Amount <div> <div></div> <div>16.32</div> </div>	
City Washington	State DC	Zip Code 20001	Transaction ID : SE.26857 Date of Disbursement or Obligation <div> <div>MM / DD / YYYY</div> <div>04 / 25 / 2014</div> </div>
Purpose of Expenditure IE-Sasse-Email/Social Media/Printing		Category/ Type <div> <div></div> <div>004</div> </div>	
Name of Federal Candidate BENJAMIN E SASSE		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> Other
Calendar Year-To-Date Per Election for Office Sought <div> <div></div> <div>951.94</div> </div>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....	▶	<div style="text-align: right; margin-bottom: 5px;">178.99</div> <div style="margin-top: 10px;"> </div>
(b) SUBTOTAL of Unitemized Independent Expenditures	▶	<div style="margin-top: 10px;"> </div>
(c) TOTAL Independent Expenditures.....	▶	<div style="margin-top: 10px;"> </div>

05 / 20 / 2014

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

Full Name of Payee Freedomworks, Inc.		Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 25 / 2014	
Mailing Address 400 N Capitol St., NW Suite 735		Amount 19.53	
City Washington	State DC	Zip Code 20001	Transaction ID : SE.27117 Date of Disbursement or Obligation MM / DD / YYYY 04 / 25 / 2014
Purpose of Expenditure IE-Smith-Social Media/Printing		Category/ Type 004	
Name of Federal Candidate BRYAN SMITH		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 02 <input type="checkbox"/> President <input type="checkbox"/> Senate State: ID
Calendar Year-To-Date Per Election for Office Sought		28546.94	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....	▶	224.10
(b) SUBTOTAL of Unitemized Independent Expenditures	▶	
(c) TOTAL Independent Expenditures.....	▶	

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 193 OF 220
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) FREEDOMWORKS FOR AMERICA			FEC IDENTIFICATION NUMBER ▼ C 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 Freedomworks, Inc.			Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 25 / 2014		
Mailing Address 400 N Capitol St., NW Suite 735			Amount 160.95		
City Washington		State DC	Zip Code 20001		Transaction ID : SE.32476
Purpose of Expenditure IE-McConnell-Email/Social Media/Printing		Category/Type 004		Date of Disbursement or Obligation MM / DD / YYYY 04 / 25 / 2014	
Name of Federal Candidate MITCH MCCONNELL			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> General District: 00 State: KY		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶		
264898.05					
Full Name of Payee Freedomworks, Inc.			Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 25 / 2014		
Mailing Address 400 N Capitol St., NW Suite 735			Amount 29.76		
City Washington		State DC	Zip Code 20001		Transaction ID : SE.32477
Purpose of Expenditure IE-Graham-Email/Social Media/Printing		Category/Type 004		Date of Disbursement or Obligation MM / DD / YYYY 04 / 25 / 2014	
Name of Federal Candidate LINDSEY OLIN GRAHAM			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> General District: 00 State: SC		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶		
6194.81					
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			190.71		
(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 05 / 20 / 2014		

[Electronically Filed]

Full Name of Payee Freedomworks, Inc.		Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 25 / 2014	
Mailing Address 400 N Capitol St., NW Suite 735		Amount 14.05	
City Washington	State DC	Zip Code 20001	Transaction ID : SE.32479 Date of Disbursement or Obligation MM / DD / YYYY 04 / 25 / 2014
Purpose of Expenditure IE-Lamborn-Email/Social Media/Printing		Category/ Type 004	
Name of Federal Candidate DOUGLAS L LAMBORN		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate <input type="checkbox"/> Other
Calendar Year-To-Date Per Election for Office Sought 14.05		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	▶	28.10
(b) SUBTOTAL of Unitemized Independent Expenditures	▶	
(c) TOTAL Independent Expenditures.....	▶	

05 / 20 / 2014

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 195 OF 220
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) FREEDOMWORKS FOR AMERICA		FEC IDENTIFICATION NUMBER ▼ C 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 Freedomworks, Inc.		Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 04 / 26 / 2014	
Mailing Address 400 N Capitol St., NW Suite 735		Amount 74.06	
City Washington	State DC	Zip Code 20001	Transaction ID : SE.26815
Purpose of Expenditure IE-McDaniel-Travel		Category/ Type 002	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 04 / 26 / 2014
Name of Federal Candidate CHRISTOPHER BRIAN MCDANIEL		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: MS
Calendar Year-To-Date Per Election for Office Sought		142785.59	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶
Full Name of Payee Freedomworks, Inc.		Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 04 / 27 / 2014	
Mailing Address 400 N Capitol St., NW Suite 735		Amount 474.93	
City Washington	State DC	Zip Code 20001	Transaction ID : SE.26816
Purpose of Expenditure IE-McDaniel-Travel		Category/ Type 002	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 04 / 27 / 2014
Name of Federal Candidate CHRISTOPHER BRIAN MCDANIEL		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: MS
Calendar Year-To-Date Per Election for Office Sought		143260.52	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures.....		548.99	
(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 <i>R. Russ Walker</i>		Date M M M / D D D / Y Y Y Y Y Y 05 / 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) FREEDOMWORKS FOR AMERICA		FEC IDENTIFICATION NUMBER ▼ C 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;"> MM / DD / YYYY </div> </div>	

Full Name of Payee Freedomworks, Inc.		Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 28 / 2014	
Mailing Address 400 N Capitol St., NW Suite 735		Amount <div style="border: 1px solid black; padding: 2px;">128.91</div>	
City Washington	State DC	Zip Code 20001	Transaction ID : SE.26818
Purpose of Expenditure IE-McDaniel-Email/Social Media/Printing		Category/Type <div style="border: 1px solid black; padding: 2px;">004</div>	Date of Disbursement or Obligation MM / DD / YYYY 04 / 28 / 2014
Name of Federal Candidate CHRISTOPHER BRIAN MCDANIEL		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <u>00</u> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>MS</u>
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px;">155378.43</div>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee Freedomworks, Inc.		Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 28 / 2014	
Mailing Address 400 N Capitol St., NW Suite 735		Amount <div style="border: 1px solid black; padding: 2px;">422.09</div>	
City Washington	State DC	Zip Code 20001	Transaction ID : SE.26836
Purpose of Expenditure IE-Brannon-Travel		Category/Type <div style="border: 1px solid black; padding: 2px;">002</div>	Date of Disbursement or Obligation MM / DD / YYYY 04 / 28 / 2014
Name of Federal Candidate GREGORY JOSEPH BRANNON		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <u>00</u> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>NC</u>
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px;">132110.16</div>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px;">551.00</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

MM / DD / YYYY

05 / 20 / 2014

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 197 OF 220
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) FREEDOMWORKS FOR AMERICA		FEC IDENTIFICATION NUMBER ▼ C 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 Freedomworks, Inc.		Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 28 / 2014
Mailing Address 400 N Capitol St., NW Suite 735		Amount 25.40
City Washington	State DC	Zip Code 20001
Purpose of Expenditure IE-Hagan-Email/Social Media/Printing	Category/ Type 004	Transaction ID : SE.26837 Date of Disbursement or Obligation MM / DD / YYYY 04 / 28 / 2014
Name of Federal Candidate KAY R HAGAN		Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> Senate State: NC
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee Freedomworks, Inc.		Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 28 / 2014
Mailing Address 400 N Capitol St., NW Suite 735		Amount 25.40
City Washington	State DC	Zip Code 20001
Purpose of Expenditure IE-Sasse-Email/Social Media/Printing	Category/ Type 004	Transaction ID : SE.26858 Date of Disbursement or Obligation MM / DD / YYYY 04 / 28 / 2014
Name of Federal Candidate BENJAMIN E SASSE		Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> Senate State: NE
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	50.80
(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

[Electronically Filed]

Date

MM / DD / YYYY
05 / 20 / 2014

Signature

Full Name of Payee Freedomworks, Inc.		Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 28 / 2014	
Mailing Address 400 N Capitol St., NW Suite 735		Amount 5.49	
City Washington	State DC	Zip Code 20001	Transaction ID : SE.26881 Date of Disbursement or Obligation MM / DD / YYYY 04 / 28 / 2014
Purpose of Expenditure IE-Lynch-Email/Social Media/Printing		Category/ Type 004	
Name of Federal Candidate MATT LYNCH		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 14 State: OH
Calendar Year-To-Date Per Election for Office Sought 68156.09		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee Freedomworks, Inc.		Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 28 / 2014	
Mailing Address 400 N Capitol St., NW Suite 735		Amount 13.84	
City Washington	State DC	Zip Code 20001	Transaction ID : SE.27173 Date of Disbursement or Obligation MM / DD / YYYY 04 / 28 / 2014
Purpose of Expenditure IE-Loudermilk-Email/Social Media/Printing		Category/ Type 004	
Name of Federal Candidate BARRY LOUDERMILK		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 11 <input type="checkbox"/> President <input type="checkbox"/> Senate State: GA
Calendar Year-To-Date Per Election for Office Sought 300.94		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....	▶	19.33
(b) SUBTOTAL of Unitemized Independent Expenditures	▶	
(c) TOTAL Independent Expenditures.....	▶	

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

Date _____

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) FREEDOMWORKS FOR AMERICA		FEC IDENTIFICATION NUMBER ▼ C 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 Freedomworks, Inc.		Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 28 / 2014	
Mailing Address 400 N Capitol St., NW Suite 735		Amount 25.40	
City Washington	State DC	Zip Code 20001	Transaction ID : SE.32481
Purpose of Expenditure IE-McConnell-Email/Social Media/Printing	Category/Type 004	Date of Disbursement or Obligation MM / DD / YYYY 04 / 28 / 2014	
Name of Federal Candidate MITCH MCCONNELL		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: KY
Calendar Year-To-Date Per Election for Office Sought 265528.32		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee Freedomworks, Inc.		Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 28 / 2014	
Mailing Address 400 N Capitol St., NW Suite 735		Amount 25.40	
City Washington	State DC	Zip Code 20001	Transaction ID : SE.32482
Purpose of Expenditure IE-Shannon-Email/Social Media/Printing	Category/Type 004	Date of Disbursement or Obligation MM / DD / YYYY 04 / 28 / 2014	
Name of Federal Candidate T W SHANNON		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: OK
Calendar Year-To-Date Per Election for Office Sought 37.17		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	50.80
(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

[Electronically Filed]

Date

MM / DD / YYYY
05 / 20 / 2014

Signature

Full Name of Payee Freedomworks, Inc.		Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 29 / 2014	
Mailing Address 400 N Capitol St., NW Suite 735		Amount 10.97	
City Washington	State DC	Zip Code 20001	Transaction ID : SE.26861 Date of Disbursement or Obligation MM / DD / YYYY 04 / 29 / 2014
Purpose of Expenditure IE-Sasse-Email/Social Media/Printing		Category/ Type 004	
Name of Federal Candidate BENJAMIN E SASSE		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NE
Calendar Year-To-Date Per Election for Office Sought 988.31		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ►	

(a) SUBTOTAL of Itemized Independent Expenditures.....	▶	24.81
(b) SUBTOTAL of Unitemized Independent Expenditures	▶	
(c) TOTAL Independent Expenditures.....	▶	

Full Name of Payee Freedomworks, Inc.		Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 29 / 2014	
Mailing Address 400 N Capitol St., NW Suite 735		Amount 10.97	
City Washington	State DC	Zip Code 20001	Transaction ID : SE.26909 Date of Disbursement or Obligation MM / DD / YYYY 04 / 29 / 2014
Purpose of Expenditure IE-Hagan-Email/Social Media/Printing		Category/ Type 004	
Name of Federal Candidate KAY R HAGAN		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NC
Calendar Year-To-Date Per Election for Office Sought		132146.53	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....	▶	21.94
(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

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) FREEDOMWORKS FOR AMERICA			FEC IDENTIFICATION NUMBER ▼ C 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 Freedomworks, Inc.			Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 29 / 2014		
Mailing Address 400 N Capitol St., NW Suite 735			Amount 137.27		
City Washington		State DC	Zip Code 20001		Transaction ID : SE.27035 Date of Disbursement or Obligation MM / DD / YYYY 04 / 29 / 2014
Purpose of Expenditure IE-McDaniel-Email/Social Media/Printing		Category/Type 004			
Name of Federal Candidate CHRISTOPHER BRIAN MCDANIEL			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: <u>00</u> <input type="checkbox"/> President State: <u>MS</u>		
Calendar Year-To-Date Per Election for Office Sought 155515.70			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee Freedomworks, Inc.			Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 29 / 2014		
Mailing Address 400 N Capitol St., NW Suite 735			Amount 10.97		
City Washington		State DC	Zip Code 20001		Transaction ID : SE.32485 Date of Disbursement or Obligation MM / DD / YYYY 04 / 29 / 2014
Purpose of Expenditure IE-McConnell-Email/Social Media/Printing		Category/Type 004			
Name of Federal Candidate MITCH MCCONNELL			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: <u>00</u> <input type="checkbox"/> President State: <u>KY</u>		
Calendar Year-To-Date Per Election for Office Sought 265539.29			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			148.24		
(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 <u>R. Russ Walker</u>			Date MM / DD / YYYY 05 / 20 / 2014		

[Electronically Filed]

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 203 OF 220
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) FREEDOMWORKS FOR AMERICA		FEC IDENTIFICATION NUMBER ▼ C 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 Freedomworks, Inc.		Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 29 / 2014	
Mailing Address 400 N Capitol St., NW Suite 735		Amount 10.97	
City Washington	State DC	Zip Code 20001	Transaction ID : SE.32486
Purpose of Expenditure IE-Shannon-Email/Social Media/Printing		Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 04 / 29 / 2014
Name of Federal Candidate T W SHANNON		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: OK
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee Freedomworks, Inc.		Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 30 / 2014	
Mailing Address 400 N Capitol St., NW Suite 735		Amount 5.49	
City Washington	State DC	Zip Code 20001	Transaction ID : SE.26862
Purpose of Expenditure IE-Sasse-Email/Social Media/Printing		Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 04 / 30 / 2014
Name of Federal Candidate BENJAMIN E SASSE		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NE
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶		16.46	
(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 <i>R. Russ Walker</i>		Date MM / DD / YYYY 05 / 20 / 2014	
		[Electronically Filed]	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 204 OF 220
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) FREEDOMWORKS FOR AMERICA		FEC IDENTIFICATION NUMBER ▼ C 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 Freedomworks, Inc.		Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 04 / 30 / 2014	
Mailing Address 400 N Capitol St., NW Suite 735		Amount 64.97	
City Washington	State DC	Zip Code 20001	Transaction ID : SE.26887
Purpose of Expenditure IE-Lynch-Email/Social Media/Printing		Category/ Type 004	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 04 / 30 / 2014
Name of Federal Candidate MATT LYNCH		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 14 <input type="checkbox"/> President <input type="checkbox"/> Senate State: OH
Calendar Year-To-Date Per Election for Office Sought 73120.92		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee Freedomworks, Inc.		Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 04 / 30 / 2014	
Mailing Address 400 N Capitol St., NW Suite 735		Amount 35.85	
City Washington	State DC	Zip Code 20001	Transaction ID : SE.26910
Purpose of Expenditure IE-Hagan-Email/Social Media/Printing		Category/ Type 004	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 04 / 30 / 2014
Name of Federal Candidate KAY R HAGAN		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NC
Calendar Year-To-Date Per Election for Office Sought 132182.38		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures.....▶		100.82	
(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 <i>R. Russ Walker</i>		Date M M M / D D D / Y Y Y Y Y Y 05 / 20 / 2014	
		[Electronically Filed]	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 205 OF 220
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) FREEDOMWORKS FOR AMERICA		FEC IDENTIFICATION NUMBER ▼ C 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;"> M M M D D D Y Y Y Y Y Y </div> <div style="display: flex; justify-content: space-between;"> </div> </div>	

Full Name of Payee Freedomworks, Inc.		Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px;"> <div style="display: flex; justify-content: space-between;"> M M M D D D Y Y Y Y Y Y </div> <div style="display: flex; justify-content: space-between;"> 04 30 2014 </div> </div>	
Mailing Address 400 N Capitol St., NW Suite 735		Amount <div style="border: 1px solid black; padding: 2px;"> <div style="display: flex; justify-content: space-between;"> </div> <div style="display: flex; justify-content: space-between;"> 113.56 </div> </div>	
City Washington	State DC	Zip Code 20001	Transaction ID : SE.27036 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px;"> <div style="display: flex; justify-content: space-between;"> M M M D D D Y Y Y Y Y Y </div> <div style="display: flex; justify-content: space-between;"> 04 30 2014 </div> </div>
Purpose of Expenditure IE-McDaniel-Email/Social Media/Printing		Category/ Type 004	
Name of Federal Candidate CHRISTOPHER BRIAN MCDANIEL		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: MS
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px;"> <div style="display: flex; justify-content: space-between;"> </div> <div style="display: flex; justify-content: space-between;"> 155629.26 </div> </div>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee Freedomworks, Inc.		Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px;"> <div style="display: flex; justify-content: space-between;"> M M M D D D Y Y Y Y Y Y </div> <div style="display: flex; justify-content: space-between;"> 04 30 2014 </div> </div>	
Mailing Address 400 N Capitol St., NW Suite 735		Amount <div style="border: 1px solid black; padding: 2px;"> <div style="display: flex; justify-content: space-between;"> </div> <div style="display: flex; justify-content: space-between;"> 5.49 </div> </div>	
City Washington	State DC	Zip Code 20001	Transaction ID : SE.32487 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px;"> <div style="display: flex; justify-content: space-between;"> M M M D D D Y Y Y Y Y Y </div> <div style="display: flex; justify-content: space-between;"> 04 30 2014 </div> </div>
Purpose of Expenditure IE-McConnell-Online Ads		Category/ Type 004	
Name of Federal Candidate MITCH MCCONNELL		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: KY
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px;"> <div style="display: flex; justify-content: space-between;"> </div> <div style="display: flex; justify-content: space-between;"> 265544.78 </div> </div>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px;"> <div style="display: flex; justify-content: space-between;"> </div> <div style="display: flex; justify-content: space-between;"> 119.05 </div> </div>
(b) SUBTOTAL of Unitemized Independent Expenditures▶	<div style="border: 1px solid black; padding: 2px;"> <div style="display: flex; justify-content: space-between;"> </div> <div style="display: flex; justify-content: space-between;"> </div> </div>
(c) TOTAL Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px;"> <div style="display: flex; justify-content: space-between;"> </div> <div style="display: flex; justify-content: space-between;"> </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

M M M
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05
20
2014

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 206 OF 220
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) FREEDOMWORKS FOR AMERICA		FEC IDENTIFICATION NUMBER ▼ C 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 Freedomworks, Inc.		Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 04 / 30 / 2014	
Mailing Address 400 N Capitol St., NW Suite 735		Amount 5.49	
City Washington	State DC	Zip Code 20001	Transaction ID : SE.32488
Purpose of Expenditure IE-Shannon-Email/Social Media/Printing		Category/ Type 004	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 04 / 30 / 2014
Name of Federal Candidate T W SHANNON		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: OK
Calendar Year-To-Date Per Election for Office Sought 53.63		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee Chris Gallaher		Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 04 / 01 / 2014	
Mailing Address 118 Butteight Ct.		Amount 5000.00	
City Goodlettsville	State TN	Zip Code 87072	Transaction ID : SE.12036
Purpose of Expenditure IE-Bevin-Strategic Consulting		Category/ Type 001	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 04 / 01 / 2014
Name of Federal Candidate MATTHEW GRISWOLD BEVIN		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: KY
Calendar Year-To-Date Per Election for Office Sought 236551.93		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures.....▶		5005.49	
(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 R. Russ Walker		Date M M M / D D D / Y Y Y Y Y Y 05 / 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) FREEDOMWORKS FOR AMERICA			FEC IDENTIFICATION NUMBER ▼ C 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 Google, Inc.			Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 14 / 2014		
Mailing Address Department No. 33564 P.O. Box 39000			Amount 3000.00		
City San Francisco		State CA	Zip Code 94139		Transaction ID : SE.12140
Purpose of Expenditure IE-Cochran-Online Ads		Category/Type 004		Date of Disbursement or Obligation MM / DD / YYYY 04 / 14 / 2014	
Name of Federal Candidate THAD COCHRAN			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: <u>00</u> <input type="checkbox"/> President State: <u>MS</u>		
Calendar Year-To-Date Per Election for Office Sought 103326.33			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee Google, Inc.			Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 14 / 2014		
Mailing Address Department No. 33564 P.O. Box 39000			Amount 2500.00		
City San Francisco		State CA	Zip Code 94139		Transaction ID : SE.32439
Purpose of Expenditure IE-Tillis-Online Ads		Category/Type 004		Date of Disbursement or Obligation MM / DD / YYYY 04 / 14 / 2014	
Name of Federal Candidate THOM R TILLIS			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: <u>00</u> <input type="checkbox"/> President State: <u>NC</u>		
Calendar Year-To-Date Per Election for Office Sought 104797.72			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			5500.00		
(b) SUBTOTAL of Unitemized Independent Expenditures ▶					
(c) TOTAL Independent Expenditures..... ▶					
Under penalty of perjury I certify that the independent 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> <div style="text-align: right;">[Electronically Filed]</div>			Date MM / DD / YYYY 05 / 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) FREEDOMWORKS FOR AMERICA			FEC IDENTIFICATION NUMBER ▼ C 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 Google, Inc.			Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 21 / 2014		
Mailing Address Department No. 33564 P.O. Box 39000			Amount 2462.50		
City San Francisco		State CA	Zip Code 94139		
Purpose of Expenditure IE-Joyce-Online Ads		Category/ Type 004	Transaction ID : SE.26717 Date of Disbursement or Obligation MM / DD / YYYY 04 / 21 / 2014		
Name of Federal Candidate DAVID P JOYCE			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: 14 <input type="checkbox"/> President <input type="checkbox"/> Senate State: OH		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶		
11420.18					
Full Name of Payee Google, Inc.			Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 21 / 2014		
Mailing Address Department No. 33564 P.O. Box 39000			Amount 2462.50		
City San Francisco		State CA	Zip Code 94139		
Purpose of Expenditure IE-Lynch-Online Ads		Category/ Type 004	Transaction ID : SE.26719 Date of Disbursement or Obligation MM / DD / YYYY 04 / 21 / 2014		
Name of Federal Candidate MATT LYNCH			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: 14 <input type="checkbox"/> President <input type="checkbox"/> Senate State: OH		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶		
13882.68					
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			4925.00		
(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.					
Signature <u>R. Russ Walker</u>			Date MM / DD / YYYY 05 / 20 / 2014		
[Electronically Filed]					

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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NAME OF COMMITTEE (In Full) FREEDOMWORKS FOR AMERICA			FEC IDENTIFICATION NUMBER ▼ C 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 Google, Inc.			Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 21 / 2014		
Mailing Address Department No. 33564 P.O. Box 39000			Amount 2012.50		
City San Francisco	State CA	Zip Code 94139	Transaction ID : SE.26722		
Purpose of Expenditure IE-Lynch-Online Ads		Category/Type 004	Date of Disbursement or Obligation MM / DD / YYYY 04 / 21 / 2014		
Name of Federal Candidate MATT LYNCH		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 14 <input type="checkbox"/> President <input type="checkbox"/> Senate State: OH		
Calendar Year-To-Date Per Election for Office Sought 22895.18			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶		

Full Name of Payee Google, Inc.			Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 21 / 2014		
Mailing Address Department No. 33564 P.O. Box 39000			Amount 862.50		
City San Francisco	State CA	Zip Code 94139	Transaction ID : SE.26723		
Purpose of Expenditure IE-Joyce-Online Ads		Category/Type 004	Date of Disbursement or Obligation MM / DD / YYYY 04 / 21 / 2014		
Name of Federal Candidate DAVID P JOYCE		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 14 <input type="checkbox"/> President <input type="checkbox"/> Senate State: OH		
Calendar Year-To-Date Per Election for Office Sought 23757.68			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶		

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	2875.00
(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

Signature _____

[Electronically Filed]

Date

MM / DD / YYYY
05 / 20 / 2014

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 210 OF 220
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) FREEDOMWORKS FOR AMERICA			FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;">C 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 Google, Inc.			Date of Public Distribution/Dissemination <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>		
Mailing Address Department No. 33564 P.O. Box 39000			Amount <div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div>		
City State Zip Code San Francisco CA 94139		Transaction ID : SE.26860 Date of Disbursement or Obligation <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>			
Purpose of Expenditure IE-Sasse-Online Ads		Category/ Type <div style="border-bottom: 1px solid black; width: 40px;"></div>			
Name of Federal Candidate BENJAMIN E SASSE			Office Sought: <input checked="" type="checkbox"/> House District: <u>00</u> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>NE</u>		
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div>			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee Google, Inc.			Date of Public Distribution/Dissemination <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>		
Mailing Address Department No. 33564 P.O. Box 39000			Amount <div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div>		
City State Zip Code San Francisco CA 94139		Transaction ID : SE.26884 Date of Disbursement or Obligation <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>			
Purpose of Expenditure IE-Joyce-Online Ads		Category/ Type <div style="border-bottom: 1px solid black; width: 40px;"></div>			
Name of Federal Candidate DAVID P JOYCE			Office Sought: <input checked="" type="checkbox"/> House District: <u>14</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>OH</u>		
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div>			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			<div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div> 8166.00		
(b) SUBTOTAL of Unitemized Independent Expenditures ▶			<div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div>		
(c) TOTAL 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 <i>R. Russ Walker</i>			Date <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>		
			[Electronically Filed]		

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 211 OF 220
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) FREEDOMWORKS FOR AMERICA			FEC IDENTIFICATION NUMBER ▼ C 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 / D D / Y Y Y Y Y Y					
Full Name of Payee Google, Inc.			Date of Public Distribution/Dissemination 04 / 30 / 2014		
Mailing Address Department No. 33564 P.O. Box 39000			Amount 1500.00		
City San Francisco		State CA	Zip Code 94139		Transaction ID : SE.26885
Purpose of Expenditure IE-Lynch-Online Ads		Category/Type 004		Date of Disbursement or Obligation 04 / 30 / 2014	
Name of Federal Candidate MATT LYNCH			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: <u>14</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>OH</u>		
Calendar Year-To-Date Per Election for Office Sought 73055.95			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee Hyatt Regency-Louisville			Date of Public Distribution/Dissemination 04 / 03 / 2014		
Mailing Address 311 S. Fourth St.			Amount 2329.05		
City Louisville		State KY	Zip Code 40202		Transaction ID : SE.12069
Purpose of Expenditure IE-Bevin-Travel		Category/Type 002		Date of Disbursement or Obligation 04 / 03 / 2014	
Name of Federal Candidate MATTHEW GRISWOLD BEVIN			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: <u>00</u> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>KY</u>		
Calendar Year-To-Date Per Election for Office Sought 252195.71			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			3829.05		
(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> <div style="text-align: right;">[Electronically Filed]</div>			Date 05 / 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) FREEDOMWORKS FOR AMERICA			FEC IDENTIFICATION NUMBER ▼ C 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 Larimer & Sears			Date of Public Distribution/Dissemination 04 / 09 / 2014		
Mailing Address 570 Liberty St., SE Ste. 240			Amount 3500.00		
City Salem		State OR	Zip Code 97301		Transaction ID : SE.12078
Purpose of Expenditure IE-McConnell-Research		Category/ Type 001		Date of Disbursement or Obligation 04 / 09 / 2014	
Name of Federal Candidate MITCH MCCONNELL			<input type="checkbox"/> Support <input type="checkbox"/> Office Sought: <input type="checkbox"/> House District: <u>00</u> <input checked="" type="checkbox"/> Oppose <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>KY</u>		
Calendar Year-To-Date Per Election for Office Sought 261410.76			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee Larimer & Sears			Date of Public Distribution/Dissemination 04 / 09 / 2014		
Mailing Address 570 Liberty St., SE Ste. 240			Amount 3500.00		
City Salem		State OR	Zip Code 97301		Transaction ID : SE.12135
Purpose of Expenditure IE-Cochran-Research		Category/ Type 001		Date of Disbursement or Obligation 04 / 09 / 2014	
Name of Federal Candidate THAD COCHRAN			<input type="checkbox"/> Support <input type="checkbox"/> Office Sought: <input type="checkbox"/> House District: <u>00</u> <input checked="" type="checkbox"/> Oppose <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>MS</u>		
Calendar Year-To-Date Per Election for Office Sought 97237.69			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			7000.00		
(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.					
Signature <u>R. Russ Walker</u> <div style="text-align: right;">[Electronically Filed]</div>			Date 05 / 20 / 2014		

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) FREEDOMWORKS FOR AMERICA		FEC IDENTIFICATION NUMBER ▼ C 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 Mungo, LLC		Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 04 / 10 / 2014	
Mailing Address 625 Clay St E		Amount 511.00	
City Monmouth	State OR	Zip Code 97361	Transaction ID : SE.12136
Purpose of Expenditure IE-McDaniel-Bumper Stickers		Category/Type 004	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 04 / 10 / 2014
Name of Federal Candidate CHRISTOPHER BRIAN MCDANIEL		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: MS
Calendar Year-To-Date Per Election for Office Sought 97748.69		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee Mungo, LLC		Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 04 / 10 / 2014	
Mailing Address 625 Clay St E		Amount 486.00	
City Monmouth	State OR	Zip Code 97361	Transaction ID : SE.26753
Purpose of Expenditure IE-Smith-Bumper Stickers		Category/Type 004	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 04 / 10 / 2014
Name of Federal Candidate BRYAN SMITH		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 02 <input type="checkbox"/> President <input type="checkbox"/> Senate State: ID
Calendar Year-To-Date Per Election for Office Sought 18438.46		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures.....▶		997.00	
(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.			
Signature R. Russ Walker		Date M M M / D D D / Y Y Y Y Y Y 05 / 20 / 2014	
		[Electronically Filed]	

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ITEMIZED INDEPENDENT EXPENDITURESPAGE 214 OF 220
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) FREEDOMWORKS FOR AMERICA			FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;">C 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 M / D D D / Y Y Y Y Y Y</div>				
Full Name of Payee Mungo, LLC			Date of Public Distribution/Dissemination <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M M / D D D / Y Y Y Y Y Y</div> <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">04 / 10 / 2014</div>	
Mailing Address 625 Clay St E			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">358.00</div>	
City Monmouth		State OR	Zip Code 97361	
Purpose of Expenditure IE-Brannon-Bumper Stickers		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>		Transaction ID : SE.32423 Date of Disbursement or Obligation <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M M / D D D / Y Y Y Y Y Y</div> <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">04 / 10 / 2014</div>
Name of Federal Candidate GREGORY JOSEPH BRANNON			Office Sought: <input checked="" type="checkbox"/> House District: <u>00</u> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>NC</u> <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">99594.65</div>			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____	
Full Name of Payee News Distribution Network			Date of Public Distribution/Dissemination <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M M / D D D / Y Y Y Y Y Y</div> <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">04 / 21 / 2014</div>	
Mailing Address 3280 Peachtree Rd. NE Suite 2000			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">1350.00</div>	
City Atlanta		State GA	Zip Code 30305	
Purpose of Expenditure IE-Joyce-Online Ads		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>		Transaction ID : SE.26729 Date of Disbursement or Obligation <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M M / D D D / Y Y Y Y Y Y</div> <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">04 / 21 / 2014</div>
Name of Federal Candidate DAVID P JOYCE			Office Sought: <input checked="" type="checkbox"/> House District: <u>14</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>OH</u> <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">35807.68</div>			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____	
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			<div style="border: 1px solid black; padding: 2px; display: inline-block;">1708.00</div>	
(b) SUBTOTAL of Unitemized Independent Expenditures ▶			<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>	
(c) TOTAL Independent Expenditures..... ▶			<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Signature <i>R. Russ Walker</i>			Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M M / D D D / Y Y Y Y Y Y</div> <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">05 / 20 / 2014</div> <div style="text-align: center;">[Electronically Filed]</div>	

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) FREEDOMWORKS FOR AMERICA		FEC IDENTIFICATION NUMBER ▼ C 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 News Distribution Network		Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 04 / 21 / 2014	
Mailing Address 3280 Peachtree Rd. NE Suite 2000		Amount 3150.00	
City Atlanta	State GA	Zip Code 30305	Transaction ID : SE.26730
Purpose of Expenditure IE-Lynch-Online Ads		Category/ Type 004	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 04 / 21 / 2014
Name of Federal Candidate MATT LYNCH		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 14 <input type="checkbox"/> President <input type="checkbox"/> Senate State: OH
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee Odd Lamps, LLC		Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 04 / 21 / 2014	
Mailing Address 12076 92nd Ave N		Amount 750.00	
City Maple Grove	State MN	Zip Code 55369	Transaction ID : SE.26731
Purpose of Expenditure IE-Joyce-Online Ads		Category/ Type 004	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 04 / 21 / 2014
Name of Federal Candidate DAVID P JOYCE		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 14 <input type="checkbox"/> President <input type="checkbox"/> Senate State: OH
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶		3900.00	
(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.			
Signature <i>R. Russ Walker</i>		Date M M M / D D D / Y Y Y Y Y Y 05 / 20 / 2014	
		[Electronically Filed]	

SCHEDULE E (FEC Form 3X)
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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) FREEDOMWORKS FOR AMERICA		FEC IDENTIFICATION NUMBER ▼ C 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 Odd Lamps, LLC		Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 04 / 21 / 2014	
Mailing Address 12076 92nd Ave N		Amount 1750.00	
City Maple Grove	State MN	Zip Code 55369	Transaction ID : SE.26732
Purpose of Expenditure IE-Lynch-Online Ads		Category/Type 004	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 04 / 21 / 2014
Name of Federal Candidate MATT LYNCH		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 14 <input type="checkbox"/> President <input type="checkbox"/> Senate State: OH
Calendar Year-To-Date Per Election for Office Sought 41457.68		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee Odd Lamps, LLC		Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 04 / 24 / 2014	
Mailing Address 12076 92nd Ave N		Amount 333.33	
City Maple Grove	State MN	Zip Code 55369	Transaction ID : SE.26799
Purpose of Expenditure IE-Joyce-Online Ads		Category/Type 004	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 04 / 24 / 2014
Name of Federal Candidate DAVID P JOYCE		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 14 <input type="checkbox"/> President <input type="checkbox"/> Senate State: OH
Calendar Year-To-Date Per Election for Office Sought 67198.98		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures.....▶		2083.33	
(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 R. Russ Walker		Date M M M / D D D / Y Y Y Y Y Y 05 / 20 / 2014	
		[Electronically Filed]	

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ITEMIZED INDEPENDENT EXPENDITURES

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NAME OF COMMITTEE (In Full) FREEDOMWORKS FOR AMERICA			FEC IDENTIFICATION NUMBER ▼ C 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 Odd Lamps, LLC			Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 04 / 24 / 2014		
Mailing Address 12076 92nd Ave N			Amount 666.67		
City Maple Grove		State MN	Zip Code 55369		Transaction ID : SE.26800
Purpose of Expenditure IE-Lynch-Online Ads		Category/Type 004		Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 04 / 24 / 2014	
Name of Federal Candidate MATT LYNCH			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: <u>14</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>OH</u>		
Calendar Year-To-Date Per Election for Office Sought 67865.65			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee Panera Bread			Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 04 / 04 / 2014		
Mailing Address 601 S. Hurstbourne Pkwy			Amount 97.45		
City Louisville		State KY	Zip Code 40222		Transaction ID : SE.12080
Purpose of Expenditure IE-McConnell-Catering		Category/Type 004		Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 04 / 04 / 2014	
Name of Federal Candidate MITCH MCCONNELL			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: <u>00</u> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>KY</u>		
Calendar Year-To-Date Per Election for Office Sought 254532.76			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			764.12		
(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.					
Signature <u>R. Russ Walker</u>			Date M M M / D D D / Y Y Y Y Y Y 05 / 20 / 2014		

[Electronically Filed]

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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NAME OF COMMITTEE (In Full) FREEDOMWORKS FOR AMERICA			FEC IDENTIFICATION NUMBER ▼ C 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 Michelle Ray			Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 01 / 2014		
Mailing Address 8404 Cedar Grove			Amount 4000.00		
City Shephersville		State KY	Zip Code 40165		Transaction ID : SE.12040
Purpose of Expenditure IE-Bevin-Strategic Consulting		Category/Type 004		Date of Disbursement or Obligation MM / DD / YYYY 04 / 01 / 2014	
Name of Federal Candidate MATTHEW GRISWOLD BEVIN			Office Sought: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: KY		
Calendar Year-To-Date Per Election for Office Sought 244551.93			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee Texas GOP Store			Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 04 / 2014		
Mailing Address 404 I-45 South			Amount 1148.56		
City Hunsville		State TX	Zip Code 77340		Transaction ID : SE.12082
Purpose of Expenditure IE-Bevin-Bumper Stickers		Category/Type 004		Date of Disbursement or Obligation MM / DD / YYYY 04 / 04 / 2014	
Name of Federal Candidate MATTHEW GRISWOLD BEVIN			Office Sought: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: KY		
Calendar Year-To-Date Per Election for Office Sought 255681.32			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			5148.56		
(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 05 / 20 / 2014		

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ITEMIZED INDEPENDENT EXPENDITURESPAGE 219 OF 220
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) FREEDOMWORKS FOR AMERICA		FEC IDENTIFICATION NUMBER ▼ C 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 Topple Strategies		Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 22 / 2014	
Mailing Address 189 N. Hwy 89 Ste. C 130		Amount 9996.00	
City North Salt Lake	State UT	Zip Code 84054	Transaction ID : SE.26757
Purpose of Expenditure IE-Smith-Phone Calling		Category/Type 004	Date of Disbursement or Obligation MM / DD / YYYY 04 / 22 / 2014
Name of Federal Candidate BRYAN SMITH		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 02 <input type="checkbox"/> President <input type="checkbox"/> Senate State: ID
Calendar Year-To-Date Per Election for Office Sought 28521.93		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee Topple Strategies		Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 22 / 2014	
Mailing Address 189 N. Hwy 89 Ste. C 130		Amount 35003.00	
City North Salt Lake	State UT	Zip Code 84054	Transaction ID : SE.26770
Purpose of Expenditure IE-McDaniel-Phone Calling		Category/Type 004	Date of Disbursement or Obligation MM / DD / YYYY 04 / 22 / 2014
Name of Federal Candidate CHRISTOPHER BRIAN MCDANIEL		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: MS
Calendar Year-To-Date Per Election for Office Sought 139616.34		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures.....▶		44999.00	
(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.			
Signature R. Russ Walker		Date MM / DD / YYYY 05 / 20 / 2014	
		[Electronically Filed]	

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NAME OF COMMITTEE (In Full) FREEDOMWORKS FOR AMERICA		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C 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 Topple Strategies		Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 22 / 2014	
Mailing Address 189 N. Hwy 89 Ste. C 130		Amount 19992.00	
City North Salt Lake	State UT	Zip Code 84054	Transaction ID : SE.26787
Purpose of Expenditure IE-Brannon-Phone Calls	Category/Type 004	Date of Disbursement or Obligation MM / DD / YYYY 04 / 22 / 2014	
Name of Federal Candidate GREGORY JOSEPH BRANNON		<input checked="" type="checkbox"/> Support Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> Oppose <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NC	
Calendar Year-To-Date Per Election for Office Sought 125053.12		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee Topple Strategies		Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 22 / 2014	
Mailing Address 189 N. Hwy 89 Ste. C 130		Amount 25007.00	
City North Salt Lake	State UT	Zip Code 84054	Transaction ID : SE.26794
Purpose of Expenditure IE-Lynch-Phone Calling	Category/Type 004	Date of Disbursement or Obligation MM / DD / YYYY 04 / 22 / 2014	
Name of Federal Candidate MATT LYNCH		<input checked="" type="checkbox"/> Support Office Sought: <input checked="" type="checkbox"/> House District: 14 <input type="checkbox"/> Oppose <input type="checkbox"/> President <input type="checkbox"/> Senate State: OH	
Calendar Year-To-Date Per Election for Office Sought 66658.77		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	44999.00
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	238286.08

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
05 / 20 / 2014

Signature