

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 CITIZENS FOR CONSERVATIVE LEADERSHIP, INC.

ADDRESS (number and street) 801 Pennsylvania Ave. N.W. Suite 610 WASHINGTON DC 20004 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER C C00515346 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) X October 15 Quarterly Report (Q3) January 31 Year-End Report (YE) July 31 Mid-Year Report (Non-election Year Only) (MY) Termination Report (TER) (b) Monthly Report Due On: Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only) Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only) Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE) (c) 12-Day PRE-Election Report for the: Primary (12P) General (12G) Runoff (12R) Convention (12C) Special (12S) Election on M M / D D / 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 / D D / Y Y Y Y Y Y in the State of

5. Covering Period 07 01 2014 through 09 30 2014

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 Mr. Michael G. Adams

Signature of Treasurer Mr. Michael G. Adams [Electronically Filed] Date 10 15 2014

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 table with 10 columns and 1 row. FEC FORM 3X Rev. 12/2004

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

CITIZENS FOR CONSERVATIVE LEADERSHIP, INC.

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2014"/>	<input type="text" value="139096.04"/>	<input type="text" value="139096.04"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="201020.47"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="80015.00"/>	<input type="text" value="185020.00"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="281035.47"/>	<input type="text" value="324116.04"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="165583.70"/>	<input type="text" value="208664.27"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="115451.77"/>	<input type="text" value="115451.77"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	<input type="text" value="0.00"/>	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

CITIZENS FOR CONSERVATIVE LEADERSHIP, INC.

Report Covering the Period: From: / / To: / /

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).....	80000.00	185000.00
(ii) Unitemized	0.00	5.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	80000.00	185005.00
(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)	80000.00	185005.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	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.).....	15.00	15.00
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))..... ▶	80015.00	185020.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	80015.00	185020.00

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	31653.70	59734.27
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	31653.70	59734.27
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	108930.00	108930.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	25000.00	40000.00
(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)).....	25000.00	40000.00
29. Other Disbursements	0.00	0.00
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)) ..	165583.70	208664.27
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	165583.70	208664.27

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)	80000.00	185005.00
34. Total Contribution Refunds (from Line 28(d))	25000.00	40000.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	55000.00	145005.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	31653.70	59734.27
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	31653.70	59734.27

**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 14
<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

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)
CITIZENS FOR CONSERVATIVE LEADERSHIP, INC.

A. Gregory Hamer
Full Name (Last, First, Middle Initial)
Mailing Address P.O. Drawer 3608

City Morgan City	State LA	Zip Code 70381
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Big Food Enterprises, LLC	Occupation Executive
---	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
30000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	16	/	2014

Transaction ID : SA11AI.4360

Amount of Each Receipt this Period
15000.00

B. Gregory Hamer
Full Name (Last, First, Middle Initial)
Mailing Address P.O. Drawer 3608

City Morgan City	State LA	Zip Code 70381
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Big Food Enterprises, LLC	Occupation Executive
---	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
35000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	18	/	2014

Transaction ID : SA11AI.4361

Amount of Each Receipt this Period
5000.00

C. V. Price Leblanc Jr.
Full Name (Last, First, Middle Initial)
Mailing Address 8811 Veterans Memorial Blvd.

City Metairie	State IL	Zip Code 70003
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Lexus of New Orleans	Occupation Auto Dealer
--	---------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	19	/	2014

Transaction ID : SA11AI.4365

Amount of Each Receipt this Period
10000.00

SUBTOTAL of Receipts This Page (optional).....	30000.00
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)	PAGE 7 OF 14
<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)
CITIZENS FOR CONSERVATIVE LEADERSHIP, INC.

Full Name (Last, First, Middle Initial) A. Patrick D. Rayes		Date of Receipt MM / DD / YYYY 07 / 01 / 2014 Transaction ID : SA11AI.4362
Mailing Address PO Box 7409		Amount of Each Receipt this Period 10000.00
City Dallas	State TX	Zip Code 75209
FEC ID number of contributing federal political committee. C		
Name of Employer Self-employed	Occupation Oil & Gas Investments	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 10000.00	

Full Name (Last, First, Middle Initial) B. Patrick D. Rayes		Date of Receipt MM / DD / YYYY 09 / 03 / 2014 Transaction ID : SA11AI.4364
Mailing Address PO Box 7409		Amount of Each Receipt this Period 10000.00
City Dallas	State TX	Zip Code 75209
FEC ID number of contributing federal political committee. C		
Name of Employer Self-employed	Occupation Oil & Gas Investments	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 20000.00	

Full Name (Last, First, Middle Initial) C. Patrick D. Rayes		Date of Receipt MM / DD / YYYY 09 / 30 / 2014 Transaction ID : SA11AI.4367
Mailing Address PO Box 7409		Amount of Each Receipt this Period 30000.00
City Dallas	State TX	Zip Code 75209
FEC ID number of contributing federal political committee. C		
Name of Employer Self-employed	Occupation Oil & Gas Investments	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 50000.00	

SUBTOTAL of Receipts This Page (optional).....▶	50000.00
TOTAL This Period (last page this line number only).....▶	80000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<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)
CITIZENS FOR CONSERVATIVE LEADERSHIP, INC.

Full Name (Last, First, Middle Initial)

A. Dinsmore & Shohl LLP

Mailing Address 225 E. Fifth St.
Suite 1900

City Cincinnati State OH Zip Code 45202

Purpose of Disbursement
Legal Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
08 / 07 / 2014

Transaction ID : SB21B.4370

Amount of Each Disbursement this Period

1683.40

Full Name (Last, First, Middle Initial)

B. Dinsmore & Shohl LLP

Mailing Address 225 E. Fifth St.
Suite 1900

City Cincinnati State OH Zip Code 45202

Purpose of Disbursement
Legal Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
09 / 08 / 2014

Transaction ID : SB21B.4375

Amount of Each Disbursement this Period

3180.00

Full Name (Last, First, Middle Initial)

C. Harris Media LLC

Mailing Address 611 S. Congress Avenue
Suite 400

City Austin State TX Zip Code 78704

Purpose of Disbursement
Web Development

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
08 / 15 / 2014

Transaction ID : SB21B.4352

Amount of Each Disbursement this Period

5000.00

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

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

9863.40

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<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)
CITIZENS FOR CONSERVATIVE LEADERSHIP, INC.

Full Name (Last, First, Middle Initial)

A. Lofstrom Consulting, LLC

Mailing Address 38 Warren St

City Charleston State SC Zip Code 29403

Purpose of Disbursement
Fundraising Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
07 / 02 / 2014

Transaction ID : **SB21B.4369**

Amount of Each Disbursement this Period

6000.00

Full Name (Last, First, Middle Initial)

B. Stripe, Inc.

Mailing Address 3180 18th St Suite 100

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Credit card processing fee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
08 / 20 / 2014

Transaction ID : **SB21B.4374**

Amount of Each Disbursement this Period

145.30

Full Name (Last, First, Middle Initial)

C. The Political Firm

Mailing Address 5555 Hilton Ave. Suite 203

City Baton Rouge State LA Zip Code 70808

Purpose of Disbursement
General Consulting

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
08 / 07 / 2014

Transaction ID : **SB21B.4371**

Amount of Each Disbursement this Period

10000.00

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

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

16145.30

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<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)
CITIZENS FOR CONSERVATIVE LEADERSHIP, INC.

Full Name (Last, First, Middle Initial)

A. The Political Firm

Mailing Address 5555 Hilton Ave.
Suite 203

City Baton Rouge State LA Zip Code 70808

Purpose of Disbursement
Graphic Design

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
08 / 07 / 2014

Transaction ID : SB21B.4372

Amount of Each Disbursement this Period

625.00

Full Name (Last, First, Middle Initial)

B. The Political Firm

Mailing Address 5555 Hilton Ave.
Suite 203

City Baton Rouge State LA Zip Code 70808

Purpose of Disbursement
General Consulting

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
09 / 17 / 2014

Transaction ID : SB21B.4376

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

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

Amount of Each Disbursement this Period

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

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

5625.00

31633.70

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input 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 checked="" 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)
CITIZENS FOR CONSERVATIVE LEADERSHIP, INC.

Full Name (Last, First, Middle Initial)

A. Brenda G. Lewis

Mailing Address 11646 N. Oak Hills Pkwy

City State Zip Code
Baton Rouge LA 70810

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	28	/	2014

Transaction ID : SB28A.4377

Amount of Each Disbursement this Period

25000.00

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

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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Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

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

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

25000.00

25000.00

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) CITIZENS FOR CONSERVATIVE LEADERSHIP, INC.	FEC IDENTIFICATION NUMBER ▼ C C00515346
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 Harris Media LLC	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 08 / 14 / 2014
Mailing Address 611 S. Congress Avenue Suite 400	Amount 55500.00
City State Zip Code Austin TX 78704	Transaction ID : SE.4350 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 08 / 15 / 2014
Purpose of Expenditure Digital Advertising	Category/Type 004
Name of Federal Candidate WILLIAM CASSIDY	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President District: 00 State: LA
Calendar Year-To-Date Per Election for Office Sought 108930.00	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee Red Print Strategies	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 08 / 14 / 2014
Mailing Address 311 S. Fillmore St.	Amount 4983.00
City State Zip Code Arlington VA 22204	Transaction ID : SE.4355 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 08 / 12 / 2014
Purpose of Expenditure Creative Commission	Category/Type 004
Name of Federal Candidate WILLIAM CASSIDY	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President District: 00 State: LA
Calendar Year-To-Date Per Election for Office Sought 50938.50	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	60483.00
(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.

Mr. Michael G. Adams **[Electronically Filed]** Date M M / D D / Y Y Y Y Y Y
10 / 15 / 2014

Signature _____

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) CITIZENS FOR CONSERVATIVE LEADERSHIP, INC.		FEC IDENTIFICATION NUMBER C C00515346
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 Smart Media Group, LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 08 / 14 / 2014
Mailing Address 1427 Leslie Avenue Suite 100		Amount 42455.50
City Alexandria	State VA	Zip Code 22301
Purpose of Expenditure TV Media Buy	Category/Type 004	Transaction ID : SE.4345 Date of Disbursement or Obligation MM / DD / YYYY 08 / 12 / 2014
Name of Federal Candidate WILLIAM CASSIDY	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: LA
Calendar Year-To-Date Per Election for Office Sought	45955.50	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee Smart Media Group, LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 08 / 14 / 2014
Mailing Address 1427 Leslie Avenue Suite 100		Amount 2491.50
City Alexandria	State VA	Zip Code 22301
Purpose of Expenditure Media Commission	Category/Type 004	Transaction ID : SE.4356 Date of Disbursement or Obligation MM / DD / YYYY 08 / 12 / 2014
Name of Federal Candidate WILLIAM CASSIDY	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: LA
Calendar Year-To-Date Per Election for Office Sought	53430.00	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	44947.00
(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.

Mr. Michael G. Adams
Signature

[Electronically Filed]

Date MM / DD / YYYY
10 / 15 / 2014

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) CITIZENS FOR CONSERVATIVE LEADERSHIP, INC.		FEC IDENTIFICATION NUMBER C C00515346
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 The Political Firm		Date of Public Distribution/Dissemination MM / DD / YYYY 08 / 14 / 2014
Mailing Address 5555 Hilton Ave. Suite 203		Amount 3500.00
City Baton Rouge	State LA	Zip Code 70808
Purpose of Expenditure Media Production	Category/Type 004	Transaction ID : SE.4343 Date of Disbursement or Obligation MM / DD / YYYY 08 / 07 / 2014
Name of Federal Candidate WILLIAM CASSIDY	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <u>00</u> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>LA</u>
Calendar Year-To-Date Per Election for Office Sought	3500.00	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee		Date of Public Distribution/Dissemination MM / DD / YYYY
Mailing Address		Amount
City	State	Zip Code
Purpose of Expenditure	Category/Type	Date of Disbursement or Obligation MM / DD / YYYY
Name of Federal Candidate	<input type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	3500.00
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	108930.00

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.

Mr. Michael G. Adams
Signature

[Electronically Filed] Date **10 / 15 / 2014**