SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full): Freedom Party State Committee

FEC IDENTIFICATION NUMBER: C 00300002

Check if: ☐ 24-hour notice ☐ 48-hour notice

Full Name (Last, First, Middle Initial) of Payee: Morning News

Mailing Address: 111 First Ave.

City: City State: ST Zip Code: 00000

Date: 08 / 22 / 2004

Amount: 2,500.00

Purpose of Expenditure: Newspaper Ad

Category/Type: 004

Office Sought: [X] House ☐ Senate ☐ President State: ST District: 4

Name of Federal Candidate Supported or Opposed by Expenditure: Bob Voteworthy

Check One: ☐ Support [X] Oppose

Calendar Year-To-Date Per Election for Office Sought: 3,700.00

Disbursement For: ☐ Primary [X] General ☐ Other (specify)

Full Name (Last, First, Middle Initial) of Payee:

Mailing Address:

City: State: Zip Code:

Date: / /

Amount:

Purpose of Expenditure:

Category/Type:

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

Name of Federal Candidate Supported or Opposed by Expenditure:

Check One: ☐ Support ☐ Oppose

Calendar Year-To-Date Per Election for Office Sought:

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

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

(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

Date / /