

**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

THE CONSERVATIVE STRIKEFORCE

ADDRESS (number and street) ▼

2776 S ARLINGTON MILL DRIVE

806

☐ Check if different than previously reported. (ACC)

ARLINGTON

VA

22206

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00457291

3. IS THIS
REPORT☒NEW
(N)

OR

☐AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15
Quarterly Report (Q1)☒ July 15
Quarterly Report (Q2)☐ October 15
Quarterly Report (Q3)☐ January 31
Year-End Report (YE)☐ July 31 Mid-Year
Report (Non-election
Year Only) (MY)☐ Termination Report
(TER)(b) Monthly
Report
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)
(Non-Election
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)
(Non-Election
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

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

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the
State of

(d) 30-Day

POST-Election

Report for the:

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

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the
State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y Y

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

Type or Print Name of Treasurer SCOTT B MACKENZIE

Signature of Treasurer

SCOTT B MACKENZIE

[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

THE CONSERVATIVE STRIKEFORCE

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y
04 / 01 / 2016 To: M M / D D / Y Y Y Y Y Y
06 / 30 / 2016

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y Y 2016		2168.18
(b) Cash on Hand at Beginning of Reporting Period.....	1448.08	
(c) Total Receipts (from Line 19)	126292.99	254738.70
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	127741.07	256906.88
7. Total Disbursements (from Line 31)	120507.89	249673.70
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	7233.18	7233.18
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)	100.00	



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

THE CONSERVATIVE STRIKEFORCE

Report Covering the Period:

From:

M M / D D / Y Y Y Y Y
04 / 01 / 2016

To:

M M / D D / Y Y Y Y Y
06 / 30 / 2016
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).....

23500.00

31565.00

(ii) Unitemized

102792.99

222673.70

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ►

126292.99

254238.70

(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) ►

126292.99

254238.70

12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

13. All Loans Received

0.00

500.00

14. Loan Repayments Received.....

0.00

0.00

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

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

0.00

0.00

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))..... ►

126292.99

254738.70

20. Total Federal Receipts

(subtract Line 18(c) from Line 19) ►

126292.99

254738.70

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	58018.23	179934.04
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	58018.23	179934.04
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	350.00	350.00
24. Independent Expenditures (use Schedule E)	61739.66	61739.66
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	400.00	400.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	250.00
(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	250.00
29. Other Disbursements	0.00	7000.00
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)) ..	120507.89	249673.70
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	120507.89	249673.70

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)	126292.99	254238.70
34. Total Contribution Refunds (from Line 28(d))	0.00	250.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	126292.99	253988.70
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ►	58018.23	179934.04
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ►	58018.23	179934.04

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

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

FOR LINE NUMBER:
(check only one)

PAGE 6 OF 97

☒ 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)

THE CONSERVATIVE STRIKEFORCE

Full Name (Last, First, Middle Initial)

A. CHARLOTTE ABELL 341

Mailing Address 3789 RUM ROW

City

NAPLES

State

FL

Zip Code

34102

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

04 / 29 / 2016

Transaction ID : SA11AI.8891

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. JOHN N ALBRITTON 361

Mailing Address 3113 JAMESTOWN DRIVE

City

MONTGOMERY

State

AL

Zip Code

36111

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

05 / 11 / 2016

Transaction ID : SA11AI.8919

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. CORBIN BALL 711

Mailing Address 17 TEALWOOD

City

SCHRIEVEPORT

State

LA

Zip Code

71104

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

275.00

Date of Receipt

05 / 12 / 2016

Transaction ID : SA11AI.9046

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

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

650.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse 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)

THE CONSERVATIVE STRIKEFORCE

Full Name (Last, First, Middle Initial)

A. CORBIN BALL 711

Mailing Address 17 TEALWOOD

City

SCHRIEVEPORT

State

LA

Zip Code

71104

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
05		18		2016

Transaction ID : SA11AI.9047

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. CORBIN BALL 711

Mailing Address 17 TEALWOOD

City

SCHRIEVEPORT

State

LA

Zip Code

71104

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
05		27		2016

Transaction ID : SA11AI.9048

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. CORBIN BALL 711

Mailing Address 17 TEALWOOD

City

SCHRIEVEPORT

State

LA

Zip Code

71104

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

475.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		27		2016

Transaction ID : SA11AI.9049

Amount of Each Receipt this Period

50.00

☐ Memo Item**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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 OF 97

(check only one)

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

THE CONSERVATIVE STRIKEFORCE

Full Name (Last, First, Middle Initial)

A. WALTER M BENNETT 287

Mailing Address 251 BENNETT COVE RD

City State Zip Code
 GREEN MOUNTAIN NC 28740

FEC ID number of contributing federal political committee.

C

Name of Employer

BAXTER HEALTH CARE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 / 08 / 2016

Transaction ID : SA11AI.9155

Amount of Each Receipt this Period

150.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ROBERT BERGH 548

Mailing Address 15002 W NELSON LAKE RD

City State Zip Code
 HAYWARD WI 54843

FEC ID number of contributing federal political committee.

C

Name of Employer

KATIE ADAMS DDS PC

Occupation

PRACTICE ADMINISTRATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 05 / 15 / 2016

Transaction ID : SA11AI.9165

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. YVONNE BERRY 112

Mailing Address 1019 VAN SICLEN AVE APT 5J

City State Zip Code
 BROOKLYN NY 11207

FEC ID number of contributing federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 06 / 12 / 2016

Transaction ID : SA11AI.9172

Amount of Each Receipt this Period

175.00

☐ Memo Item

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
Detailed Summary Page

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(check only one)

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NAME OF COMMITTEE (In Full)

THE CONSERVATIVE STRIKEFORCE

Full Name (Last, First, Middle Initial)

A. VERA BIERY 474

Mailing Address 303 MADELINE AVE

City State Zip Code
BLOOMFIELD IN 47424

FEC ID number of contributing
federal political committee.

C

Name of Employer

COMPREHENSIVE PHARMACY SVS

Occupation

PHARMACIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 03 / 2016

Transaction ID : SA11AI.9184

Amount of Each Receipt this Period

40.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. VERA BIERY 474

Mailing Address 303 MADELINE AVE

City State Zip Code
BLOOMFIELD IN 47424

FEC ID number of contributing
federal political committee.

C

Name of Employer

COMPREHENSIVE PHARMACY SVS

Occupation

PHARMACIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 24 / 2016

Transaction ID : SA11AI.9185

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. FREDERICK BRYAN 452

Mailing Address 8980 INDIAN RIDGE LN

City State Zip Code
CINCINNATI OH 45243

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 27 / 2016

Transaction ID : SA11AI.9407

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

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

320.00

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 10 OF 97

(check only one)

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

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NAME OF COMMITTEE (In Full)

THE CONSERVATIVE STRIKEFORCE

Full Name (Last, First, Middle Initial)

A. THOMAS CAMERON 299

Mailing Address 25 S OAK FOREST DRIVE

City State Zip Code
 OKATIE SC 29909

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

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 / 01 / 2016

Transaction ID : SA11AI.9466

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MARGARET CANAVAN 921

Mailing Address 17531 DEVEREUX RD

City State Zip Code
 SAN DIEGO CA 92128

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 05 / 18 / 2016

Transaction ID : SA11AI.9482

Amount of Each Receipt this Period

150.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. LINDA S CASSABAUM 500

Mailing Address 1416 SW SUNRISE LN

City State Zip Code
 ANKENY IA 50023

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF EMPLOYED

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 Y
 04 / 24 / 2016

Transaction ID : SA11AI.9529

Amount of Each Receipt this Period

500.00

☐ Memo Item

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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FOR LINE NUMBER: PAGE 11 OF 97

(check only one)

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

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NAME OF COMMITTEE (In Full)

THE CONSERVATIVE STRIKEFORCE

Full Name (Last, First, Middle Initial)

A. RUTH CHAMBERS 752

Mailing Address 7010 WILDGROVE AVE

City State Zip Code
DALLAS TX 75214

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 23 / 2016

Transaction ID : SA11AI.9549

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. HARRY B CHATFIELD 300

Mailing Address 1645 LAKES PKWY SUITE E

City State Zip Code
LAWRENCEVILLE GA 30043

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

NONE

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 Y
06 / 01 / 2016

Transaction ID : SA11AI.9564

Amount of Each Receipt this Period

125.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. FRED Y CHEN 911

Mailing Address 800 CANTERBURY RD

City State Zip Code
SAN MARINO CA 91108

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

NONE

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
06 / 22 / 2016

Transaction ID : SA11AI.9570

Amount of Each Receipt this Period

125.00

☐ Memo Item

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: PAGE 12 OF 97

(check only one)

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

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NAME OF COMMITTEE (In Full)

THE CONSERVATIVE STRIKEFORCE

Full Name (Last, First, Middle Initial)

A. MACIE M CLAPP 750

Mailing Address 2118 ANTIBES DRIVE

City State Zip Code
 CARROLLTON TX 75006

FEC ID number of contributing federal political committee.

C

Name of Employer

NONE

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
 05 / 12 / 2016

Transaction ID : SA11AI.9594

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MACIE M CLAPP 750

Mailing Address 2118 ANTIBES DRIVE

City State Zip Code
 CARROLLTON TX 75006

FEC ID number of contributing federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y Y
 05 / 26 / 2016

Transaction ID : SA11AI.9595

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. EDWARD CLARKE 068

Mailing Address 50 LEDGE RD

City State Zip Code
 DARIEN CT 06820

FEC ID number of contributing federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
 05 / 16 / 2016

Transaction ID : SA11AI.9609

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

200.00

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: PAGE 13 OF 97

(check only one)

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

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NAME OF COMMITTEE (In Full)

THE CONSERVATIVE STRIKEFORCE

Full Name (Last, First, Middle Initial)

A. BARBARA A CLIFFORD 799

Mailing Address 9213 WH BURGESS DR

City

EL PASO

State

TX

Zip Code

79925

FEC ID number of contributing
federal political committee.

C

Name of Employer

FRONT POCKET WALLET, INC

Occupation

OWNER

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 24 / 2016

Transaction ID : SA11AI.9617

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. BARBARA A CLIFFORD 799

Mailing Address 9213 WH BURGESS DR

City

EL PASO

State

TX

Zip Code

79925

FEC ID number of contributing
federal political committee.

C

Name of Employer

FRONT POCKET WALLET, INC

Occupation

OWNER

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

295.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 03 / 2016

Transaction ID : SA11AI.9618

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. KATHLEEN B COLSMAN 857

Mailing Address 5044 N CRESTRIDGE DR

City

TUCSON

State

AZ

Zip Code

85718

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

ATTORNEY

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 23 / 2016

Transaction ID : SA11AI.9645

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

200.00

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: PAGE 14 OF 97

(check only one)

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

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NAME OF COMMITTEE (In Full)

THE CONSERVATIVE STRIKEFORCE

Full Name (Last, First, Middle Initial)

A. KATHLEEN B COLSMAN 857

Mailing Address 5044 N CRESTRIDGE DR

City State Zip Code
TUCSON AZ 85718

FEC ID number of contributing federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

ATTORNEY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 04 / 2016

Transaction ID : SA11AI.9646

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. KATHLEEN B COLSMAN 857

Mailing Address 5044 N CRESTRIDGE DR

City State Zip Code
TUCSON AZ 85718

FEC ID number of contributing federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

ATTORNEY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 24 / 2016

Transaction ID : SA11AI.9647

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. LINNIE DODGE 722

Mailing Address 14300 CHENAL PKWY

City State Zip Code
LITTLE ROCK AR 72211

FEC ID number of contributing federal political committee.

C

Name of Employer

NONE

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
05 / 12 / 2016

Transaction ID : SA11AI.9883

Amount of Each Receipt this Period

350.00

☐ Memo Item

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: PAGE 15 OF 97

(check only one)

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

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NAME OF COMMITTEE (In Full)

THE CONSERVATIVE STRIKEFORCE

Full Name (Last, First, Middle Initial)

A. LINNIE DODGE 722

Mailing Address 14300 CHENAL PKWY

City State Zip Code
 LITTLE ROCK AR 72211

FEC ID number of contributing federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 05 / 16 / 2016

Transaction ID : SA11AI.9884

Amount of Each Receipt this Period

400.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. LINNIE DODGE 722

Mailing Address 14300 CHENAL PKWY

City State Zip Code
 LITTLE ROCK AR 72211

FEC ID number of contributing federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1150.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 05 / 19 / 2016

Transaction ID : SA11AI.9885

Amount of Each Receipt this Period

400.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. LINNIE DODGE 722

Mailing Address 14300 CHENAL PKWY

City State Zip Code
 LITTLE ROCK AR 72211

FEC ID number of contributing federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 05 / 25 / 2016

Transaction ID : SA11AI.9886

Amount of Each Receipt this Period

200.00

☐ Memo Item

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
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 OF 97

(check only one)

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

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NAME OF COMMITTEE (In Full)

THE CONSERVATIVE STRIKEFORCE

Full Name (Last, First, Middle Initial)

A. LINNIE DODGE 722

Mailing Address 14300 CHENAL PKWY

City State Zip Code
 LITTLE ROCK AR 72211

FEC ID number of contributing federal political committee.

C

Name of Employer

NONE

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 Y
 06 / 02 / 2016

Transaction ID : SA11AI.9887

Amount of Each Receipt this Period

150.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. LINNIE DODGE 722

Mailing Address 14300 CHENAL PKWY

City State Zip Code
 LITTLE ROCK AR 72211

FEC ID number of contributing federal political committee.

C

Name of Employer

NONE

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 Y
 06 / 24 / 2016

Transaction ID : SA11AI.9890

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. ROSANNE C DONOVAN 850

Mailing Address 520 W CLARENDON AVE UNIT C2

City State Zip Code
 PHOENIX AZ 85013

FEC ID number of contributing federal political committee.

C

Name of Employer

NONE

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 / 04 / 2016

Transaction ID : SA11AI.9906

Amount of Each Receipt this Period

100.00

☐ Memo Item

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)
 for each category of the
 Detailed Summary Page

FOR LINE NUMBER: PAGE 17 OF 97

(check only one)

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

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NAME OF COMMITTEE (In Full)

THE CONSERVATIVE STRIKEFORCE

Full Name (Last, First, Middle Initial)

A. ROSANNE C DONOVAN 850

Mailing Address 520 W CLARENDON AVE UNIT C2

City	State	Zip Code
PHOENIX	AZ	85013

FEC ID number of contributing federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

405.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	29	/	2016

Transaction ID : SA11AI.9907

Amount of Each Receipt this Period

55.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. VERITA V DRISKELL 324

Mailing Address 17545 FRONT BEACH RD UNIT 2104

City	State	Zip Code
PANAMA CITY BEACH	FL	32413

FEC ID number of contributing federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	24	/	2016

Transaction ID : SA11AI.9948

Amount of Each Receipt this Period

350.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. JOAN ECKLER 144

Mailing Address 14 E MAIN ST

City	State	Zip Code
BLOOMFIELD	NY	14469

FEC ID number of contributing federal political committee.

C

Name of Employer

GREATER LAKES MENTAL HEALTHCARE

Occupation

MENTAL HEALTH COUNSELOR

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
05	/	16	/	2016

Transaction ID : SA11AI.10001

Amount of Each Receipt this Period

65.00

☐ Memo Item

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

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

470.00

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 97

(check only one)

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

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NAME OF COMMITTEE (In Full)

THE CONSERVATIVE STRIKEFORCE

Full Name (Last, First, Middle Initial)

A. JOAN ECKLER 144

Mailing Address 14 E MAIN ST

City State Zip Code
 BLOOMFIELD NY 14469

FEC ID number of contributing
federal political committee.

C

Name of Employer

GREATER LAKES MENTAL HEALTHCARE

Occupation

MENTAL HEALTH COUNSELOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 05 / 20 / 2016

Transaction ID : SA11AI.10002

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. JOAN ECKLER 144

Mailing Address 14 E MAIN ST

City State Zip Code
 BLOOMFIELD NY 14469

FEC ID number of contributing
federal political committee.

C

Name of Employer

GREATER LAKES MENTAL HEALTHCARE

Occupation

MENTAL HEALTH COUNSELOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 05 / 26 / 2016

Transaction ID : SA11AI.10003

Amount of Each Receipt this Period

40.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. JOAN ECKLER 144

Mailing Address 14 E MAIN ST

City State Zip Code
 BLOOMFIELD NY 14469

FEC ID number of contributing
federal political committee.

C

Name of Employer

GREATER LAKES MENTAL HEALTHCARE

Occupation

MENTAL HEALTH COUNSELOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 06 / 24 / 2016

Transaction ID : SA11AI.10005

Amount of Each Receipt this Period

45.00

☐ Memo Item

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

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

135.00

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

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

FOR LINE NUMBER: PAGE 19 OF 97

(check only one)

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

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NAME OF COMMITTEE (In Full)

THE CONSERVATIVE STRIKEFORCE

Full Name (Last, First, Middle Initial)

A. JOAN ECKLER 144

Mailing Address 14 E MAIN ST

City State Zip Code
 BLOOMFIELD NY 14469

FEC ID number of contributing
federal political committee.

C

Name of Employer

GREATER LAKES MENTAL HEALTHCARE

Occupation

MENTAL HEALTH COUNSELOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

430.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 06 / 25 / 2016

Transaction ID : SA11AI.10006

Amount of Each Receipt this Period

55.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. JOAN M ECKLER 144

Mailing Address 14 E MAIN ST

City State Zip Code
 BLOOMFIELD NY 14469

FEC ID number of contributing
federal political committee.

C

Name of Employer

LOCKHEED MARTIN

Occupation

ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 06 / 02 / 2016

Transaction ID : SA11AI.10004

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. JAMES EDWARDS 361

Mailing Address 3502 BANKHEAD AVE

City State Zip Code
 MONTGOMERY AL 36111

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

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 / 05 / 2016

Transaction ID : SA11AI.10023

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

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

580.00

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 20 OF 97

(check only one)

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

THE CONSERVATIVE STRIKEFORCE

Full Name (Last, First, Middle Initial)

A. ROBERT FAILMEZGER 130

Mailing Address 105 CAMMOT LN

City

FAYETTEVILLE

State

NY

Zip Code

13066

FEC ID number of contributing
federal political committee.

C

Name of Employer

MECHANIC

Occupation

SELF EMPLOYED

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 04 / 2016

Transaction ID : SA11Al.10129

Amount of Each Receipt this Period

200.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. RAYMOND N FINK 488

Mailing Address PO BOX 134

City

WILLIAMSTON

State

MI

Zip Code

48895

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

PHARMACIST

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

685.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 03 / 2016

Transaction ID : SA11Al.10170

Amount of Each Receipt this Period

55.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. RAYMOND N FINK 488

Mailing Address PO BOX 134

City

WILLIAMSTON

State

MI

Zip Code

48895

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

PHARMACIST

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

785.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 07 / 2016

Transaction ID : SA11Al.10171

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

355.00

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 21 OF 97

(check only one)

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

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NAME OF COMMITTEE (In Full)

THE CONSERVATIVE STRIKEFORCE

Full Name (Last, First, Middle Initial)

A. RAYMOND N FINK 488

Mailing Address PO BOX 134

City

WILLIAMSTON

State

MI

Zip Code

48895

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

PHARMACIST

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

835.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 01 / 2016

Transaction ID : SA11Al.10172

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. RAYMOND N FINK 488

Mailing Address PO BOX 134

City

WILLIAMSTON

State

MI

Zip Code

48895

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

PHARMACIST

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

910.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 18 / 2016

Transaction ID : SA11Al.10174

Amount of Each Receipt this Period

75.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. RAYMOND N FINK 488

Mailing Address PO BOX 134

City

WILLIAMSTON

State

MI

Zip Code

48895

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

PHARMACIST

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

970.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 19 / 2016

Transaction ID : SA11Al.10175

Amount of Each Receipt this Period

60.00

☐ Memo Item

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

185.00

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 22 OF 97

(check only one)

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

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NAME OF COMMITTEE (In Full)

THE CONSERVATIVE STRIKEFORCE

Full Name (Last, First, Middle Initial)

A. RAYMOND N FINK 488

Mailing Address PO BOX 134

City

WILLIAMSTON

State

MI

Zip Code

48895

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

PHARMACIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1070.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 20 / 2016

Transaction ID : SA11Al.10176

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. RAYMOND N FINK 488

Mailing Address PO BOX 134

City

WILLIAMSTON

State

MI

Zip Code

48895

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

PHARMACIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1120.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 04 / 2016

Transaction ID : SA11Al.10177

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. LINDA R FOSTER 488

Mailing Address 3185 W GARRISON RD

City

OWOSSO

State

MI

Zip Code

48867

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 15 / 2016

Transaction ID : SA11Al.10229

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

FOR LINE NUMBER: PAGE 23 OF 97

(check only one)

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

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NAME OF COMMITTEE (In Full)

THE CONSERVATIVE STRIKEFORCE

Full Name (Last, First, Middle Initial)

A. CLEONE FOSTER 553

Mailing Address 2275 LAKE LUCY RD

City State Zip Code
 CHANHASSEN MN 55317

FEC ID number of contributing federal political committee.

C

Name of Employer

NONE

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 Y
 06 / 04 / 2016

Transaction ID : SA11AI.10232

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. PERRY C GAME 221

Mailing Address 3493 AVIARY WAY

City State Zip Code
 WOODBRIDGE VA 22192

FEC ID number of contributing federal political committee.

C

Name of Employer

NONE

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 / 10 / 2016

Transaction ID : SA11AI.10300

Amount of Each Receipt this Period

200.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. BETTY GARDNER 648

Mailing Address 1572 GOODIN HOLLOW ROAD

City State Zip Code
 NOEL MO 64854

FEC ID number of contributing federal political committee.

C

Name of Employer

NONE

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 Y
 05 / 16 / 2016

Transaction ID : SA11AI.10317

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

260.00

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

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

PAGE 24 OF 97

<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)

THE CONSERVATIVE STRIKEFORCE

Full Name (Last, First, Middle Initial)

A. ELEANOR C GEBHARDT 117

Mailing Address 34 WHALERS COVE

City

BABYLON

State

NY

Zip Code

11702

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5		3	1		2	0	1	6		

Transaction ID : SA11Al.10360

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. CARLES GIBSON 797

Mailing Address PO BOX 7906

City

MIDLAND

State

TX

Zip Code

79708

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

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
0	5		2	8		2	0	1	6		

Transaction ID : SA11Al.10392

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. PATTY P GILBERT 711

Mailing Address 4750 GEORGE RD

City

SHREVEPORT

State

LA

Zip Code

71107

FEC ID number of contributing
federal political committee.

C

Name of Employer

ADVANCED METALS TECHNOLOGY INC

Occupation

PRESIDENT

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
0	6		2	5		2	0	1	6		

Transaction ID : SA11Al.10398

Amount of Each Receipt this Period

500.00

☐ Memo Item**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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 25 OF 97

(check only one)

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

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NAME OF COMMITTEE (In Full)

THE CONSERVATIVE STRIKEFORCE

Full Name (Last, First, Middle Initial)

A. NEVA W GREENE 318

Mailing Address 2828 GA HIGHWAY 271

City State Zip Code
 ELLAVILLE GA 31806

FEC ID number of contributing federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

REGISTERED NURSE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 05 / 20 / 2016

Transaction ID : SA11AI.10509

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. NEVA W GREENE 318

Mailing Address 2828 GA HIGHWAY 271

City State Zip Code
 ELLAVILLE GA 31806

FEC ID number of contributing federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

REGISTERED NURSE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 05 / 25 / 2016

Transaction ID : SA11AI.10510

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. KENNETH GROSSE 189

Mailing Address 376 INDIAN CREEK RD

City State Zip Code
 TELFORD PA 18969

FEC ID number of contributing federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

MANAGEMENT CONSULTANT

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
 06 / 25 / 2016

Transaction ID : SA11AI.10552

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

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

600.00

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

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

FOR LINE NUMBER: PAGE 26 OF 97

(check only one)

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

THE CONSERVATIVE STRIKEFORCE

Full Name (Last, First, Middle Initial)

A. FRANK S GUARISCO 703

Mailing Address PO BOX 579

City
PATTERSON

State Zip Code
LA 70392

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

FISHING

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 27 / 2016

Transaction ID : SA11Al.10557

Amount of Each Receipt this Period

125.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. CONSTANCE HACKBARTH 530

Mailing Address PO BOX 327

City
ALLENTON

State Zip Code
WI 53002

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 23 / 2016

Transaction ID : SA11Al.10575

Amount of Each Receipt this Period

400.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. CHAD HAHN 781

Mailing Address 5183 N HWY 119

City
YORKTOWN

State Zip Code
TX 78164

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

AG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 18 / 2016

Transaction ID : SA11Al.10586

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

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

775.00

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

Use separate schedule(s)
for each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

THE CONSERVATIVE STRIKEFORCE

Full Name (Last, First, Middle Initial)

A. STEFANO A HANKEWYCZ 113

Mailing Address 3209 BELL BLVD

City
BAYSIDE

State Zip Code
NY 11361

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

06 / 27 / 2016

Transaction ID : SA11Al.10625

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. VIRGINIA B HARDAM 996

Mailing Address PO BOX 2046

City
PALMER

State Zip Code
AK 99645

FEC ID number of contributing
federal political committee.

C

Name of Employer

VPSI

Occupation

IT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

04 / 07 / 2016

Transaction ID : SA11Al.10648

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. VIRGINIA B HARDAM 996

Mailing Address PO BOX 2046

City
PALMER

State Zip Code
AK 99645

FEC ID number of contributing
federal political committee.

C

Name of Employer

VPSI

Occupation

IT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

430.00

Date of Receipt

05 / 23 / 2016

Transaction ID : SA11Al.10649

Amount of Each Receipt this Period

30.00

☐ Memo Item

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

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

630.00

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

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

FOR LINE NUMBER: PAGE 28 OF 97

(check only one)

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

THE CONSERVATIVE STRIKEFORCE

Full Name (Last, First, Middle Initial)

A. KAREN L HAVEY 446

Mailing Address PO BOX 188

City

TUSCARAWAS

State

OH

Zip Code

44682

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 23 / 2016

Transaction ID : SA11Al.10699

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. CHARLOTTE HAYNIE 770

Mailing Address 1222 RIPPLE CREEK DR

City

HOUSTON

State

TX

Zip Code

77057

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

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 Y
04 / 07 / 2016

Transaction ID : SA11Al.10713

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. PATRICIA HIATT 469

Mailing Address 4512 S 500 E

City

KOKOMO

State

IN

Zip Code

46902

FEC ID number of contributing
federal political committee.

C

Name of Employer

DETECTION DOGS INC

Occupation

PRESIDENT

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 25 / 2016

Transaction ID : SA11Al.10780

Amount of Each Receipt this Period

150.00

☐ Memo Item

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

250.00

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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(check only one)

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

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NAME OF COMMITTEE (In Full)

THE CONSERVATIVE STRIKEFORCE

Full Name (Last, First, Middle Initial)

A. CAPT TATNALL HILLMAN 816

Mailing Address 504 W BLEEKER ST

City

ASPEN

State

CO

Zip Code

81611

FEC ID number of contributing
federal political committee.

C

Name of Employer

US NAVY

Occupation

RETIRED

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 / 08 / 2016

Transaction ID : SA11Al.10810

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. CAPT TATNALL HILLMAN 816

Mailing Address 504 W BLEEKER ST

City

ASPEN

State

CO

Zip Code

81611

FEC ID number of contributing
federal political committee.

C

Name of Employer

US NAVY

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 / 12 / 2016

Transaction ID : SA11Al.10811

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. CAPT TATNALL HILLMAN 816

Mailing Address 504 W BLEEKER ST

City

ASPEN

State

CO

Zip Code

81611

FEC ID number of contributing
federal political committee.

C

Name of Employer

US NAVY

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
 05 / 08 / 2016

Transaction ID : SA11Al.10812

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

1500.00

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)

THE CONSERVATIVE STRIKEFORCE

Full Name (Last, First, Middle Initial)

A. CAPT TATNALL HILLMAN 816

Mailing Address 504 W BLEEKER ST

City
ASPEN

State Zip Code
CO 81611

FEC ID number of contributing
federal political committee.

C

Name of Employer

US NAVY

Occupation

RETIRED

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
05 / 12 / 2016

Transaction ID : SA11Al.10813

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. CAPT TATNALL HILLMAN 816

Mailing Address 504 W BLEEKER ST

City
ASPEN

State Zip Code
CO 81611

FEC ID number of contributing
federal political committee.

C

Name of Employer

US NAVY

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 08 / 2016

Transaction ID : SA11Al.10814

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. CAPT TATNALL HILLMAN 816

Mailing Address 504 W BLEEKER ST

City
ASPEN

State Zip Code
CO 81611

FEC ID number of contributing
federal political committee.

C

Name of Employer

US NAVY

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 12 / 2016

Transaction ID : SA11Al.10815

Amount of Each Receipt this Period

500.00

☐ Memo Item

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
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)

THE CONSERVATIVE STRIKEFORCE

Full Name (Last, First, Middle Initial)

A. DONALD HINES 857

Mailing Address 8172 E GALINDA DR

City
TUCSON

State Zip Code
AZ 85750

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

SALES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 23 / 2016

Transaction ID : SA11AI.10828

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ERNEST HOUSEMAN 328 JR

Mailing Address 1709 ANTIGUA DR

City
ORLANDO

State Zip Code
FL 32806

FEC ID number of contributing
federal political committee.

C

Name of Employer

CRAIG HALLUM

Occupation

ANALYST

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 / 03 / 2016

Transaction ID : SA11AI.10924

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MARY HUMMELER 190

Mailing Address 1745 MONTGOMERY AVENUE

City
VILLANOVA

State Zip Code
PA 19085

FEC ID number of contributing
federal political committee.

C

Name of Employer

REMCON PLASTICS INC

Occupation

MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 01 / 2016

Transaction ID : SA11AI.10968

Amount of Each Receipt this Period

125.00

☐ Memo Item

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

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

475.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse 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)

THE CONSERVATIVE STRIKEFORCE

Full Name (Last, First, Middle Initial)

A. MIKE H JENKINS 714

Mailing Address PO BOX 343

City
GRAYSONState
LAZip Code
71435FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

FARMER

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04	/	05	/	2016

Transaction ID : SA11Al.11041

Amount of Each Receipt this Period

200.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. RALPH JENNICHES 906

Mailing Address 5388 VISTA FORTUNA

City
CYPRESSState
CAZip Code
90630FEC ID number of contributing
federal political committee.

C

Name of Employer

DEFENSE LOGISTICS AGENCY

Occupation

PROJECT MANAGER

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06	/	27	/	2016

Transaction ID : SA11Al.11047

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. GALEN JOKIPII 857

Mailing Address 4225 N 1ST AVE

City
TUCSONState
AZZip Code
85719FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06	/	01	/	2016

Transaction ID : SA11Al.11098

Amount of Each Receipt this Period

300.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

535.00

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)

THE CONSERVATIVE STRIKEFORCE

Full Name (Last, First, Middle Initial)

A. GALEN JOKIPII 857

Mailing Address 4225 N 1ST AVE

City
TUCSON

State Zip Code
AZ 85719

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

625.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 23 / 2016

Transaction ID : SA11AI.11101

Amount of Each Receipt this Period

275.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. GALEN JOKIPII 857

Mailing Address 4225 N 1ST AVE

City
TUCSON

State Zip Code
AZ 85719

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

725.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 27 / 2016

Transaction ID : SA11AI.11102

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. PEGGY JONES 940

Mailing Address 862 CHILTERN RD

City
HILLSBOROUGH

State Zip Code
CA 94010

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

335.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 30 / 2016

Transaction ID : SA11AI.11124

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

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

475.00

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)

THE CONSERVATIVE STRIKEFORCE

Full Name (Last, First, Middle Initial)

A. MARY KELSEY 833

Mailing Address 302 DIAMOND DR

City

KIMBERLY

State

ID

Zip Code

83341

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 02 / 2016

Transaction ID : SA11AI.11177

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MARY KELSEY 833

Mailing Address 302 DIAMOND DR

City

KIMBERLY

State

ID

Zip Code

83341

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

295.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 24 / 2016

Transaction ID : SA11AI.11178

Amount of Each Receipt this Period

75.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MARY KELSEY 833

Mailing Address 302 DIAMOND DR

City

KIMBERLY

State

ID

Zip Code

83341

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

345.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 28 / 2016

Transaction ID : SA11AI.11179

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

175.00

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

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

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

THE CONSERVATIVE STRIKEFORCE

Full Name (Last, First, Middle Initial)

A. FRED W KLEIN 857

Mailing Address 36584 S WIND CREST DR

City State Zip Code
 TUCSON AZ 85739

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 / 08 / 2016

Transaction ID : SA11AI.11231

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. BETTY KUHN 958

Mailing Address 585 ASHTON PARK LN

City State Zip Code
 SACRAMENTO CA 95864

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

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
 06 / 24 / 2016

Transaction ID : SA11AI.11295

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. JERRY LAFFERTY 286

Mailing Address PO BOX 453

City State Zip Code
 JEFFERSON NC 28640

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

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 Y
 06 / 03 / 2016

Transaction ID : SA11AI.11314

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

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

850.00

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

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NAME OF COMMITTEE (In Full)

THE CONSERVATIVE STRIKEFORCE

Full Name (Last, First, Middle Initial)

A. JUDITH LEVINE 920

Mailing Address PO BOX P817

City State Zip Code
 RANCHO SANTA FE CA 92067

FEC ID number of contributing federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

PROPERTY 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 Y
 06 07 2016

Transaction ID : SA11Al.11407

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. JUDITH LEVINE 920

Mailing Address PO BOX P817

City State Zip Code
 RANCHO SANTA FE CA 92067

FEC ID number of contributing federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

PROPERTY MANAGER

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
 06 17 2016

Transaction ID : SA11Al.11408

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. IONEL MARSVELA 923

Mailing Address PO BOX 1548

City State Zip Code
 INLAND EMPIRE CA 92354

FEC ID number of contributing federal political committee.

C

Name of Employer

S B LOCISTIE

Occupation

TRUCK DRIVER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 05 13 2016

Transaction ID : SA11Al.11533

Amount of Each Receipt this Period

45.00

☐ Memo Item

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

345.00

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)

THE CONSERVATIVE STRIKEFORCE

Full Name (Last, First, Middle Initial)

A. IONEL MARSAVELA 923

Mailing Address PO BOX 1548

City State Zip Code
 INLAND EMPIRE CA 92354

FEC ID number of contributing
federal political committee.

C

Name of Employer

S B LOCISTIE

Occupation

TRUCK DRIVER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 06 / 01 / 2016

Transaction ID : SA11AI.11534

Amount of Each Receipt this Period

85.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. TRUDY MCCRORY 360

Mailing Address 426 PARKWOOD DR

City State Zip Code
 PRATTVILLE AL 36067

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

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 / 10 / 2016

Transaction ID : SA11AI.11622

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. VIRGIE MILLER 897

Mailing Address 4895 CONVAIR DR

City State Zip Code
 CARSON CITY NV 89706

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 05 / 02 / 2016

Transaction ID : SA11AI.11743

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

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

435.00

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

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NAME OF COMMITTEE (In Full)

THE CONSERVATIVE STRIKEFORCE

Full Name (Last, First, Middle Initial)

A. PRUDENCE MILLER 972

Mailing Address 4220 SW GREENLEAF DR

City State Zip Code
 PORTLAND OR 97221

FEC ID number of contributing federal political committee.

C

Name of Employer

NONE

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
 05 / 23 / 2016

Transaction ID : SA11AI.11747

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. GREGG M OLSEN 836

Mailing Address 1059 E IRON EAGLE DR

City State Zip Code
 EAGLE ID 83616

FEC ID number of contributing federal political committee.

C

Name of Employer

HELP-U-SELL RES

Occupation

REALTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y
 06 / 28 / 2016

Transaction ID : SA11AI.11966

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. RONALD PAYNE 282

Mailing Address 2146 SHARON LN

City State Zip Code
 CHARLOTTE NC 28211

FEC ID number of contributing federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

MISSIONARY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
 06 / 25 / 2016

Transaction ID : SA11AI.12065

Amount of Each Receipt this Period

250.00

☐ Memo Item

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)

THE CONSERVATIVE STRIKEFORCE

Full Name (Last, First, Middle Initial)

A. PHYLLIS C PITCAIRN 190

Mailing Address 2582 HALLOWELL RD

City State Zip Code
 HUNTINGDON VALLEY PA 19006

FEC ID number of contributing federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 05 / 15 / 2016

Transaction ID : SA11Al.12182

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. NORMAN PURVES 967

Mailing Address 60 KOKEA ST

City State Zip Code
 HILO HI 96720

FEC ID number of contributing federal political committee.

C

Name of Employer

RETIRED

Occupation

ACCOUNTANT

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
 06 / 24 / 2016

Transaction ID : SA11Al.12244

Amount of Each Receipt this Period

150.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. ARTHUR RICE 284

Mailing Address 328 OLDE POINT LOOP

City State Zip Code
 HAMPSTEAD NC 28443

FEC ID number of contributing federal political committee.

C

Name of Employer

CENTERPOINT ENERGY

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 06 / 24 / 2016

Transaction ID : SA11Al.12325

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

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

650.00

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

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NAME OF COMMITTEE (In Full)

THE CONSERVATIVE STRIKEFORCE

Full Name (Last, First, Middle Initial)

A. JOHN RICHARDS 100

Mailing Address 940 PARK AVE APT 5A

City

NEW YORK

State

NY

Zip Code

10028

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 04 / 2016

Transaction ID : SA11AI.12331

Amount of Each Receipt this Period

350.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. NORMAN ROBERT 708

Mailing Address 1908 HERMADEL DR

City

BATON ROUGE

State

LA

Zip Code

70816

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 01 / 2016

Transaction ID : SA11AI.12379

Amount of Each Receipt this Period

350.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. NORMAN A ROBERT 708

Mailing Address 1908 HERMADEL DR

City

BATON ROUGE

State

LA

Zip Code

70816

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

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 Y Y
05 / 16 / 2016

Transaction ID : SA11AI.12380

Amount of Each Receipt this Period

150.00

☐ Memo Item

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)

THE CONSERVATIVE STRIKEFORCE

Full Name (Last, First, Middle Initial)

A. CASIMIRO RUIZ 761

Mailing Address 5705 N WELLS CIR

City State Zip Code
 WESTWORTH VILLAGE TX 76114

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

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
 06 / 23 / 2016

Transaction ID : SA11AI.12490

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. JOHN RYAN 782

Mailing Address 311 W NOTTINGHAM DR

City State Zip Code
 SAN ANTONIO TX 78209

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

NONE

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 Y
 06 / 01 / 2016

Transaction ID : SA11AI.12496

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. STUART SHAW 787

Mailing Address 6009 ELEOS CIR

City State Zip Code
 AUSTIN TX 78735

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

NONE

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 / 24 / 2016

Transaction ID : SA11AI.12664

Amount of Each Receipt this Period

200.00

☐ Memo Item

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

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

600.00

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

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

THE CONSERVATIVE STRIKEFORCE

Full Name (Last, First, Middle Initial)

A. DONNA M SIPP 693

Mailing Address PO BOX 388

City

HAY SPRINGS

State

NE

Zip Code

69347

FEC ID number of contributing
federal political committee.

C

Name of Employer

HOWARD HANNA

Occupation

FINANCE MANAGER

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

350.00

Date of Receipt

06 / 29 / 2016

Transaction ID : SA11Al.12729

Amount of Each Receipt this Period

150.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. KURT SNAPPER 201

Mailing Address 2486 IRON FORGE RD

City

OAK HILL

State

VA

Zip Code

20171

FEC ID number of contributing
federal political committee.

C

Name of Employer

ALCON LABS INC

Occupation

ENGINEER

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

04 / 08 / 2016

Transaction ID : SA11Al.12788

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. KURT SNAPPER 201

Mailing Address 2486 IRON FORGE RD

City

OAK HILL

State

VA

Zip Code

20171

FEC ID number of contributing
federal political committee.

C

Name of Employer

ALCON LABS INC

Occupation

ENGINEER

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

400.00

Date of Receipt

04 / 27 / 2016

Transaction ID : SA11Al.12789

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

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NAME OF COMMITTEE (In Full)

THE CONSERVATIVE STRIKEFORCE

Full Name (Last, First, Middle Initial)

A. NAOMI L SNOWDEN 741

Mailing Address 5929 E 87TH ST

City State Zip Code
 TULSA OK 74137

FEC ID number of contributing federal political committee.

C

Name of Employer

NONE

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
 05 / 16 / 2016

Transaction ID : SA11Al.12795

Amount of Each Receipt this Period

600.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. RALPH STEPHENSON 708

Mailing Address 333 LEE DR APT 381

City State Zip Code
 BATON ROUGE LA 70808

FEC ID number of contributing federal political committee.

C

Name of Employer

NONE

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
 05 / 24 / 2016

Transaction ID : SA11Al.12881

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. JAMES N SYLTE 565

Mailing Address 215 SKOGMO BLVD

City State Zip Code
 FERGUS FALLS MN 56537

FEC ID number of contributing federal political committee.

C

Name of Employer

US ARMY

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

435.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 / 07 / 2016

Transaction ID : SA11Al.12965

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

950.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse 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)

THE CONSERVATIVE STRIKEFORCE

Full Name (Last, First, Middle Initial)

A. JAMES THARP 349

Mailing Address 5089 S E JACK AVENUE

City

STUART

State

FL

Zip Code

34997

FEC ID number of contributing
federal political committee.

C

Name of Employer

NORDSTROM

Occupation

RETAIL SALES

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5		0	1		2	0	1	6		

Transaction ID : SA11AI.13015

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. JOHNNY THOMAS 201

Mailing Address 11926 LUCASVILLE RD

City

MANASSAS

State

VA

Zip Code

20112

FEC ID number of contributing
federal political committee.

C

Name of Employer

HONEYWELL AEROSPACE

Occupation

ENGINEER

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	6		2	8		2	0	1	6		

Transaction ID : SA11AI.13018

Amount of Each Receipt this Period

150.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. RICHARD WAGGONER 925

Mailing Address 21406 WESTOVER CIR

City

RIVERSIDE

State

CA

Zip Code

92518

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

REAL ESTATE MANAGEMENT

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5		3	1		2	0	1	6		

Transaction ID : SA11AI.13184

Amount of Each Receipt this Period

150.00

☐ Memo Item**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
Detailed Summary Page

FOR LINE NUMBER: PAGE 45 OF 97

(check only one)

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

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NAME OF COMMITTEE (In Full)

THE CONSERVATIVE STRIKEFORCE

Full Name (Last, First, Middle Initial)

A. RICHARD W WILLIAMS 757

Mailing Address 700 E VANCE ST

City State Zip Code
 TYLER TX 75702

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

INSURANCE PRODUCER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 / 22 / 2016

Transaction ID : SA11AI.13360

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. THOMAS WILSON 921

Mailing Address 985 ORMA DR

City State Zip Code
 SAN DIEGO CA 92106

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

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 Y
 06 / 04 / 2016

Transaction ID : SA11AI.13393

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. THOMAS WILSON 921

Mailing Address 985 ORMA DR

City State Zip Code
 SAN DIEGO CA 92106

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

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 Y
 06 / 06 / 2016

Transaction ID : SA11AI.13394

Amount of Each Receipt this Period

20.00

☐ Memo Item

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

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

65.00

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)

THE CONSERVATIVE STRIKEFORCE

Full Name (Last, First, Middle Initial)

A. THOMAS WILSON 921

Mailing Address 985 ORMA DR

City

SAN DIEGO

State

CA

Zip Code

92106

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

245.00

Date of Receipt

06 / 22 / 2016

Transaction ID : SA11AI.13395

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. THOMAS WILSON 921

Mailing Address 985 ORMA DR

City

SAN DIEGO

State

CA

Zip Code

92106

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

265.00

Date of Receipt

06 / 23 / 2016

Transaction ID : SA11AI.13396

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. THOMAS WILSON 921

Mailing Address 985 ORMA DR

City

SAN DIEGO

State

CA

Zip Code

92106

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

285.00

Date of Receipt

06 / 28 / 2016

Transaction ID : SA11AI.13397

Amount of Each Receipt this Period

20.00

☐ Memo Item

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

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

60.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse 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)

THE CONSERVATIVE STRIKEFORCE

Full Name (Last, First, Middle Initial)

A. GEORGE YOUNG 502

Mailing Address 122 N 5TH AVE W APT 213

City
NEWTONState
IAZip Code
50208FEC ID number of contributing
federal political committee.

C

Name of Employer

US ARMY

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

465.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	5		2	0	1	6

Transaction ID : SA11Al.13479

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. GEORGE W YOUNG 502

Mailing Address 122 N 5TH AVE W

City
NEWTONState
IAZip Code
50208FEC ID number of contributing
federal political committee.

C

Name of Employer

DRS TECHNOLOGIES

Occupation

ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

525.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	6

Transaction ID : SA11Al.13480

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MARJORIE L ZOLLINGER 152

Mailing Address 115 LUCILLE DR

City
PITTSBURGHState
PAZip Code
15235FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

TELEC ANALYST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	1		2	0	1	6

Transaction ID : SA11Al.13512

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

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

900.00

23500.00

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

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NAME OF COMMITTEE (In Full)

THE CONSERVATIVE STRIKEFORCE

Full Name (Last, First, Middle Initial)

A. ACTIVE ENGAGEMENTMailing Address 44084 RIVERSIDE PARKWAY
SUITE 350

City LANSDOWNE State VA Zip Code 20176

Purpose of Disbursement
PAC SOLICITATION CALLS

003

Candidate Name

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

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y
04 / 12 / 2016

Transaction ID : SB21B.13539

Amount of Each Disbursement this Period

575.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ACTIVE ENGAGEMENTMailing Address 44084 RIVERSIDE PARKWAY
SUITE 350

City LANSDOWNE State VA Zip Code 20176

Purpose of Disbursement
PAC SOLICITATION CALLS

003

Candidate Name

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

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y
05 / 10 / 2016

Transaction ID : SB21B.13540

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. ACTIVE ENGAGEMENTMailing Address 44084 RIVERSIDE PARKWAY
SUITE 350

City LANSDOWNE State VA Zip Code 20176

Purpose of Disbursement
PAC SOLICITATION CALLS

003

Candidate Name

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

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y
05 / 25 / 2016

Transaction ID : SB21B.13541

Amount of Each Disbursement this Period

1900.00

☐ Memo Item

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

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

3475.00

**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)

THE CONSERVATIVE STRIKEFORCE

Full Name (Last, First, Middle Initial)

A. AMERICAN EXPRESS

Mailing Address PO BOX 1270

City	State	Zip Code
NEWARK	NJ	07101

Purpose of Disbursement
PO BOX RENTAL

001

Candidate Name

THE CONSERVATIVE STRIKEFORCECategory/
Type

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

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

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		29		2016

Transaction ID : SB21B.13520

Amount of Each Disbursement this Period

440.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. AMERICAN LIBERTY GROUPMailing Address 611 PENNSYLVANIA AVE SE
SUITE 227

City	State	Zip Code
WASHINGTON	DC	20003

Purpose of Disbursement
PAC SOLICITATION CALLS

003

Candidate Name

THE CONSERVATIVE STRIKEFORCECategory/
Type

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

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

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		07		2016

Transaction ID : SB21B.13562

Amount of Each Disbursement this Period

5723.34

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. AMERICAN LIBERTY GROUPMailing Address 611 PENNSYLVANIA AVE SE
SUITE 227

City	State	Zip Code
WASHINGTON	DC	20003

Purpose of Disbursement
PAC SOLICITATION CALLS

003

Candidate Name

THE CONSERVATIVE STRIKEFORCECategory/
Type

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

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

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		14		2016

Transaction ID : SB21B.13563

Amount of Each Disbursement this Period

9053.53

☐ Memo Item

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

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

15216.87

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**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)

THE CONSERVATIVE STRIKEFORCE

Full Name (Last, First, Middle Initial)

A. AMERICAN LIBERTY GROUPMailing Address 611 PENNSYLVANIA AVE SE
SUITE 227

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAC SOLICITATION CALLS

003

Candidate Name

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

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
04 21 2016

Transaction ID : SB21B.13564

Amount of Each Disbursement this Period

1595.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. AMERICAN LIBERTY GROUPMailing Address 611 PENNSYLVANIA AVE SE
SUITE 227

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAC SOLICITATION CALLS

003

Candidate Name

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

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
04 28 2016

Transaction ID : SB21B.13565

Amount of Each Disbursement this Period

3971.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. AMERICAN LIBERTY GROUPMailing Address 611 PENNSYLVANIA AVE SE
SUITE 227

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAC SOLICITATION CALLS

003

Candidate Name

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

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 05 2016

Transaction ID : SB21B.13566

Amount of Each Disbursement this Period

3380.81

☐ Memo Item

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

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

8946.81

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse 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)

THE CONSERVATIVE STRIKEFORCE

Full Name (Last, First, Middle Initial)

A. AMERICAN LIBERTY GROUPMailing Address 611 PENNSYLVANIA AVE SE
SUITE 227

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAC SOLICITATION CALLS

003

Candidate Name

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

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y
05 / 12 / 2016

Transaction ID : SB21B.13567

Amount of Each Disbursement this Period

1305.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. AMERICAN LIBERTY GROUPMailing Address 611 PENNSYLVANIA AVE SE
SUITE 227

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAC SOLICITATION CALLS

003

Candidate Name

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

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y
05 / 19 / 2016

Transaction ID : SB21B.13568

Amount of Each Disbursement this Period

13705.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. AMERICAN LIBERTY GROUPMailing Address 611 PENNSYLVANIA AVE SE
SUITE 227

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAC SOLICITATION CALLS

003

Candidate Name

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

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y
06 / 16 / 2016

Transaction ID : SB21B.13569

Amount of Each Disbursement this Period

1626.00

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

16636.00

<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

THE CONSERVATIVE STRIKEFORCE

A. BAKER HOSTETLER LLP

Date of Disbursement

Transaction ID : SB21B.13522

00:

Category/
Type

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

Amount of Each Disbursement this Period

2467.50

 Memo Item

B. BB&T BANK

Date of Disbursement

Transaction ID : SB21B.13538

00

Category/
Type

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Amount of Each Disbursement this Period

648.96

Memo Item

C. CLIENT FIRST CONSULTING GROUP

Date of Disbursement

Transaction ID : SB21B.13574

00-

Category/
Type

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Amount of Each Disbursement this Period

 Memo Item

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

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

3916.46

**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 54 OF 97

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

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NAME OF COMMITTEE (In Full)

THE CONSERVATIVE STRIKEFORCE

Full Name (Last, First, Middle Initial)

A. FIRST VIRGINIA COMMUNITY BANK

Mailing Address 11325 RANDOM HILLS RD

City FAIRFAX State VA Zip Code 22030

Purpose of Disbursement
SERVICE CHARGE

001

Candidate Name

THE CONSERVATIVE STRIKEFORCECategory/
Type
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 / 01 / 2016

Transaction ID : SB21B.13552

Amount of Each Disbursement this Period

87.15

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. FIRST VIRGINIA COMMUNITY BANK

Mailing Address 11325 RANDOM HILLS RD

City FAIRFAX State VA Zip Code 22030

Purpose of Disbursement
GLOBAL SERVICE FEES

001

Candidate Name

THE CONSERVATIVE STRIKEFORCECategory/
Type
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 / 04 / 2016

Transaction ID : SB21B.13555

Amount of Each Disbursement this Period

75.59

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. FIRST VIRGINIA COMMUNITY BANK

Mailing Address 11325 RANDOM HILLS RD

City FAIRFAX State VA Zip Code 22030

Purpose of Disbursement
GLOBAL SERVICE FEES

001

Candidate Name

THE CONSERVATIVE STRIKEFORCECategory/
Type
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 / 04 / 2016

Transaction ID : SB21B.13556

Amount of Each Disbursement this Period

2037.92

☐ Memo Item

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

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

2200.66

**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)

THE CONSERVATIVE STRIKEFORCE

Full Name (Last, First, Middle Initial)

A. FIRST VIRGINIA COMMUNITY BANK

Mailing Address 11325 RANDOM HILLS RD

City FAIRFAX State VA Zip Code 22030

Purpose of Disbursement
SERVICE CHARGE

001

Candidate Name

THE CONSERVATIVE STRIKEFORCECategory/
Type
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
05 02 2016

Transaction ID : SB21B.13553

Amount of Each Disbursement this Period

115.10

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. FIRST VIRGINIA COMMUNITY BANK

Mailing Address 11325 RANDOM HILLS RD

City FAIRFAX State VA Zip Code 22030

Purpose of Disbursement
GLOBAL SERVICE FEES

001

Candidate Name

THE CONSERVATIVE STRIKEFORCECategory/
Type
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
05 03 2016

Transaction ID : SB21B.13557

Amount of Each Disbursement this Period

75.89

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. FIRST VIRGINIA COMMUNITY BANK

Mailing Address 11325 RANDOM HILLS RD

City FAIRFAX State VA Zip Code 22030

Purpose of Disbursement
GLOBAL SERVICE FEES

001

Candidate Name

THE CONSERVATIVE STRIKEFORCECategory/
Type
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
05 03 2016

Transaction ID : SB21B.13558

Amount of Each Disbursement this Period

1468.20

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

1659.19

**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)

THE CONSERVATIVE STRIKEFORCE

Full Name (Last, First, Middle Initial)

A. FIRST VIRGINIA COMMUNITY BANK

Mailing Address 11325 RANDOM HILLS RD

City FAIRFAX State VA Zip Code 22030

Purpose of Disbursement
SERVICE CHARGE

001

Candidate Name

THE CONSERVATIVE STRIKEFORCECategory/
Type
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
06 01 2016
Transaction ID : SB21B.13554

Amount of Each Disbursement this Period

78.70

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. FIRST VIRGINIA COMMUNITY BANK

Mailing Address 11325 RANDOM HILLS RD

City FAIRFAX State VA Zip Code 22030

Purpose of Disbursement
GLOBAL SERVICE FEES

001

Candidate Name

THE CONSERVATIVE STRIKEFORCECategory/
Type
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
06 02 2016
Transaction ID : SB21B.13559

Amount of Each Disbursement this Period

110.40

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. FIRST VIRGINIA COMMUNITY BANK

Mailing Address 11325 RANDOM HILLS RD

City FAIRFAX State VA Zip Code 22030

Purpose of Disbursement
GLOBAL SERVICE FEES

001

Candidate Name

THE CONSERVATIVE STRIKEFORCECategory/
Type
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
06 02 2016
Transaction ID : SB21B.13560

Amount of Each Disbursement this Period

2271.81

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

2460.91

**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)

THE CONSERVATIVE STRIKEFORCE

Full Name (Last, First, Middle Initial)

A. SHULMAN ROGERS GANDAL PAMailing Address 12505 PARK POTOMAC AVE
6TH FLOOR

City POTOMAC State MD Zip Code 20854

Purpose of Disbursement
LEGAL SERVICES

001

Candidate Name

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

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
06 01 2016

Transaction ID : SB21B.13536

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. WASHINGTON INTELLIGENCE BUREAU

Mailing Address 4128 PEPSI PLACE

City CHANTILLY State VA Zip Code 20151

Purpose of Disbursement
CAGING & ESCROW SERVICES

001

Candidate Name

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

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
04 14 2016

Transaction ID : SB21B.13561

Amount of Each Disbursement this Period

463.47

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. WELLS FARGO BANK

Mailing Address 1711 FERN ST

City ALEXANDRIA State VA Zip Code 22302

Purpose of Disbursement
AUTHNET GATEWAY FEE

001

Candidate Name

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

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
04 04 2016

Transaction ID : SB21B.13526

Amount of Each Disbursement this Period

30.00

☐ Memo Item

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

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

2993.47

**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)

THE CONSERVATIVE STRIKEFORCE

Full Name (Last, First, Middle Initial)

A. WELLS FARGO BANK

Mailing Address 1711 FERN ST

City ALEXANDRIA State VA Zip Code 22302

Purpose of Disbursement
WIRE TRANSFER FEE

001

Candidate Name

THE CONSERVATIVE STRIKEFORCECategory/
Type
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 / 07 / 2016

Transaction ID : SB21B.13527

Amount of Each Disbursement this Period

15.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. WELLS FARGO BANK

Mailing Address 1711 FERN ST

City ALEXANDRIA State VA Zip Code 22302

Purpose of Disbursement
WIRE TRANSFER FEE

001

Candidate Name

THE CONSERVATIVE STRIKEFORCECategory/
Type
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 / 28 / 2016

Transaction ID : SB21B.13528

Amount of Each Disbursement this Period

15.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. WELLS FARGO BANK

Mailing Address 1711 FERN ST

City ALEXANDRIA State VA Zip Code 22302

Purpose of Disbursement
SERVICE CHARGE

001

Candidate Name

THE CONSERVATIVE STRIKEFORCECategory/
Type
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 / 29 / 2016

Transaction ID : SB21B.13529

Amount of Each Disbursement this Period

14.00

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

44.00

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

PAGE 59 OF 97

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

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NAME OF COMMITTEE (In Full)

THE CONSERVATIVE STRIKEFORCE

Full Name (Last, First, Middle Initial)

A. WELLS FARGO BANK

Mailing Address 1711 FERN ST

City ALEXANDRIA State VA Zip Code 22302

Purpose of Disbursement
AUTHNET GATEWAY FEE

001

Candidate Name

THE CONSERVATIVE STRIKEFORCECategory/
Type
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
05 / 03 / 2016
Transaction ID : SB21B.13530

Amount of Each Disbursement this Period

30.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. WELLS FARGO BANK

Mailing Address 1711 FERN ST

City ALEXANDRIA State VA Zip Code 22302

Purpose of Disbursement
SERVICE CHARGE

001

Candidate Name

THE CONSERVATIVE STRIKEFORCECategory/
Type
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
05 / 31 / 2016
Transaction ID : SB21B.13531

Amount of Each Disbursement this Period

14.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. WELLS FARGO BANK

Mailing Address 1711 FERN ST

City ALEXANDRIA State VA Zip Code 22302

Purpose of Disbursement
AUTHNET GATEWAY FEE

001

Candidate Name

THE CONSERVATIVE STRIKEFORCECategory/
Type
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
06 / 02 / 2016
Transaction ID : SB21B.13532

Amount of Each Disbursement this Period

30.00

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

74.00

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

PAGE 60 OF 97

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

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NAME OF COMMITTEE (In Full)

THE CONSERVATIVE STRIKEFORCE

Full Name (Last, First, Middle Initial)

A. WELLS FARGO BANK

Mailing Address 1711 FERN ST

City ALEXANDRIA State VA Zip Code 22302

Purpose of Disbursement
CREDIT CARD PROCESSING

001

Candidate Name

THE CONSERVATIVE STRIKEFORCECategory/
Type
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
06 / 30 / 2016
Transaction ID : SB21B.13525

Amount of Each Disbursement this Period

16.51

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. WELLS FARGO BANK

Mailing Address 1711 FERN ST

City ALEXANDRIA State VA Zip Code 22302

Purpose of Disbursement
SERVICE CHARGE

001

Candidate Name

THE CONSERVATIVE STRIKEFORCECategory/
Type
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
06 / 30 / 2016
Transaction ID : SB21B.13533

Amount of Each Disbursement this Period

14.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type
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

Amount of Each Disbursement this Period

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

30.51

57967.95

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

PAGE 61 OF 97

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)

THE CONSERVATIVE STRIKEFORCE

Full Name (Last, First, Middle Initial)

A. AFGHANISTAN & IRAQ VETERANS FOR CONGRESS PAC

Mailing Address 105 STONY BROOK

City	State	Zip Code
FISHKILL	NY	12524

Purpose of Disbursement
IN-KIND CONTRIBUTION - PAYMENT ON MUR-6964

011

Candidate Name
AFGHANISTAN & IRAQ VETERANS FOR CONGRESS PACCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		16		2016

Transaction ID : SB23.13523

Amount of Each Disbursement this Period

350.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

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

Purpose of Disbursement

Candidate Name

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

State: District:

Date of Disbursement

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

Amount of Each Disbursement this Period

--

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

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

Purpose of Disbursement

Candidate Name

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

State: District:

Date of Disbursement

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

Amount of Each Disbursement this Period

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

350.00

350.00

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

THE CONSERVATIVE STRIKEFORCE

A. SCOTT B MACKENZIE

Mailing Address 2776 S ARLINGTON MILL DRIVE #806

City	State	Zip Code
ARLINGTON	VA	22206

Purpose of Disbursement	LOAN REPAYMENT
-------------------------	----------------

Candidate Name

THE CONSERVATIVE STRIKEFORCE

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

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement



Transaction ID : SB26.13534

Amount of Each Disbursement this Period

400.00

 Memo Item

Full Name (Last, First, Middle Initial)

B.

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:

Date of Disbursement

Amount of Each Disbursement this Period

Memo Item

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:

Date of Disbursement

Amount of Each Disbursement this Period

 Memo Item

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

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

400.00

400.00

SCHEDULE C (FEC Form 3X)**LOANS**Use separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 63 OF 97

FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4171

THE CONSERVATIVE STRIKEFORCE**LOAN SOURCE** Full Name (Last, First, Middle Initial)

SCOTT B MACKENZIE

☐ Memo Item

Election:

☐ Primary☐ General☐ Other (specify) ▼

Mailing Address 2776 S ARLINGTON MILL DRIVE #806

City ARLINGTON

State VA

ZIP Code 22206

Original Amount of Loan

400.00

Cumulative Payment To Date

400.00

Balance Outstanding at Close of This Period

0.00

TERMS

Date Incurred

M M / D D / Y Y Y Y
01 / 22 / 2016

Date Due

M M / D D / Y Y Y Y

UPON
REQUEST

Interest Rate

0.00

% (apr)

Secured:

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

0.00

TOTALS This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3X)**LOANS**Use separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 64 OF 97

FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4172

THE CONSERVATIVE STRIKEFORCE**LOAN SOURCE** Full Name (Last, First, Middle Initial)

SCOTT B MACKENZIE

☐ Memo Item

Election:

☐ Primary☐ General☐ Other (specify) ▼

Mailing Address 2776 S ARLINGTON MILL DRIVE #806

City ARLINGTON

State VA

ZIP Code 22206

Original Amount of Loan

100.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

100.00

TERMS

Date Incurred

MM / DD / YYYY
03 / 07 / 2016

Date Due

MM / DD / YYYY

UPON
REQUEST

Interest Rate

0.00

% (apr)

Secured:

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

100.00

TOTALS This Period (last page in this line only)..... ►

100.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 65 OF 97
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) THE CONSERVATIVE STRIKEFORCE			FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;">C C00457291</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 ACTIVE ENGAGEMENT			<input checked="" type="checkbox"/> Memo Item 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 44084 RIVERSIDE PARKWAY SUITE 350			Amount <div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div> 1100.00		
City LANSDOWNE		State VA	Zip Code 20176		Transaction ID : SE.4169
Purpose of Expenditure VOTER CONTACT eMAILS		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-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>	
Name of Federal Candidate JOE HECK			<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>NV</u>		
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div> 0.00			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee ACTIVE ENGAGEMENT			<input type="checkbox"/> Memo Item 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 44084 RIVERSIDE PARKWAY SUITE 350			Amount <div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div> 1100.00		
City LANSDOWNE		State VA	Zip Code 20176		Transaction ID : SE.13549
Purpose of Expenditure VOTER CONTACT CALLS		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-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>	
Name of Federal Candidate MARK STEVEN KIRK			<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>IL</u>		
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div> 1100.00			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			<div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div> 1100.00		
(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 <div style="border-top: 1px solid black; width: 100%;"></div>			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>		

SCOTT B MACKENZIE

[Electronically Filed]

Date

 / /

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 66 OF 97
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) THE CONSERVATIVE STRIKEFORCE			FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;">C C00457291</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 ACTIVE ENGAGEMENT			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> 02 / 19 / 2016		
Mailing Address 44084 RIVERSIDE PARKWAY SUITE 350			Amount <div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div> 1000.00		
City LANSDOWNE		State VA	Zip Code 20176		Transaction ID : SE.13545
Purpose of Expenditure VOTER CONTACT CALLS		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-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> 05 / 10 / 2016	
Name of Federal Candidate MIA LOVE			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House District: <u>04</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>UT</u>
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee ACTIVE ENGAGEMENT			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> 03 / 21 / 2016		
Mailing Address 44084 RIVERSIDE PARKWAY SUITE 350			Amount <div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div> 1000.00		
City LANSDOWNE		State VA	Zip Code 20176		Transaction ID : SE.13546
Purpose of Expenditure VOTER CONTACT CALLS		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-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> 05 / 10 / 2016	
Name of Federal Candidate MIA LOVE			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House District: <u>04</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>UT</u>
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			<div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div> 2000.00		
(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 SCOTT B MACKENZIE			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> 07 / 15 / 2016		

[Electronically Filed]

Full Name of Payee ACTIVE ENGAGEMENT		<input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <div> <div>MM / DD / YYYY</div> <div>04 / 04 / 2016</div> </div>	
Mailing Address 44084 RIVERSIDE PARKWAY SUITE 350			Amount <div> <div></div> <div>1100.00</div> </div>	
City LANSLOWNE	State VA	Zip Code 20176	Transaction ID : SE.13550 Date of Disbursement or Obligation <div> <div>MM / DD / YYYY</div> <div>05 / 25 / 2016</div> </div>	
Purpose of Expenditure VOTER CONTACT CALLS		Category/ Type	<div> <div></div> <div>004</div> </div>	
Name of Federal Candidate JOE HECK		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate District: <u>00</u> State: <u>NV</u>	
Calendar Year-To-Date Per Election for Office Sought		<div> <div></div> <div>1100.00</div> </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name of Payee ACTIVE ENGAGEMENT		<input checked="" type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination MM / DD / YYYY 05 / 31 / 2016	
Mailing Address 44084 RIVERSIDE PARKWAY SUITE 350				Amount 3000.00	
City LANSLOWNE	State VA	Zip Code 20176		Transaction ID : SE.8875 Date of Disbursement or Obligation MM / DD / YYYY 05 / 31 / 2016	
Purpose of Expenditure VOTER CONTACT COMMUNICATIONS		Category/ Type	001		
Name of Federal Candidate MIA LOVE		<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: 04 State: UT
Calendar Year-To-Date Per Election for Office Sought		2000.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....	▶	<div style="display: flex; justify-content: space-between;"> <div style="flex-grow: 1; border-bottom: 1px solid black; position: relative;"> <div style="position: absolute; top: -10px; left: 0; right: 0; border-bottom: 1px solid black;"></div> <div style="position: absolute; bottom: -10px; left: 0; right: 0; border-bottom: 1px solid black;"></div> </div> <div style="text-align: right; width: 150px;">1100.00</div> </div>
(b) SUBTOTAL of Unitemized Independent Expenditures	▶	<div style="display: flex; justify-content: space-between;"> <div style="flex-grow: 1; border-bottom: 1px solid black; position: relative;"> <div style="position: absolute; top: -10px; left: 0; right: 0; border-bottom: 1px solid black;"></div> <div style="position: absolute; bottom: -10px; left: 0; right: 0; border-bottom: 1px solid black;"></div> </div> <div style="text-align: right; width: 150px;"></div> </div>
(c) TOTAL Independent Expenditures.....	▶	<div style="display: flex; justify-content: space-between;"> <div style="flex-grow: 1; border-bottom: 1px solid black; position: relative;"> <div style="position: absolute; top: -10px; left: 0; right: 0; border-bottom: 1px solid black;"></div> <div style="position: absolute; bottom: -10px; left: 0; right: 0; border-bottom: 1px solid black;"></div> </div> <div style="text-align: right; width: 150px;"></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.

[Electronically Filed]

Signature

Date _____

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 68 OF 97
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) THE CONSERVATIVE STRIKEFORCE			FEC IDENTIFICATION NUMBER ▼ C C00457291		
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 ACTIVE ENGAGEMENT			<input checked="" type="checkbox"/> Memo Item		
Mailing Address 44084 RIVERSIDE PARKWAY SUITE 350			Date of Public Distribution/Dissemination 06 / 13 / 2016		
City LANSDOWNE		State VA	Zip Code 20176	Amount 1000.00	
Purpose of Expenditure VOTER CONTACT COMMUNICATIONS		Category/Type 004		Transaction ID : SE.8878 Date of Disbursement or Obligation 06 / 13 / 2016	
Name of Federal Candidate MIA LOVE			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		
Office Sought: <input type="checkbox"/> President <input type="checkbox"/> Senate			<input checked="" type="checkbox"/> House District: <u>04</u> State: <u>UT</u>		
Calendar Year-To-Date Per Election for Office Sought 2000.00			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee ACTIVE ENGAGEMENT			<input type="checkbox"/> Memo Item		
Mailing Address 44084 RIVERSIDE PARKWAY SUITE 350			Date of Public Distribution/Dissemination 05 / 31 / 2016		
City LANSDOWNE		State VA	Zip Code 20176	Amount 3000.00	
Purpose of Expenditure VOTER CONTACT CALLS		Category/Type 004		Transaction ID : SE.13547 Date of Disbursement or Obligation 06 / 14 / 2016	
Name of Federal Candidate MIA LOVE			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		
Office Sought: <input type="checkbox"/> President <input type="checkbox"/> Senate			<input checked="" type="checkbox"/> House District: <u>04</u> State: <u>UT</u>		
Calendar Year-To-Date Per Election for Office Sought 5000.00			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			3000.00		
(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 SCOTT B MACKENZIE			Date 07 / 15 / 2016		
			[Electronically Filed]		

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 69 OF 97
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) THE CONSERVATIVE STRIKEFORCE		FEC IDENTIFICATION NUMBER ▼ C C00457291	
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 / YYYYYY			
Full Name of Payee ACTIVE ENGAGEMENT		<input checked="" type="checkbox"/> Memo Item	
Mailing Address 44084 RIVERSIDE PARKWAY SUITE 350		Date of Public Distribution/Dissemination MM / DD / YYYYYY 06 / 24 / 2016	
City LANSDOWNE		State VA	
Zip Code 20176		Amount 1000.00	
Purpose of Expenditure VOTER CONTACT eMAILS		Category/Type 004	
Name of Federal Candidate MIA LOVE		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5000.00		Office Sought: <input checked="" type="checkbox"/> House District: 04 <input type="checkbox"/> President <input type="checkbox"/> Senate State: UT	
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee ACTIVE ENGAGEMENT		<input type="checkbox"/> Memo Item	
Mailing Address 44084 RIVERSIDE PARKWAY SUITE 350		Date of Public Distribution/Dissemination MM / DD / YYYYYY 06 / 13 / 2016	
City LANSDOWNE		State VA	
Zip Code 20176		Amount 1000.00	
Purpose of Expenditure VOTER CONTACT CALLS		Category/Type 004	
Name of Federal Candidate MIA LOVE		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 6000.00		Office Sought: <input checked="" type="checkbox"/> House District: 04 <input type="checkbox"/> President <input type="checkbox"/> Senate State: UT	
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures.....▶		1000.00	
(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 SCOTT B MACKENZIE		Date MM / DD / YYYYYY 07 / 15 / 2016	
		[Electronically Filed]	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 70 OF 97
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) THE CONSERVATIVE STRIKEFORCE			FEC IDENTIFICATION NUMBER ▼ C C00457291	
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 / YYYYYY				
Full Name of Payee ACTIVE ENGAGEMENT			<input type="checkbox"/> Memo Item	
Mailing Address 44084 RIVERSIDE PARKWAY SUITE 350			Date of Public Distribution/Dissemination MM / DD / YYYYYY 06 / 24 / 2016	
City LANSDOWNE		State VA	Zip Code 20176	Amount 1000.00
Purpose of Expenditure VOTER CONTACT CALLS		Category/ Type 004		Transaction ID : SE.13551 Date of Disbursement or Obligation MM / DD / YYYYYY 06 / 28 / 2016
Name of Federal Candidate MIA LOVE		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House District: <u>04</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>UT</u>
Calendar Year-To-Date Per Election for Office Sought		7000.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶
Full Name of Payee AMERICAN LIBERTY GROUP			<input checked="" type="checkbox"/> Memo Item	
Mailing Address 611 PENNSYLVANIA AVE SE SUITE 227			Date of Public Distribution/Dissemination MM / DD / YYYYYY 05 / 23 / 2016	
City WASHINGTON		State DC	Zip Code 20003	Amount 773.30
Purpose of Expenditure VOTER CONTACT CALLS		Category/ Type 004		Transaction ID : SE.8771 Date of Disbursement or Obligation MM / DD / YYYYYY 05 / 23 / 2016
Name of Federal Candidate HILLARY RODHAM CLINTON		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House District: <u>00</u> <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>AL</u>
Calendar Year-To-Date Per Election for Office Sought		0.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures.....▶			1000.00	
(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 SCOTT B MACKENZIE		[Electronically Filed]		Date MM / DD / YYYYYY 07 / 15 / 2016

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 71 OF 97
FOR LINE 24 OF FORM 3XNAME OF COMMITTEE (In Full)
THE CONSERVATIVE STRIKEFORCE

FEC IDENTIFICATION NUMBER ▼

C C00457291Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on

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

Full Name of Payee
AMERICAN LIBERTY GROUP☒ Memo Item

Date of Public Distribution/Dissemination

M M M / D D D / Y Y Y Y Y Y
05 / 23 / 2016Mailing Address
611 PENNSYLVANIA AVE SE
SUITE 227

Amount

112.40

City State Zip Code
WASHINGTON DC 20003

Transaction ID : SE.8773

Date of Disbursement or Obligation

M M M / D D D / Y Y Y Y Y Y
05 / 23 / 2016Purpose of Expenditure
VOTER CONTACT CALLSCategory/
Type 004Name of Federal Candidate
HILLARY RODHAM CLINTON☐ Support
☒ OpposeOffice Sought: ☐ House District: 00
☒ President ☐ Senate State: AKCalendar Year-To-Date
Per Election for Office Sought

0.00

Disbursement For: ☐ Primary ☒ General
2016 ☐ Other (specify) ▶Full Name of Payee
AMERICAN LIBERTY GROUP☒ Memo Item

Date of Public Distribution/Dissemination

M M M / D D D / Y Y Y Y Y Y
05 / 23 / 2016Mailing Address
611 PENNSYLVANIA AVE SE
SUITE 227

Amount

1021.93

City State Zip Code
WASHINGTON DC 20003

Transaction ID : SE.8774

Date of Disbursement or Obligation

M M M / D D D / Y Y Y Y Y Y
05 / 23 / 2016Purpose of Expenditure
VOTER CONTACT CALLSCategory/
Type 004Name of Federal Candidate
HILLARY RODHAM CLINTON☐ Support
☒ OpposeOffice Sought: ☐ House District: 00
☒ President ☐ Senate State: AZCalendar Year-To-Date
Per Election for Office Sought

0.00

Disbursement For: ☐ Primary ☒ General
2016 ☐ Other (specify) ▶

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

0.00

(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.

SCOTT B MACKENZIE

[Electronically Filed]

Signature

Date

M M M / D D D / Y Y Y Y Y Y
07 / 15 / 2016

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 72 OF 97
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) THE CONSERVATIVE STRIKEFORCE			FEC IDENTIFICATION NUMBER ▼ C C00457291	
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 AMERICAN LIBERTY GROUP			<input checked="" type="checkbox"/> Memo Item	
Mailing Address 611 PENNSYLVANIA AVE SE SUITE 227			Date of Public Distribution/Dissemination 05 / 23 / 2016	
City WASHINGTON		State DC	Zip Code 20003	Amount 468.64
Purpose of Expenditure VOTER CONTACT CALLS		Category/ Type	004	
Name of Federal Candidate HILLARY RODHAM CLINTON		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: AR	
Calendar Year-To-Date Per Election for Office Sought		0.00		
Disbursement For: 2016		<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee AMERICAN LIBERTY GROUP			<input checked="" type="checkbox"/> Memo Item	
Mailing Address 611 PENNSYLVANIA AVE SE SUITE 227			Date of Public Distribution/Dissemination 05 / 23 / 2016	
City WASHINGTON		State DC	Zip Code 20003	Amount 5979.19
Purpose of Expenditure VOTER CONTACT CALLS		Category/ Type	004	
Name of Federal Candidate HILLARY RODHAM CLINTON		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: CA	
Calendar Year-To-Date Per Election for Office Sought		0.00		
Disbursement For: 2016		<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶ 0.00				
(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 SCOTT B MACKENZIE		[Electronically Filed]		Date 07 / 15 / 2016

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 73 OF 97
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) THE CONSERVATIVE STRIKEFORCE			FEC IDENTIFICATION NUMBER ▼ C C00457291	
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 AMERICAN LIBERTY GROUP			<input checked="" type="checkbox"/> Memo Item	
Mailing Address 611 PENNSYLVANIA AVE SE SUITE 227			Date of Public Distribution/Dissemination 05 / 23 / 2016	
City WASHINGTON		State DC	Zip Code 20003	Amount 817.71
Purpose of Expenditure VOTER CONTACT CALLS		Category/ Type	004	
Name of Federal Candidate HILLARY RODHAM CLINTON		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <u>00</u> <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>CO</u>	
Calendar Year-To-Date Per Election for Office Sought		0.00		
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		2016 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee AMERICAN LIBERTY GROUP			<input checked="" type="checkbox"/> Memo Item	
Mailing Address 611 PENNSYLVANIA AVE SE SUITE 227			Date of Public Distribution/Dissemination 05 / 23 / 2016	
City WASHINGTON		State DC	Zip Code 20003	Amount 584.33
Purpose of Expenditure VOTER CONTACT CALLS		Category/ Type	004	
Name of Federal Candidate HILLARY RODHAM CLINTON		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <u>00</u> <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>CT</u>	
Calendar Year-To-Date Per Election for Office Sought		0.00		
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		2016 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶ 0.00				
(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 SCOTT B MACKENZIE		[Electronically Filed] Date 07 / 15 / 2016		

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 74 OF 97
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) THE CONSERVATIVE STRIKEFORCE			FEC IDENTIFICATION NUMBER ▼ C C00457291	
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 / YYYYYY				
Full Name of Payee AMERICAN LIBERTY GROUP			<input checked="" type="checkbox"/> Memo Item	
Mailing Address 611 PENNSYLVANIA AVE SE SUITE 227			Date of Public Distribution/Dissemination 05 / 23 / 2016	
City WASHINGTON		State DC	Zip Code 20003	Amount 147.79
Purpose of Expenditure VOTER CONTACT CALLS		Category/ Type	004	
Name of Federal Candidate HILLARY RODHAM CLINTON		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <u>00</u> <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>DE</u>	
Calendar Year-To-Date Per Election for Office Sought		0.00		
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		2016 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee AMERICAN LIBERTY GROUP			<input checked="" type="checkbox"/> Memo Item	
Mailing Address 611 PENNSYLVANIA AVE SE SUITE 227			Date of Public Distribution/Dissemination 05 / 23 / 2016	
City WASHINGTON		State DC	Zip Code 20003	Amount 3169.08
Purpose of Expenditure VOTER CONTACT CALLS		Category/ Type	004	
Name of Federal Candidate HILLARY RODHAM CLINTON		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <u>00</u> <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>FL</u>	
Calendar Year-To-Date Per Election for Office Sought		0.00		
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		2016 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶ 0.00				
(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>SCOTT B MACKENZIE</u>		[Electronically Filed] Date 07 / 15 / 2016		

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

 NAME OF COMMITTEE (In Full)
THE CONSERVATIVE STRIKEFORCE

FEC IDENTIFICATION NUMBER ▼

C C00457291

 Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on

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

 Full Name of Payee
AMERICAN LIBERTY GROUP
☒ Memo Item

Date of Public Distribution/Dissemination

 M M M / D D D / Y Y Y Y Y Y
 05 / 23 / 2016

 Mailing Address
 611 PENNSYLVANIA AVE SE
 SUITE 227

Amount

 City State Zip Code
 WASHINGTON DC 20003

1541.16

Transaction ID : SE.8781

Date of Disbursement or Obligation

 Purpose of Expenditure
 VOTER CONTACT CALLS

 Category/
 Type 004

 M M M / D D D / Y Y Y Y Y Y
 05 / 23 / 2016

 Name of Federal Candidate
 HILLARY RODHAM CLINTON

☐ Support
☒ Oppose

 Office Sought: ☐ House District: 00
☒ President ☐ Senate State: GA

 Calendar Year-To-Date
 Per Election for Office Sought

0.00

 Disbursement For: ☐ Primary ☒ General
 2016 ☐ Other (specify) ▶

 Full Name of Payee
AMERICAN LIBERTY GROUP
☒ Memo Item

Date of Public Distribution/Dissemination

 M M M / D D D / Y Y Y Y Y Y
 05 / 23 / 2016

 Mailing Address
 611 PENNSYLVANIA AVE SE
 SUITE 227

Amount

 City State Zip Code
 WASHINGTON DC 20003

225.16

Transaction ID : SE.8782

Date of Disbursement or Obligation

 Purpose of Expenditure
 VOTER CONTACT CALLS

 Category/
 Type 004

 M M M / D D D / Y Y Y Y Y Y
 05 / 23 / 2016

 Name of Federal Candidate
 HILLARY RODHAM CLINTON

☐ Support
☒ Oppose

 Office Sought: ☐ House District: 00
☒ President ☐ Senate State: HI

 Calendar Year-To-Date
 Per Election for Office Sought

0.00

 Disbursement For: ☐ Primary ☒ General
 2016 ☐ Other (specify) ▶

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

0.00

(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.

SCOTT B MACKENZIE

[Electronically Filed]

Date

 M M M / D D D / Y Y Y Y Y Y
 07 / 15 / 2016

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 76 OF 97
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) THE CONSERVATIVE STRIKEFORCE			FEC IDENTIFICATION NUMBER ▼ C C00457291	
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 / YYYYYY				
Full Name of Payee AMERICAN LIBERTY GROUP			<input checked="" type="checkbox"/> Memo Item	
Mailing Address 611 PENNSYLVANIA AVE SE SUITE 227			Date of Public Distribution/Dissemination 05 / 23 / 2016	
City WASHINGTON		State DC	Zip Code 20003	Amount 243.39
Purpose of Expenditure VOTER CONTACT CALLS		Category/ Type	004	
Name of Federal Candidate HILLARY RODHAM CLINTON		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <u>00</u> <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>ID</u>	
Calendar Year-To-Date Per Election for Office Sought		0.00		
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		2016 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee AMERICAN LIBERTY GROUP			<input checked="" type="checkbox"/> Memo Item	
Mailing Address 611 PENNSYLVANIA AVE SE SUITE 227			Date of Public Distribution/Dissemination 05 / 23 / 2016	
City WASHINGTON		State DC	Zip Code 20003	Amount 2055.72
Purpose of Expenditure VOTER CONTACT CALLS		Category/ Type	004	
Name of Federal Candidate HILLARY RODHAM CLINTON		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <u>00</u> <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>IL</u>	
Calendar Year-To-Date Per Election for Office Sought		0.00		
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		2016 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶ 0.00				
(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 SCOTT B MACKENZIE		[Electronically Filed]		Date 07 / 15 / 2016

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 77 OF 97
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) THE CONSERVATIVE STRIKEFORCE			FEC IDENTIFICATION NUMBER ▼ C C00457291	
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 AMERICAN LIBERTY GROUP			<input checked="" type="checkbox"/> Memo Item	
Mailing Address 611 PENNSYLVANIA AVE SE SUITE 227			Date of Public Distribution/Dissemination 05 / 23 / 2016	
City WASHINGTON		State DC	Zip Code 20003	Amount 1034.96
Purpose of Expenditure VOTER CONTACT CALLS		Category/ Type	004	
Name of Federal Candidate HILLARY RODHAM CLINTON		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <u>00</u> <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>IN</u>	
Calendar Year-To-Date Per Election for Office Sought		0.00		
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		2016 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee AMERICAN LIBERTY GROUP			<input checked="" type="checkbox"/> Memo Item	
Mailing Address 611 PENNSYLVANIA AVE SE SUITE 227			Date of Public Distribution/Dissemination 05 / 23 / 2016	
City WASHINGTON		State DC	Zip Code 20003	Amount 491.87
Purpose of Expenditure VOTER CONTACT CALLS		Category/ Type	004	
Name of Federal Candidate HILLARY RODHAM CLINTON		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <u>00</u> <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>IA</u>	
Calendar Year-To-Date Per Election for Office Sought		0.00		
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		2016 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶ 0.00				
(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 SCOTT B MACKENZIE		[Electronically Filed]		Date 07 / 15 / 2016

Full Name of Payee AMERICAN LIBERTY GROUP		<input checked="" type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination MM / DD / YYYY 05 / 23 / 2016	
Mailing Address 611 PENNSYLVANIA AVE SE SUITE 227			Amount 704.46	
City WASHINGTON	State DC	Zip Code 20003	Transaction ID : SE.8788	
Purpose of Expenditure VOTER CONTACT CALLS		Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 05 / 23 / 2016	
Name of Federal Candidate HILLARY RODHAM CLINTON		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: KY	
Calendar Year-To-Date Per Election for Office Sought		0.00	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....	▶	<div>0.00</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

NAME OF COMMITTEE (In Full) THE CONSERVATIVE STRIKEFORCE		FEC IDENTIFICATION NUMBER ▼ C C00457291	
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 AMERICAN LIBERTY GROUP		<input checked="" type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination MM / DD / YYYY 05 / 23 / 2016	
Mailing Address 611 PENNSYLVANIA AVE SE SUITE 227		Amount 727.23		Transaction ID : SE.8789 Date of Disbursement or Obligation MM / DD / YYYY 05 / 23 / 2016
City WASHINGTON	State DC	Zip Code 20003		
Purpose of Expenditure VOTER CONTACT CALLS		Category/Type 004		
Name of Federal Candidate HILLARY RODHAM CLINTON		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: LA	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		

Full Name of Payee AMERICAN LIBERTY GROUP		<input checked="" type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination MM / DD / YYYY 05 / 23 / 2016	
Mailing Address 611 PENNSYLVANIA AVE SE SUITE 227		Amount 222.79		Transaction ID : SE.8790 Date of Disbursement or Obligation MM / DD / YYYY 05 / 23 / 2016
City WASHINGTON	State DC	Zip Code 20003		
Purpose of Expenditure VOTER CONTACT CALLS		Category/Type 004		
Name of Federal Candidate HILLARY RODHAM CLINTON		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: ME	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	0.00
(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.

SCOTT B MACKENZIE
Signature

[Electronically Filed] Date MM / DD / YYYY
07 / 15 / 2016

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ITEMIZED INDEPENDENT EXPENDITURESPAGE 80 OF 97
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) THE CONSERVATIVE STRIKEFORCE		FEC IDENTIFICATION NUMBER ▼ C C00457291	
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 / YYYYYY			
Full Name of Payee AMERICAN LIBERTY GROUP		<input checked="" type="checkbox"/> Memo Item	
Mailing Address 611 PENNSYLVANIA AVE SE SUITE 227		Date of Public Distribution/Dissemination 05 / 23 / 2016	
City State Zip Code WASHINGTON DC 20003		Amount 942.88	
Purpose of Expenditure VOTER CONTACT CALLS		Category/Type 004	
Name of Federal Candidate HILLARY RODHAM CLINTON		Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: MD	
Calendar Year-To-Date Per Election for Office Sought 0.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee AMERICAN LIBERTY GROUP		<input checked="" type="checkbox"/> Memo Item	
Mailing Address 611 PENNSYLVANIA AVE SE SUITE 227		Date of Public Distribution/Dissemination 05 / 23 / 2016	
City State Zip Code WASHINGTON DC 20003		Amount 1090.33	
Purpose of Expenditure VOTER CONTACT CALLS		Category/Type 004	
Name of Federal Candidate HILLARY RODHAM CLINTON		Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: MA	
Calendar Year-To-Date Per Election for Office Sought 0.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures.....		0.00	
(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 SCOTT B MACKENZIE		Date 07 / 15 / 2016 [Electronically Filed]	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 81 OF 97
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) THE CONSERVATIVE STRIKEFORCE			FEC IDENTIFICATION NUMBER ▼ C C00457291	
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 / YYYYYY				
Full Name of Payee AMERICAN LIBERTY GROUP			<input checked="" type="checkbox"/> Memo Item	
Mailing Address 611 PENNSYLVANIA AVE SE SUITE 227			Date of Public Distribution/Dissemination 05 / 23 / 2016	
City WASHINGTON		State DC	Zip Code 20003	Amount 1594.81
Purpose of Expenditure VOTER CONTACT CALLS		Category/ Type	004	
Name of Federal Candidate HILLARY RODHAM CLINTON		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <u>00</u> <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>MI</u>	
Calendar Year-To-Date Per Election for Office Sought		0.00		
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		2016 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee AMERICAN LIBERTY GROUP			<input checked="" type="checkbox"/> Memo Item	
Mailing Address 611 PENNSYLVANIA AVE SE SUITE 227			Date of Public Distribution/Dissemination 05 / 23 / 2016	
City WASHINGTON		State DC	Zip Code 20003	Amount 855.71
Purpose of Expenditure VOTER CONTACT CALLS		Category/ Type	004	
Name of Federal Candidate HILLARY RODHAM CLINTON		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <u>00</u> <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>MN</u>	
Calendar Year-To-Date Per Election for Office Sought		0.00		
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		2016 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶ 0.00				
(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 SCOTT B MACKENZIE		[Electronically Filed]		Date 07 / 15 / 2016

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) THE CONSERVATIVE STRIKEFORCE		FEC IDENTIFICATION NUMBER ▼ C C00457291
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 AMERICAN LIBERTY GROUP		<input checked="" type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination MM / DD / YYYY 05 / 23 / 2016	
Mailing Address 611 PENNSYLVANIA AVE SE SUITE 227			Amount 468.80	
City WASHINGTON	State DC	Zip Code 20003	Transaction ID : SE.8795	
Purpose of Expenditure VOTER CONTACT CALLS		Category/Type 004	Date of Disbursement or Obligation MM / DD / YYYY 05 / 23 / 2016	
Name of Federal Candidate HILLARY RODHAM CLINTON		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: MS	
Calendar Year-To-Date Per Election for Office Sought		0.00	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee AMERICAN LIBERTY GROUP		<input checked="" type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination MM / DD / YYYY 05 / 23 / 2016	
Mailing Address 611 PENNSYLVANIA AVE SE SUITE 227			Amount 967.48	
City WASHINGTON	State DC	Zip Code 20003	Transaction ID : SE.8796	
Purpose of Expenditure VOTER CONTACT CALLS		Category/Type 004	Date of Disbursement or Obligation MM / DD / YYYY 05 / 23 / 2016	
Name of Federal Candidate HILLARY RODHAM CLINTON		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: MO	
Calendar Year-To-Date Per Election for Office Sought		0.00	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	0.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

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SCOTT B MACKENZIE

Signature

[Electronically Filed]

Date MM / DD / YYYY
07 / 15 / 2016

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) THE CONSERVATIVE STRIKEFORCE			FEC IDENTIFICATION NUMBER ▼ C C00457291		
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 <input checked="" type="checkbox"/> Memo Item AMERICAN LIBERTY GROUP			Date of Public Distribution/Dissemination 05 / 23 / 2016		
Mailing Address 611 PENNSYLVANIA AVE SE SUITE 227			Amount 163.23		
City WASHINGTON State DC Zip Code 20003		Transaction ID : SE.8797 Date of Disbursement or Obligation 05 / 23 / 2016			
Purpose of Expenditure VOTER CONTACT CALLS		Category/Type 004			
Name of Federal Candidate <input type="checkbox"/> Support HILLARY RODHAM CLINTON <input checked="" type="checkbox"/> Oppose			Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: MT		
Calendar Year-To-Date Per Election for Office Sought 0.00			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee <input checked="" type="checkbox"/> Memo Item AMERICAN LIBERTY GROUP			Date of Public Distribution/Dissemination 05 / 23 / 2016		
Mailing Address 611 PENNSYLVANIA AVE SE SUITE 227			Amount 290.88		
City WASHINGTON State DC Zip Code 20003		Transaction ID : SE.8798 Date of Disbursement or Obligation 05 / 23 / 2016			
Purpose of Expenditure VOTER CONTACT CALLS		Category/Type 004			
Name of Federal Candidate <input type="checkbox"/> Support HILLARY RODHAM CLINTON <input checked="" type="checkbox"/> Oppose			Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: NE		
Calendar Year-To-Date Per Election for Office Sought 0.00			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			0.00		
(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>SCOTT B MACKENZIE</u>			Date 07 / 15 / 2016		

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) THE CONSERVATIVE STRIKEFORCE		FEC IDENTIFICATION NUMBER ▼ C C00457291	
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 AMERICAN LIBERTY GROUP		<input checked="" type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination MM / DD / YYYY 05 / 23 / 2016	
Mailing Address 611 PENNSYLVANIA AVE SE SUITE 227		Amount 433.30		
City WASHINGTON	State DC	Zip Code 20003	Transaction ID : SE.8799	
Purpose of Expenditure VOTER CONTACT CALLS		Category/Type 004	Date of Disbursement or Obligation MM / DD / YYYY 05 / 23 / 2016	
Name of Federal Candidate HILLARY RODHAM CLINTON		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: NV	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		

Full Name of Payee AMERICAN LIBERTY GROUP		<input checked="" type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination MM / DD / YYYY 05 / 23 / 2016	
Mailing Address 611 PENNSYLVANIA AVE SE SUITE 227		Amount 218.43		
City WASHINGTON	State DC	Zip Code 20003	Transaction ID : SE.8800	
Purpose of Expenditure VOTER CONTACT CALLS		Category/Type 004	Date of Disbursement or Obligation MM / DD / YYYY 05 / 23 / 2016	
Name of Federal Candidate HILLARY RODHAM CLINTON		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: NH	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	0.00
(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.

SCOTT B MACKENZIE

Signature _____ [Electronically Filed] Date MM / DD / YYYY **07 / 15 / 2016**

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) THE CONSERVATIVE STRIKEFORCE		FEC IDENTIFICATION NUMBER ▼ C C00457291
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 AMERICAN LIBERTY GROUP		<input checked="" type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination MM / DD / YYYY 05 / 23 / 2016
Mailing Address 611 PENNSYLVANIA AVE SE SUITE 227			Amount 1426.07
City WASHINGTON	State DC	Zip Code 20003	Transaction ID : SE.8801
Purpose of Expenditure VOTER CONTACT CALLS	Category/ Type	004	Date of Disbursement or Obligation MM / DD / YYYY 05 / 23 / 2016
Name of Federal Candidate HILLARY RODHAM CLINTON		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: NJ
Calendar Year-To-Date Per Election for Office Sought		0.00	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee AMERICAN LIBERTY GROUP		<input checked="" type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination MM / DD / YYYY 05 / 23 / 2016
Mailing Address 611 PENNSYLVANIA AVE SE SUITE 227			Amount 328.79
City WASHINGTON	State DC	Zip Code 20003	Transaction ID : SE.8802
Purpose of Expenditure VOTER CONTACT CALLS	Category/ Type	004	Date of Disbursement or Obligation MM / DD / YYYY 05 / 23 / 2016
Name of Federal Candidate HILLARY RODHAM CLINTON		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: NM
Calendar Year-To-Date Per Election for Office Sought		0.00	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	0.00
(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.

SCOTT B MACKENZIE

[Electronically Filed]

Signature

Date

MM / DD / YYYY
07 / 15 / 2016

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 86 OF 97
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) THE CONSERVATIVE STRIKEFORCE			FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;">C C00457291</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: 100px;"></div>					
Full Name of Payee AMERICAN LIBERTY GROUP			<input checked="" type="checkbox"/> Memo Item 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: 100px;"></div>		
Mailing Address 611 PENNSYLVANIA AVE SE SUITE 227			Amount <div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div> 3193.50		
City WASHINGTON		State DC	Zip Code 20003		Transaction ID : SE.8803
Purpose of Expenditure VOTER CONTACT CALLS		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-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: 100px;"></div>	
Name of Federal Candidate HILLARY RODHAM CLINTON			<input type="checkbox"/> Support Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> Oppose <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: NY		
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div> 0.00			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee AMERICAN LIBERTY GROUP			<input checked="" type="checkbox"/> Memo Item 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: 100px;"></div>		
Mailing Address 611 PENNSYLVANIA AVE SE SUITE 227			Amount <div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div> 1550.30		
City WASHINGTON		State DC	Zip Code 20003		Transaction ID : SE.8804
Purpose of Expenditure VOTER CONTACT CALLS		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-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: 100px;"></div>	
Name of Federal Candidate HILLARY RODHAM CLINTON			<input type="checkbox"/> Support Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> Oppose <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: NC		
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div> 0.00			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶					<div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div> 0.00
(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 SCOTT B MACKENZIE			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: 100px;"></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) THE CONSERVATIVE STRIKEFORCE		FEC IDENTIFICATION NUMBER ▼ C C00457291
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 AMERICAN LIBERTY GROUP		<input checked="" type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination 05 / 23 / 2016	
Mailing Address 611 PENNSYLVANIA AVE SE SUITE 227			Amount 112.09	
City WASHINGTON	State DC	Zip Code 20003	Transaction ID : SE.8805	
Purpose of Expenditure VOTER CONTACT CALLS		Category/Type 004	Date of Disbursement or Obligation 05 / 23 / 2016	
Name of Federal Candidate HILLARY RODHAM CLINTON		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <u>00</u> <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>ND</u>	
Calendar Year-To-Date Per Election for Office Sought 0.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		

Full Name of Payee AMERICAN LIBERTY GROUP		<input checked="" type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination 05 / 23 / 2016	
Mailing Address 611 PENNSYLVANIA AVE SE SUITE 227			Amount 1862.31	
City WASHINGTON	State DC	Zip Code 20003	Transaction ID : SE.8806	
Purpose of Expenditure VOTER CONTACT CALLS		Category/Type 004	Date of Disbursement or Obligation 05 / 23 / 2016	
Name of Federal Candidate HILLARY RODHAM CLINTON		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <u>00</u> <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>OH</u>	
Calendar Year-To-Date Per Election for Office Sought 0.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	0.00
(b) SUBTOTAL of Unitemized Independent Expenditures▶	
(c) TOTAL Independent Expenditures.....▶	

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SCOTT B MACKENZIE

[Electronically Filed]

Signature

Date

07 / 15 / 2016

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 88 OF 97
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) THE CONSERVATIVE STRIKEFORCE		FEC IDENTIFICATION NUMBER ▼ C C00457291	
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 / YYYYYY			
Full Name of Payee AMERICAN LIBERTY GROUP		<input checked="" type="checkbox"/> Memo Item	
Mailing Address 611 PENNSYLVANIA AVE SE SUITE 227		Date of Public Distribution/Dissemination 05 / 23 / 2016	
City WASHINGTON		State DC	
Zip Code 20003		Amount 600.73	
Purpose of Expenditure VOTER CONTACT CALLS		Category/Type 004	
Name of Federal Candidate HILLARY RODHAM CLINTON		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Office Sought: <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate		District: <u>00</u> State: <u>OK</u>	
Calendar Year-To-Date Per Election for Office Sought 0.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee AMERICAN LIBERTY GROUP		<input checked="" type="checkbox"/> Memo Item	
Mailing Address 611 PENNSYLVANIA AVE SE SUITE 227		Date of Public Distribution/Dissemination 05 / 23 / 2016	
City WASHINGTON		State DC	
Zip Code 20003		Amount 632.86	
Purpose of Expenditure VOTER CONTACT CALLS		Category/Type 004	
Name of Federal Candidate HILLARY RODHAM CLINTON		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Office Sought: <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate		District: <u>00</u> State: <u>OR</u>	
Calendar Year-To-Date Per Election for Office Sought 0.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures.....		0.00	
(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 SCOTT B MACKENZIE		Date 07 / 15 / 2016	
		[Electronically Filed]	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) THE CONSERVATIVE STRIKEFORCE		FEC IDENTIFICATION NUMBER C C00457291	
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 <input type="text"/> / <input type="text"/> / <input type="text"/>			
Full Name of Payee AMERICAN LIBERTY GROUP		<input checked="" type="checkbox"/> Memo Item	
Mailing Address 611 PENNSYLVANIA AVE SE SUITE 227		Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>	
City WASHINGTON		State DC	
Zip Code 20003		Amount 2100.02	
Purpose of Expenditure VOTER CONTACT CALLS		Category/Type 004	
Name of Federal Candidate HILLARY RODHAM CLINTON		Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: PA	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee AMERICAN LIBERTY GROUP		<input checked="" type="checkbox"/> Memo Item	
Mailing Address 611 PENNSYLVANIA AVE SE SUITE 227		Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>	
City WASHINGTON		State DC	
Zip Code 20003		Amount 174.99	
Purpose of Expenditure VOTER CONTACT CALLS		Category/Type 004	
Name of Federal Candidate HILLARY RODHAM CLINTON		Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: RI	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures.....		0.00	
(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.			
SCOTT B MACKENZIE		[Electronically Filed]	
Signature		Date <input type="text"/> / <input type="text"/> / <input type="text"/>	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 90 OF 97
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) THE CONSERVATIVE STRIKEFORCE			FEC IDENTIFICATION NUMBER ▼ C C00457291	
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 AMERICAN LIBERTY GROUP			<input checked="" type="checkbox"/> Memo Item	
Mailing Address 611 PENNSYLVANIA AVE SE SUITE 227			Date of Public Distribution/Dissemination 05 / 23 / 2016	
City WASHINGTON		State DC	Zip Code 20003	Amount 757.11
Purpose of Expenditure VOTER CONTACT CALLS		Category/ Type	004	
Name of Federal Candidate HILLARY RODHAM CLINTON		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <u>00</u> <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>SC</u>	
Calendar Year-To-Date Per Election for Office Sought		0.00		
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		2016 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee AMERICAN LIBERTY GROUP			<input checked="" type="checkbox"/> Memo Item	
Mailing Address 611 PENNSYLVANIA AVE SE SUITE 227			Date of Public Distribution/Dissemination 05 / 23 / 2016	
City WASHINGTON		State DC	Zip Code 20003	Amount 130.63
Purpose of Expenditure VOTER CONTACT CALLS		Category/ Type	004	
Name of Federal Candidate HILLARY RODHAM CLINTON		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <u>00</u> <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>SD</u>	
Calendar Year-To-Date Per Election for Office Sought		0.00		
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		2016 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶ 0.00				
(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 SCOTT B MACKENZIE		[Electronically Filed]		Date 07 / 15 / 2016

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 91 OF 97
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) THE CONSERVATIVE STRIKEFORCE			FEC IDENTIFICATION NUMBER ▼ C C00457291	
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 AMERICAN LIBERTY GROUP			<input checked="" type="checkbox"/> Memo Item	
Mailing Address 611 PENNSYLVANIA AVE SE SUITE 227			Date of Public Distribution/Dissemination 05 / 23 / 2016	
City WASHINGTON		State DC	Zip Code 20003	Amount 1033.25
Purpose of Expenditure VOTER CONTACT CALLS		Category/Type 004		Transaction ID : SE.8813 Date of Disbursement or Obligation 05 / 23 / 2016
Name of Federal Candidate HILLARY RODHAM CLINTON			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Office Sought: <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate			District: <u>00</u> State: <u>TN</u>	
Calendar Year-To-Date Per Election for Office Sought 0.00			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee AMERICAN LIBERTY GROUP			<input checked="" type="checkbox"/> Memo Item	
Mailing Address 611 PENNSYLVANIA AVE SE SUITE 227			Date of Public Distribution/Dissemination 05 / 23 / 2016	
City WASHINGTON		State DC	Zip Code 20003	Amount 3937.16
Purpose of Expenditure VOTER CONTACT CALLS		Category/Type 004		Transaction ID : SE.8814 Date of Disbursement or Obligation 05 / 23 / 2016
Name of Federal Candidate HILLARY RODHAM CLINTON			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Office Sought: <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate			District: <u>00</u> State: <u>TX</u>	
Calendar Year-To-Date Per Election for Office Sought 0.00			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures.....▶			0.00	
(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 SCOTT B MACKENZIE			Date 07 / 15 / 2016	
[Electronically Filed]				

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 92 OF 97
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) THE CONSERVATIVE STRIKEFORCE			FEC IDENTIFICATION NUMBER ▼ C C00457291	
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 AMERICAN LIBERTY GROUP			<input checked="" type="checkbox"/> Memo Item	
Mailing Address 611 PENNSYLVANIA AVE SE SUITE 227			Date of Public Distribution/Dissemination 05 / 23 / 2016	
City WASHINGTON		State DC	Zip Code 20003	Amount 407.50
Purpose of Expenditure VOTER CONTACT CALLS		Category/Type 004	Transaction ID : SE.8815 Date of Disbursement or Obligation 05 / 23 / 2016	
Name of Federal Candidate HILLARY RODHAM CLINTON		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <u>00</u> <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>UT</u>	
Calendar Year-To-Date Per Election for Office Sought		0.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶
Full Name of Payee AMERICAN LIBERTY GROUP			<input checked="" type="checkbox"/> Memo Item	
Mailing Address 611 PENNSYLVANIA AVE SE SUITE 227			Date of Public Distribution/Dissemination 05 / 23 / 2016	
City WASHINGTON		State DC	Zip Code 20003	Amount 105.28
Purpose of Expenditure VOTER CONTACT CALLS		Category/Type 004	Transaction ID : SE.8816 Date of Disbursement or Obligation 05 / 23 / 2016	
Name of Federal Candidate HILLARY RODHAM CLINTON		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <u>00</u> <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>VT</u>	
Calendar Year-To-Date Per Election for Office Sought		0.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures.....			0.00	
(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>SCOTT B MACKENZIE</u>		[Electronically Filed]		Date 07 / 15 / 2016

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 93 OF 97
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) THE CONSERVATIVE STRIKEFORCE		FEC IDENTIFICATION NUMBER ▼ C C00457291
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 AMERICAN LIBERTY GROUP		<input checked="" type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination MM / DD / YYYY 05 / 23 / 2016
Mailing Address 611 PENNSYLVANIA AVE SE SUITE 227			Amount 1313.46
City WASHINGTON	State DC	Zip Code 20003	Transaction ID : SE.8817
Purpose of Expenditure VOTER CONTACT CALLS	Category/ Type 004		Date of Disbursement or Obligation MM / DD / YYYY 05 / 23 / 2016
Name of Federal Candidate HILLARY RODHAM CLINTON		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: VA
Calendar Year-To-Date Per Election for Office Sought		0.00	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee AMERICAN LIBERTY GROUP		<input checked="" type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination MM / DD / YYYY 05 / 23 / 2016
Mailing Address 611 PENNSYLVANIA AVE SE SUITE 227			Amount 1104.17
City WASHINGTON	State DC	Zip Code 20003	Transaction ID : SE.8818
Purpose of Expenditure VOTER CONTACT CALLS	Category/ Type 004		Date of Disbursement or Obligation MM / DD / YYYY 05 / 23 / 2016
Name of Federal Candidate HILLARY RODHAM CLINTON		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: WA
Calendar Year-To-Date Per Election for Office Sought		0.00	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	0.00
(b) SUBTOTAL of Unitemized Independent Expenditures▶	
(c) TOTAL Independent Expenditures.....▶	

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SCOTT B MACKENZIE

[Electronically Filed]

Signature

Date

MM / DD / YYYY
07 / 15 / 2016

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) THE CONSERVATIVE STRIKEFORCE		FEC IDENTIFICATION NUMBER ▼ C C00457291
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 AMERICAN LIBERTY GROUP		<input checked="" type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination 05 / 23 / 2016	
Mailing Address 611 PENNSYLVANIA AVE SE SUITE 227			Amount 309.39	
City WASHINGTON	State DC	Zip Code 20003	Transaction ID : SE.8819	
Purpose of Expenditure VOTER CONTACT CALLS		Category/Type 004	Date of Disbursement or Obligation 05 / 23 / 2016	
Name of Federal Candidate HILLARY RODHAM CLINTON		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <u>00</u> <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>WV</u>	
Calendar Year-To-Date Per Election for Office Sought 0.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		

Full Name of Payee AMERICAN LIBERTY GROUP		<input checked="" type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination 05 / 23 / 2016	
Mailing Address 611 PENNSYLVANIA AVE SE SUITE 227			Amount 922.66	
City WASHINGTON	State DC	Zip Code 20003	Transaction ID : SE.8820	
Purpose of Expenditure VOTER CONTACT CALLS		Category/Type 004	Date of Disbursement or Obligation 05 / 23 / 2016	
Name of Federal Candidate HILLARY RODHAM CLINTON		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <u>00</u> <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>WI</u>	
Calendar Year-To-Date Per Election for Office Sought 0.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	0.00
(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.

SCOTT B MACKENZIE

[Electronically Filed]

Signature

Date

07 / 15 / 2016

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ITEMIZED INDEPENDENT EXPENDITURESPAGE 95 OF 97
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) THE CONSERVATIVE STRIKEFORCE			FEC IDENTIFICATION NUMBER ▼ C C00457291	
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 / YYYYYY				
Full Name of Payee AMERICAN LIBERTY GROUP			<input checked="" type="checkbox"/> Memo Item	
Mailing Address 611 PENNSYLVANIA AVE SE SUITE 227			Date of Public Distribution/Dissemination 05 / 23 / 2016	
City WASHINGTON		State DC	Zip Code 20003	Amount 91.14
Purpose of Expenditure VOTER CONTACT CALLS		Category/ Type	004	
Name of Federal Candidate HILLARY RODHAM CLINTON		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <u>00</u> <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>WY</u>	
Calendar Year-To-Date Per Election for Office Sought		0.00		
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		2016 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee AMERICAN LIBERTY GROUP			<input checked="" type="checkbox"/> Memo Item	
Mailing Address 611 PENNSYLVANIA AVE SE SUITE 227			Date of Public Distribution/Dissemination 05 / 23 / 2016	
City WASHINGTON		State DC	Zip Code 20003	Amount 107.86
Purpose of Expenditure VOTER CONTACT CALLS		Category/ Type	004	
Name of Federal Candidate HILLARY RODHAM CLINTON		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <u>00</u> <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>DC</u>	
Calendar Year-To-Date Per Election for Office Sought		0.00		
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		2016 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶ 0.00				
(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 SCOTT B MACKENZIE		[Electronically Filed] Date 07 / 15 / 2016		

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ITEMIZED INDEPENDENT EXPENDITURESPAGE 96 OF 97
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) THE CONSERVATIVE STRIKEFORCE			FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;">C C00457291</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 AMERICAN LIBERTY GROUP			<input type="checkbox"/> Memo Item 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 611 PENNSYLVANIA AVE SE SUITE 227			Amount <div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div> 13520.00		
City WASHINGTON		State DC	Zip Code 20003		Transaction ID : SE.13570
Purpose of Expenditure VOTER CONTACT CALLS		Category/ Type 004		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>	
Name of Federal Candidate HILLARY RODHAM CLINTON			<input type="checkbox"/> Support Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> Oppose <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee AMERICAN LIBERTY GROUP			<input type="checkbox"/> Memo Item 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 611 PENNSYLVANIA AVE SE SUITE 227			Amount <div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div> 7694.09		
City WASHINGTON		State DC	Zip Code 20003		Transaction ID : SE.13571
Purpose of Expenditure VOTER CONTACT CALLS		Category/ Type 004		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>	
Name of Federal Candidate HILLARY RODHAM CLINTON			<input type="checkbox"/> Support Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> Oppose <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			<div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div> 21214.09		
(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 SCOTT B MACKENZIE			Date [Electronically Filed] <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>		

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) THE CONSERVATIVE STRIKEFORCE		FEC IDENTIFICATION NUMBER ▼ C C00457291
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 AMERICAN LIBERTY GROUP		<input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination MM / DD / YYYY 05 / 23 / 2016
Mailing Address 611 PENNSYLVANIA AVE SE SUITE 227			Amount 9655.00
City WASHINGTON	State DC	Zip Code 20003	Transaction ID : SE.13572
Purpose of Expenditure VOTER CONTACT CALLS	Category/Type 004		Date of Disbursement or Obligation MM / DD / YYYY 06 / 09 / 2016
Name of Federal Candidate HILLARY RODHAM CLINTON		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought		30869.09	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee AMERICAN LIBERTY GROUP		<input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination MM / DD / YYYY 05 / 23 / 2016
Mailing Address 611 PENNSYLVANIA AVE SE SUITE 227			Amount 21670.57
City WASHINGTON	State DC	Zip Code 20003	Transaction ID : SE.13573
Purpose of Expenditure VOTER CONTACT CALLS	Category/Type 004		Date of Disbursement or Obligation MM / DD / YYYY 06 / 30 / 2016
Name of Federal Candidate HILLARY RODHAM CLINTON		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought		52539.66	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	31325.57
(b) SUBTOTAL of Unitemized Independent Expenditures▶	
(c) TOTAL Independent Expenditures.....▶	61739.66

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.

SCOTT B MACKENZIE

[Electronically Filed]

Signature

Date

MM / DD / YYYY
07 / 15 / 2016