24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

SCHEDULE E)	PAGE 1 OF 1 FOR SE OF FORM 24/48
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼
Senate Conservatives Fund	C C00448696
Check If 24-hour report	
Full Name (Last, First, Middle Initial) of Payee Senate Conservatives Fund)
Seriale Conservatives Fund	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address PO Box 388	
City State Zip Code	
Alexandria VA 22313-5404	329.70
Purpose of Expenditure Category/ Office Sou	saction ID : E4B846F3198AD4849BFF Ight: House State: KS
IE-Wolf-Online Processing Type	Senate District:
Name of Federal Candidate Supported or Opposed by Expenditure:	President
Milton Wolf Check On	e: Support Oppose
	ent For: Primary General
for Office Sought 329.70	Other (specify)
Full Name (Last, First, Middle Initial) of Payee)
ASG Marketing	01 07 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 2020 Pennsylvania Ave NW	01 07 2014
Amo	punt
City State Zip Code Washington DC 20006-1811	10403.00
Trans	saction ID : EEFF548146F164BCB8B0
Purpose of Expenditure Category/ IE-Wolf-Email List Rental Type Office Sou	House State: KS Senate District:
Name of Federal Candidate Supported or Opposed by Expenditure:	President ———
Milton Wolf Check On	e: X Support Oppose
Calendar Year-To-Date Per Election Disbursem	nent For: Primary General
10732 70 2014	Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	10732.70
	7 7 7
(b) SUBTOTAL of Unitemized Independent Expenditures	
	7 7 7
(c) TOTAL Independent Expenditures	10732.70
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.	
Paul Kilgore	/ D D / Y Y Y
[Electronically Filed] Date 01	07 2014
Oignature ————————————————————————————————————	