

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) CONSERVATIVE MAJORITY FUND
FEC IDENTIFICATION NUMBER C C00524454
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee INFOCISION MANAGEMENT CORP
Mailing Address 325 SPRINGSIDE DR
City AKRON State OH Zip Code 44333
Purpose of Expenditure VOTER CONTACT Category/Type 004
Name of Federal Candidate HILLARY CLINTON Support Oppose
Calendar Year-To-Date Per Election for Office Sought 773.30

Date of Public Distribution/Dissemination 11 / 16 / 2015
Amount 773.30
Transaction ID : SE.10704
Date of Disbursement or Obligation 11 / 16 / 2015
Office Sought: House District: 00
President Senate State: AL
Disbursement For: Primary General 2016 Other (specify)

Full Name of Payee INFOCISION MANAGEMENT CORP
Mailing Address 325 SPRINGSIDE DR
City AKRON State OH Zip Code 44333
Purpose of Expenditure VOTER CONTACT Category/Type 004
Name of Federal Candidate HILLARY CLINTON Support Oppose
Calendar Year-To-Date Per Election for Office Sought 112.40

Date of Public Distribution/Dissemination 11 / 16 / 2015
Amount 112.40
Transaction ID : SE.10705
Date of Disbursement or Obligation 11 / 16 / 2015
Office Sought: House District: 00
President Senate State: AK
Disbursement For: Primary General 2016 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 885.70
(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 11 / 18 / 2015

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FEC IDENTIFICATION NUMBER C C00524454
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Full Name of Payee INFOCISION MANAGEMENT CORP
Mailing Address 325 SPRINGSIDE DR
City AKRON State OH Zip Code 44333
Purpose of Expenditure VOTER CONTACT Category/Type 004
Name of Federal Candidate HILLARY CLINTON Support Oppose Office Sought: President Senate State: AZ
Calendar Year-To-Date Per Election for Office Sought 1021.93
Date of Public Distribution/Dissemination 11/16/2015
Amount 1021.93
Transaction ID: SE.10706
Date of Disbursement or Obligation 11/16/2015
Disbursement For: Primary General 2016 Other (specify)

Full Name of Payee INFOCISION MANAGEMENT CORP
Mailing Address 325 SPRINGSIDE DR
City AKRON State OH Zip Code 44333
Purpose of Expenditure VOTER CONTACT Category/Type 004
Name of Federal Candidate HILLARY CLINTON Support Oppose Office Sought: President Senate State: AR
Calendar Year-To-Date Per Election for Office Sought 468.64
Date of Public Distribution/Dissemination 11/16/2015
Amount 468.64
Transaction ID: SE.10707
Date of Disbursement or Obligation 11/16/2015
Disbursement For: Primary General 2016 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 1490.57
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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FEC IDENTIFICATION NUMBER C C00524454
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Full Name of Payee INFOCISION MANAGEMENT CORP
Mailing Address 325 SPRINGSIDE DR
City AKRON State OH Zip Code 44333
Purpose of Expenditure VOTER CONTACT Category/Type 004
Name of Federal Candidate HILLARY CLINTON Support Oppose
Calendar Year-To-Date Per Election for Office Sought 5979.19

Date of Public Distribution/Dissemination 11 / 16 / 2015
Amount 5979.19
Transaction ID : SE.10708
Date of Disbursement or Obligation 11 / 16 / 2015
Office Sought: House District: 00
President Senate State: CA
Disbursement For: Primary General 2016 Other (specify)

Full Name of Payee INFOCISION MANAGEMENT CORP
Mailing Address 325 SPRINGSIDE DR
City AKRON State OH Zip Code 44333
Purpose of Expenditure VOTER CONTACT Category/Type 004
Name of Federal Candidate HILLARY CLINTON Support Oppose
Calendar Year-To-Date Per Election for Office Sought 817.71

Date of Public Distribution/Dissemination 11 / 16 / 2015
Amount 817.71
Transaction ID : SE.10709
Date of Disbursement or Obligation 11 / 16 / 2015
Office Sought: House District: 00
President Senate State: CO
Disbursement For: Primary General 2016 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 6796.90
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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Mailing Address 325 SPRINGSIDE DR
City AKRON State OH Zip Code 44333
Purpose of Expenditure VOTER CONTACT Category/Type 004
Name of Federal Candidate HILLARY CLINTON Support Oppose
Calendar Year-To-Date Per Election for Office Sought 584.33

Date of Public Distribution/Dissemination 11 / 16 / 2015
Amount 584.33
Transaction ID : SE.10710
Date of Disbursement or Obligation 11 / 16 / 2015
Office Sought: House District: 00
President Senate State: CT
Disbursement For: Primary General 2016 Other (specify)

Full Name of Payee INFOCISION MANAGEMENT CORP
Mailing Address 325 SPRINGSIDE DR
City AKRON State OH Zip Code 44333
Purpose of Expenditure VOTER CONTACT Category/Type 004
Name of Federal Candidate HILLARY CLINTON Support Oppose
Calendar Year-To-Date Per Election for Office Sought 147.79

Date of Public Distribution/Dissemination 11 / 16 / 2015
Amount 147.79
Transaction ID : SE.10711
Date of Disbursement or Obligation 11 / 16 / 2015
Office Sought: House District: 00
President Senate State: DE
Disbursement For: Primary General 2016 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 732.12
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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Full Name of Payee INFOCISION MANAGEMENT CORP
Mailing Address 325 SPRINGSIDE DR
City AKRON State OH Zip Code 44333
Purpose of Expenditure VOTER CONTACT Category/Type 004
Name of Federal Candidate HILLARY CLINTON Support Oppose
Calendar Year-To-Date Per Election for Office Sought 3169.08

Date of Public Distribution/Dissemination 11 / 16 / 2015
Amount 3169.08
Transaction ID : SE.10712
Date of Disbursement or Obligation 11 / 16 / 2015
Office Sought: House District: 00
President Senate State: FL
Disbursement For: Primary General 2016 Other (specify)

Full Name of Payee INFOCISION MANAGEMENT CORP
Mailing Address 325 SPRINGSIDE DR
City AKRON State OH Zip Code 44333
Purpose of Expenditure VOTER CONTACT Category/Type 004
Name of Federal Candidate HILLARY CLINTON Support Oppose
Calendar Year-To-Date Per Election for Office Sought 1541.16

Date of Public Distribution/Dissemination 11 / 16 / 2015
Amount 1541.16
Transaction ID : SE.10713
Date of Disbursement or Obligation 11 / 16 / 2015
Office Sought: House District: 00
President Senate State: GA
Disbursement For: Primary General 2016 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 4710.24
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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FEC IDENTIFICATION NUMBER C C00524454
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Full Name of Payee INFOCISION MANAGEMENT CORP
Mailing Address 325 SPRINGSIDE DR
City AKRON State OH Zip Code 44333
Purpose of Expenditure VOTER CONTACT Category/Type 004
Name of Federal Candidate HILLARY CLINTON Support Oppose
Calendar Year-To-Date Per Election for Office Sought 225.16

Date of Public Distribution/Dissemination 11 / 16 / 2015
Amount 225.16
Transaction ID : SE.10714
Date of Disbursement or Obligation 11 / 16 / 2015
Office Sought: House District: 00
President Senate State: HI
Disbursement For: Primary General 2016 Other (specify)

Full Name of Payee INFOCISION MANAGEMENT CORP
Mailing Address 325 SPRINGSIDE DR
City AKRON State OH Zip Code 44333
Purpose of Expenditure VOTER CONTACT Category/Type 004
Name of Federal Candidate HILLARY CLINTON Support Oppose
Calendar Year-To-Date Per Election for Office Sought 243.39

Date of Public Distribution/Dissemination 11 / 16 / 2015
Amount 243.39
Transaction ID : SE.10715
Date of Disbursement or Obligation 11 / 16 / 2015
Office Sought: House District: 00
President Senate State: ID
Disbursement For: Primary General 2016 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 468.55
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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Mailing Address 325 SPRINGSIDE DR
City AKRON State OH Zip Code 44333
Purpose of Expenditure VOTER CONTACT Category/Type 004
Name of Federal Candidate HILLARY CLINTON Support Oppose
Calendar Year-To-Date Per Election for Office Sought 2055.72

Date of Public Distribution/Dissemination 11 / 16 / 2015
Amount 2055.72
Transaction ID : SE.10716
Date of Disbursement or Obligation 11 / 16 / 2015
Office Sought: House District: 00
President Senate State: IL
Disbursement For: Primary General 2016 Other (specify)

Full Name of Payee INFOCISION MANAGEMENT CORP
Mailing Address 325 SPRINGSIDE DR
City AKRON State OH Zip Code 44333
Purpose of Expenditure VOTER CONTACT Category/Type 004
Name of Federal Candidate HILLARY CLINTON Support Oppose
Calendar Year-To-Date Per Election for Office Sought 1034.96

Date of Public Distribution/Dissemination 11 / 16 / 2015
Amount 1034.96
Transaction ID : SE.10717
Date of Disbursement or Obligation 11 / 16 / 2015
Office Sought: House District: 00
President Senate State: IN
Disbursement For: Primary General 2016 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 3090.68
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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Full Name of Payee INFOCISION MANAGEMENT CORP
Mailing Address 325 SPRINGSIDE DR
City AKRON State OH Zip Code 44333
Purpose of Expenditure VOTER CONTACT Category/Type 004
Name of Federal Candidate HILLARY CLINTON Support Oppose
Calendar Year-To-Date Per Election for Office Sought 491.87

Date of Public Distribution/Dissemination 11 / 16 / 2015
Amount 491.87
Transaction ID : SE.10718
Date of Disbursement or Obligation 11 / 16 / 2015
Office Sought: House District: 00
President Senate State: IA
Disbursement For: Primary General 2016 Other (specify)

Full Name of Payee INFOCISION MANAGEMENT CORP
Mailing Address 325 SPRINGSIDE DR
City AKRON State OH Zip Code 44333
Purpose of Expenditure VOTER CONTACT Category/Type 004
Name of Federal Candidate HILLARY CLINTON Support Oppose
Calendar Year-To-Date Per Election for Office Sought 451.77

Date of Public Distribution/Dissemination 11 / 16 / 2015
Amount 451.77
Transaction ID : SE.10719
Date of Disbursement or Obligation 11 / 16 / 2015
Office Sought: House District: 00
President Senate State: KS
Disbursement For: Primary General 2016 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 943.64
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.
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FEC IDENTIFICATION NUMBER C C00524454
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Full Name of Payee INFOCISION MANAGEMENT CORP
Mailing Address 325 SPRINGSIDE DR
City AKRON State OH Zip Code 44333
Purpose of Expenditure VOTER CONTACT Category/Type 004
Name of Federal Candidate HILLARY CLINTON Support Oppose
Calendar Year-To-Date Per Election for Office Sought 704.46

Date of Public Distribution/Dissemination 11 / 16 / 2015
Amount 704.46
Transaction ID : SE.10720
Date of Disbursement or Obligation 11 / 16 / 2015
Office Sought: House District: 00
President Senate State: KY
Disbursement For: Primary General 2016 Other (specify)

Full Name of Payee INFOCISION MANAGEMENT CORP
Mailing Address 325 SPRINGSIDE DR
City AKRON State OH Zip Code 44333
Purpose of Expenditure VOTER CONTACT Category/Type 004
Name of Federal Candidate HILLARY CLINTON Support Oppose
Calendar Year-To-Date Per Election for Office Sought 727.23

Date of Public Distribution/Dissemination 11 / 16 / 2015
Amount 727.23
Transaction ID : SE.10721
Date of Disbursement or Obligation 11 / 16 / 2015
Office Sought: House District: 00
President Senate State: LA
Disbursement For: Primary General 2016 Other (specify)

Table with 2 columns: Description and Amount. (a) SUBTOTAL of Itemized Independent Expenditures 1431.69, (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 11 / 18 / 2015

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

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FEC IDENTIFICATION NUMBER C C00524454
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Full Name of Payee INFOCISION MANAGEMENT CORP
Mailing Address 325 SPRINGSIDE DR
City AKRON State OH Zip Code 44333
Purpose of Expenditure VOTER CONTACT Category/Type 004
Name of Federal Candidate HILLARY CLINTON Support Oppose
Calendar Year-To-Date Per Election for Office Sought 222.79

Date of Public Distribution/Dissemination 11 / 16 / 2015
Amount 222.79
Transaction ID : SE.10722
Date of Disbursement or Obligation 11 / 16 / 2015
Office Sought: House District: 00
President Senate State: ME
Disbursement For: Primary General 2016 Other (specify)

Full Name of Payee INFOCISION MANAGEMENT CORP
Mailing Address 325 SPRINGSIDE DR
City AKRON State OH Zip Code 44333
Purpose of Expenditure VOTER CONTACT Category/Type 004
Name of Federal Candidate HILLARY CLINTON Support Oppose
Calendar Year-To-Date Per Election for Office Sought 942.88

Date of Public Distribution/Dissemination 11 / 16 / 2015
Amount 942.88
Transaction ID : SE.10723
Date of Disbursement or Obligation 11 / 16 / 2015
Office Sought: House District: 00
President Senate State: MD
Disbursement For: Primary General 2016 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 1165.67
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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SCOTT B MACKENZIE [Electronically Filed] Date 11 / 18 / 2015
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24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) CONSERVATIVE MAJORITY FUND
FEC IDENTIFICATION NUMBER C C00524454
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Full Name of Payee INFOCISION MANAGEMENT CORP
Mailing Address 325 SPRINGSIDE DR
City AKRON State OH Zip Code 44333
Purpose of Expenditure VOTER CONTACT Category/Type 004
Name of Federal Candidate HILLARY CLINTON Support Oppose
Calendar Year-To-Date Per Election for Office Sought 1090.33

Date of Public Distribution/Dissemination 11 / 16 / 2015
Amount 1090.33
Transaction ID : SE.10724
Date of Disbursement or Obligation 11 / 16 / 2015
Office Sought: House District: 00
President Senate State: MA
Disbursement For: Primary General 2016 Other (specify)

Full Name of Payee INFOCISION MANAGEMENT CORP
Mailing Address 325 SPRINGSIDE DR
City AKRON State OH Zip Code 44333
Purpose of Expenditure VOTER CONTACT Category/Type 004
Name of Federal Candidate HILLARY CLINTON Support Oppose
Calendar Year-To-Date Per Election for Office Sought 1594.81

Date of Public Distribution/Dissemination 11 / 16 / 2015
Amount 1594.81
Transaction ID : SE.10725
Date of Disbursement or Obligation 11 / 16 / 2015
Office Sought: House District: 00
President Senate State: MI
Disbursement For: Primary General 2016 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 2685.14
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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SCOTT B MACKENZIE [Electronically Filed] Date 11 / 18 / 2015
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24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) CONSERVATIVE MAJORITY FUND
FEC IDENTIFICATION NUMBER C C00524454
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee INFOCISION MANAGEMENT CORP
Mailing Address 325 SPRINGSIDE DR
City AKRON State OH Zip Code 44333
Purpose of Expenditure VOTER CONTACT Category/Type 004
Name of Federal Candidate HILLARY CLINTON Support Oppose
Calendar Year-To-Date Per Election for Office Sought 855.71

Date of Public Distribution/Dissemination 11 / 16 / 2015
Amount 855.71
Transaction ID : SE.10726
Date of Disbursement or Obligation 11 / 16 / 2015
Office Sought: House District: 00
President Senate State: MN
Disbursement For: Primary General 2016 Other (specify)

Full Name of Payee INFOCISION MANAGEMENT CORP
Mailing Address 325 SPRINGSIDE DR
City AKRON State OH Zip Code 44333
Purpose of Expenditure VOTER CONTACT Category/Type 004
Name of Federal Candidate HILLARY CLINTON Support Oppose
Calendar Year-To-Date Per Election for Office Sought 468.80

Date of Public Distribution/Dissemination 11 / 16 / 2015
Amount 468.80
Transaction ID : SE.10727
Date of Disbursement or Obligation 11 / 16 / 2015
Office Sought: House District: 00
President Senate State: MS
Disbursement For: Primary General 2016 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 1324.51
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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FEC IDENTIFICATION NUMBER C C00524454
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Full Name of Payee INFOCISION MANAGEMENT CORP
Mailing Address 325 SPRINGSIDE DR
City AKRON State OH Zip Code 44333
Purpose of Expenditure VOTER CONTACT Category/Type 004
Name of Federal Candidate HILLARY CLINTON Support Oppose
Calendar Year-To-Date Per Election for Office Sought 967.48

Date of Public Distribution/Dissemination 11 / 16 / 2015
Amount 967.48
Transaction ID : SE.10728
Date of Disbursement or Obligation 11 / 16 / 2015
Office Sought: House District: 00
President Senate State: MO
Disbursement For: Primary General 2016 Other (specify)

Full Name of Payee INFOCISION MANAGEMENT CORP
Mailing Address 325 SPRINGSIDE DR
City AKRON State OH Zip Code 44333
Purpose of Expenditure VOTER CONTACT Category/Type 004
Name of Federal Candidate HILLARY CLINTON Support Oppose
Calendar Year-To-Date Per Election for Office Sought 163.23

Date of Public Distribution/Dissemination 11 / 16 / 2015
Amount 163.23
Transaction ID : SE.10729
Date of Disbursement or Obligation 11 / 16 / 2015
Office Sought: House District: 00
President Senate State: MT
Disbursement For: Primary General 2016 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 1130.71
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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FEC IDENTIFICATION NUMBER C C00524454
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Full Name of Payee INFOCISION MANAGEMENT CORP
Mailing Address 325 SPRINGSIDE DR
City AKRON State OH Zip Code 44333
Purpose of Expenditure VOTER CONTACT Category/Type 004
Name of Federal Candidate HILLARY CLINTON Support Oppose
Calendar Year-To-Date Per Election for Office Sought 290.88

Date of Public Distribution/Dissemination 11 / 16 / 2015
Amount 290.88
Transaction ID : SE.10730
Date of Disbursement or Obligation 11 / 16 / 2015
Office Sought: House District: 00
President Senate State: NE
Disbursement For: Primary General 2016 Other (specify)

Full Name of Payee INFOCISION MANAGEMENT CORP
Mailing Address 325 SPRINGSIDE DR
City AKRON State OH Zip Code 44333
Purpose of Expenditure VOTER CONTACT Category/Type 004
Name of Federal Candidate HILLARY CLINTON Support Oppose
Calendar Year-To-Date Per Election for Office Sought 433.30

Date of Public Distribution/Dissemination 11 / 16 / 2015
Amount 433.30
Transaction ID : SE.10731
Date of Disbursement or Obligation 11 / 16 / 2015
Office Sought: House District: 00
President Senate State: NV
Disbursement For: Primary General 2016 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 724.18
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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Full Name of Payee INFOCISION MANAGEMENT CORP
Mailing Address 325 SPRINGSIDE DR
City AKRON State OH Zip Code 44333
Purpose of Expenditure VOTER CONTACT Category/Type 004
Name of Federal Candidate HILLARY CLINTON Support Oppose
Calendar Year-To-Date Per Election for Office Sought 218.43

Date of Public Distribution/Dissemination 11 / 16 / 2015
Amount 218.43
Transaction ID : SE.10732
Date of Disbursement or Obligation 11 / 16 / 2015
Office Sought: House District: 00
President Senate State: NH
Disbursement For: Primary General 2016 Other (specify)

Full Name of Payee INFOCISION MANAGEMENT CORP
Mailing Address 325 SPRINGSIDE DR
City AKRON State OH Zip Code 44333
Purpose of Expenditure VOTER CONTACT Category/Type 004
Name of Federal Candidate HILLARY CLINTON Support Oppose
Calendar Year-To-Date Per Election for Office Sought 1426.07

Date of Public Distribution/Dissemination 11 / 16 / 2015
Amount 1426.07
Transaction ID : SE.10733
Date of Disbursement or Obligation 11 / 16 / 2015
Office Sought: House District: 00
President Senate State: NJ
Disbursement For: Primary General 2016 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 1644.50
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.
SCOTT B MACKENZIE [Electronically Filed] Date 11 / 18 / 2015
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) CONSERVATIVE MAJORITY FUND
FEC IDENTIFICATION NUMBER C C00524454
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee INFOCISION MANAGEMENT CORP
Mailing Address 325 SPRINGSIDE DR
City AKRON State OH Zip Code 44333
Purpose of Expenditure VOTER CONTACT Category/Type 004
Name of Federal Candidate HILLARY CLINTON Support Oppose
Calendar Year-To-Date Per Election for Office Sought 328.79

Date of Public Distribution/Dissemination 11 / 16 / 2015
Amount 328.79
Transaction ID : SE.10734
Date of Disbursement or Obligation 11 / 16 / 2015
Office Sought: House District: 00
President Senate State: NM
Disbursement For: Primary General 2016 Other (specify)

Full Name of Payee INFOCISION MANAGEMENT CORP
Mailing Address 325 SPRINGSIDE DR
City AKRON State OH Zip Code 44333
Purpose of Expenditure VOTER CONTACT Category/Type 004
Name of Federal Candidate HILLARY CLINTON Support Oppose
Calendar Year-To-Date Per Election for Office Sought 3193.50

Date of Public Distribution/Dissemination 11 / 16 / 2015
Amount 3193.50
Transaction ID : SE.10735
Date of Disbursement or Obligation 11 / 16 / 2015
Office Sought: House District: 00
President Senate State: NY
Disbursement For: Primary General 2016 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 3522.29
(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 11 / 18 / 2015
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) CONSERVATIVE MAJORITY FUND
FEC IDENTIFICATION NUMBER C C00524454
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee INFOCISION MANAGEMENT CORP
Mailing Address 325 SPRINGSIDE DR
City AKRON State OH Zip Code 44333
Purpose of Expenditure VOTER CONTACT Category/Type 004

Date of Public Distribution/Dissemination 11 / 16 / 2015
Amount 1550.30
Transaction ID : SE.10736
Date of Disbursement or Obligation 11 / 16 / 2015

Name of Federal Candidate HILLARY CLINTON
Support Oppose
Office Sought: President
Disbursement For: General

Office Sought: House District: 00
Senate State: NC
Disbursement For: Primary General 2016 Other (specify)

Full Name of Payee INFOCISION MANAGEMENT CORP
Mailing Address 325 SPRINGSIDE DR
City AKRON State OH Zip Code 44333
Purpose of Expenditure VOTER CONTACT Category/Type 004

Date of Public Distribution/Dissemination 11 / 16 / 2015
Amount 112.09
Transaction ID : SE.10737
Date of Disbursement or Obligation 11 / 16 / 2015

Name of Federal Candidate HILLARY CLINTON
Support Oppose
Office Sought: President
Disbursement For: General

Office Sought: House District: 00
Senate State: ND
Disbursement For: Primary General 2016 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 1662.39
(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 11 / 18 / 2015

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) CONSERVATIVE MAJORITY FUND
FEC IDENTIFICATION NUMBER C C00524454
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee INFOCISION MANAGEMENT CORP
Mailing Address 325 SPRINGSIDE DR
City AKRON State OH Zip Code 44333
Purpose of Expenditure VOTER CONTACT Category/Type 004
Name of Federal Candidate HILLARY CLINTON Support Oppose
Calendar Year-To-Date Per Election for Office Sought 1862.31

Date of Public Distribution/Dissemination 11 / 16 / 2015
Amount 1862.31
Transaction ID : SE.10738
Date of Disbursement or Obligation 11 / 16 / 2015
Office Sought: House District: 00
President Senate State: OH
Disbursement For: Primary General 2016 Other (specify)

Full Name of Payee INFOCISION MANAGEMENT CORP
Mailing Address 325 SPRINGSIDE DR
City AKRON State OH Zip Code 44333
Purpose of Expenditure VOTER CONTACT Category/Type 004
Name of Federal Candidate HILLARY CLINTON Support Oppose
Calendar Year-To-Date Per Election for Office Sought 600.73

Date of Public Distribution/Dissemination 11 / 16 / 2015
Amount 600.73
Transaction ID : SE.10739
Date of Disbursement or Obligation 11 / 16 / 2015
Office Sought: House District: 00
President Senate State: OK
Disbursement For: Primary General 2016 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 2463.04
(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 11 / 18 / 2015
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) CONSERVATIVE MAJORITY FUND
FEC IDENTIFICATION NUMBER C C00524454
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee INFOCISION MANAGEMENT CORP
Mailing Address 325 SPRINGSIDE DR
City AKRON State OH Zip Code 44333
Purpose of Expenditure VOTER CONTACT Category/Type 004
Name of Federal Candidate HILLARY CLINTON Support Oppose
Calendar Year-To-Date Per Election for Office Sought 632.86

Date of Public Distribution/Dissemination 11 / 16 / 2015
Amount 632.86
Transaction ID : SE.10740
Date of Disbursement or Obligation 11 / 16 / 2015
Office Sought: House District: 00
President Senate State: OR
Disbursement For: Primary General 2016 Other (specify)

Full Name of Payee INFOCISION MANAGEMENT CORP
Mailing Address 325 SPRINGSIDE DR
City AKRON State OH Zip Code 44333
Purpose of Expenditure VOTER CONTACT Category/Type 004
Name of Federal Candidate HILLARY CLINTON Support Oppose
Calendar Year-To-Date Per Election for Office Sought 2100.02

Date of Public Distribution/Dissemination 11 / 16 / 2015
Amount 2100.02
Transaction ID : SE.10741
Date of Disbursement or Obligation 11 / 16 / 2015
Office Sought: House District: 00
President Senate State: PA
Disbursement For: Primary General 2016 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 2732.88
(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 11 / 18 / 2015
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) CONSERVATIVE MAJORITY FUND
FEC IDENTIFICATION NUMBER C C00524454
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee INFOCISION MANAGEMENT CORP
Mailing Address 325 SPRINGSIDE DR
City AKRON State OH Zip Code 44333
Purpose of Expenditure VOTER CONTACT Category/Type 004
Name of Federal Candidate HILLARY CLINTON Support Oppose

Date of Public Distribution/Dissemination 11/16/2015
Amount 174.99
Transaction ID: SE.10742
Date of Disbursement or Obligation 11/16/2015
Office Sought: President
Disbursement For: General

Full Name of Payee INFOCISION MANAGEMENT CORP
Mailing Address 325 SPRINGSIDE DR
City AKRON State OH Zip Code 44333
Purpose of Expenditure VOTER CONTACT Category/Type 004
Name of Federal Candidate HILLARY CLINTON Support Oppose

Date of Public Distribution/Dissemination 11/16/2015
Amount 757.11
Transaction ID: SE.10743
Date of Disbursement or Obligation 11/16/2015
Office Sought: President
Disbursement For: General

(a) SUBTOTAL of Itemized Independent Expenditures 932.10
(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 11/18/2015

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) CONSERVATIVE MAJORITY FUND
FEC IDENTIFICATION NUMBER C C00524454
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee INFOCISION MANAGEMENT CORP
Mailing Address 325 SPRINGSIDE DR
City AKRON State OH Zip Code 44333
Purpose of Expenditure VOTER CONTACT Category/Type 004
Name of Federal Candidate HILLARY CLINTON Support Oppose
Calendar Year-To-Date Per Election for Office Sought 130.63

Date of Public Distribution/Dissemination 11 / 16 / 2015
Amount 130.63
Transaction ID : SE.10744
Date of Disbursement or Obligation 11 / 16 / 2015
Office Sought: House District: 00
President Senate State: SD
Disbursement For: Primary General 2016 Other (specify)

Full Name of Payee INFOCISION MANAGEMENT CORP
Mailing Address 325 SPRINGSIDE DR
City AKRON State OH Zip Code 44333
Purpose of Expenditure VOTER CONTACT Category/Type 004
Name of Federal Candidate HILLARY CLINTON Support Oppose
Calendar Year-To-Date Per Election for Office Sought 1033.25

Date of Public Distribution/Dissemination 11 / 16 / 2015
Amount 1033.25
Transaction ID : SE.10745
Date of Disbursement or Obligation 11 / 16 / 2015
Office Sought: House District: 00
President Senate State: TN
Disbursement For: Primary General 2016 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 1163.88
(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 11 / 18 / 2015
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) CONSERVATIVE MAJORITY FUND
FEC IDENTIFICATION NUMBER C C00524454
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee INFOCISION MANAGEMENT CORP
Mailing Address 325 SPRINGSIDE DR
City AKRON State OH Zip Code 44333
Purpose of Expenditure VOTER CONTACT Category/Type 004
Name of Federal Candidate HILLARY CLINTON Support Oppose
Calendar Year-To-Date Per Election for Office Sought 3937.16

Date of Public Distribution/Dissemination 11 / 16 / 2015
Amount 3937.16
Transaction ID : SE.10746
Date of Disbursement or Obligation 11 / 16 / 2015
Office Sought: House District: 00
President Senate State: TX
Disbursement For: Primary General 2016 Other (specify)

Full Name of Payee INFOCISION MANAGEMENT CORP
Mailing Address 325 SPRINGSIDE DR
City AKRON State OH Zip Code 44333
Purpose of Expenditure VOTER CONTACT Category/Type 004
Name of Federal Candidate HILLARY CLINTON Support Oppose
Calendar Year-To-Date Per Election for Office Sought 407.50

Date of Public Distribution/Dissemination 11 / 16 / 2015
Amount 407.50
Transaction ID : SE.10747
Date of Disbursement or Obligation 11 / 16 / 2015
Office Sought: House District: 00
President Senate State: UT
Disbursement For: Primary General 2016 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 4344.66
(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 11 / 18 / 2015
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) CONSERVATIVE MAJORITY FUND
FEC IDENTIFICATION NUMBER C C00524454
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee INFOCISION MANAGEMENT CORP
Mailing Address 325 SPRINGSIDE DR
City AKRON State OH Zip Code 44333
Purpose of Expenditure VOTER CONTACT Category/Type 004
Name of Federal Candidate HILLARY CLINTON Support Oppose
Calendar Year-To-Date Per Election for Office Sought 105.28

Date of Public Distribution/Dissemination 11 / 16 / 2015
Amount 105.28
Transaction ID : SE.10748
Date of Disbursement or Obligation 11 / 16 / 2015
Office Sought: House District: 00
President Senate State: VT
Disbursement For: Primary General 2016 Other (specify)

Full Name of Payee INFOCISION MANAGEMENT CORP
Mailing Address 325 SPRINGSIDE DR
City AKRON State OH Zip Code 44333
Purpose of Expenditure VOTER CONTACT Category/Type 004
Name of Federal Candidate HILLARY CLINTON Support Oppose
Calendar Year-To-Date Per Election for Office Sought 1313.46

Date of Public Distribution/Dissemination 11 / 16 / 2015
Amount 1313.46
Transaction ID : SE.10749
Date of Disbursement or Obligation 11 / 16 / 2015
Office Sought: House District: 00
President Senate State: VA
Disbursement For: Primary General 2016 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 1418.74
(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 11 / 18 / 2015
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) CONSERVATIVE MAJORITY FUND
FEC IDENTIFICATION NUMBER C C00524454
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee INFOCISION MANAGEMENT CORP
Mailing Address 325 SPRINGSIDE DR
City AKRON State OH Zip Code 44333
Purpose of Expenditure VOTER CONTACT Category/Type 004
Name of Federal Candidate HILLARY CLINTON Support Oppose
Calendar Year-To-Date Per Election for Office Sought 1104.17

Date of Public Distribution/Dissemination 11 / 16 / 2015
Amount 1104.17
Transaction ID : SE.10750
Date of Disbursement or Obligation 11 / 16 / 2015
Office Sought: House District: 00
President Senate State: WA
Disbursement For: Primary General 2016 Other (specify)

Full Name of Payee INFOCISION MANAGEMENT CORP
Mailing Address 325 SPRINGSIDE DR
City AKRON State OH Zip Code 44333
Purpose of Expenditure VOTER CONTACT Category/Type 004
Name of Federal Candidate HILLARY CLINTON Support Oppose
Calendar Year-To-Date Per Election for Office Sought 309.39

Date of Public Distribution/Dissemination 11 / 16 / 2015
Amount 309.39
Transaction ID : SE.10751
Date of Disbursement or Obligation 11 / 16 / 2015
Office Sought: House District: 00
President Senate State: WV
Disbursement For: Primary General 2016 Other (specify)

Table with 2 columns: Description and Amount. (a) SUBTOTAL of Itemized Independent Expenditures 1413.56, (b) SUBTOTAL of Unitemized Independent Expenditures, (c) TOTAL Independent Expenditures

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

Signature SCOTT B MACKENZIE [Electronically Filed] Date 11 / 18 / 2015

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) CONSERVATIVE MAJORITY FUND
FEC IDENTIFICATION NUMBER C C00524454
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee INFOCISION MANAGEMENT CORP
Mailing Address 325 SPRINGSIDE DR
City AKRON State OH Zip Code 44333
Purpose of Expenditure VOTER CONTACT Category/Type 004
Name of Federal Candidate HILLARY CLINTON Support Oppose
Calendar Year-To-Date Per Election for Office Sought 922.66

Date of Public Distribution/Dissemination 11 / 16 / 2015
Amount 922.66
Transaction ID : SE.10752
Date of Disbursement or Obligation 11 / 16 / 2015
Office Sought: House District: 00
President Senate State: WI
Disbursement For: Primary General 2016 Other (specify)

Full Name of Payee INFOCISION MANAGEMENT CORP
Mailing Address 325 SPRINGSIDE DR
City AKRON State OH Zip Code 44333
Purpose of Expenditure VOTER CONTACT Category/Type 004
Name of Federal Candidate HILLARY CLINTON Support Oppose
Calendar Year-To-Date Per Election for Office Sought 91.14

Date of Public Distribution/Dissemination 11 / 16 / 2015
Amount 91.14
Transaction ID : SE.10753
Date of Disbursement or Obligation 11 / 16 / 2015
Office Sought: House District: 00
President Senate State: WY
Disbursement For: Primary General 2016 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 1013.80
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.
SCOTT B MACKENZIE [Electronically Filed] Date 11 / 18 / 2015
Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) CONSERVATIVE MAJORITY FUND
FEC IDENTIFICATION NUMBER C C00524454
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee INFOCISION MANAGEMENT CORP
Mailing Address 325 SPRINGSIDE DR
City AKRON State OH Zip Code 44333
Purpose of Expenditure VOTER CONTACT Category/Type 004
Name of Federal Candidate HILLARY CLINTON Support Oppose Office Sought: President Senate State: DC
Calendar Year-To-Date Per Election for Office Sought 107.86
Disbursement For: Primary General 2016 Other (specify)

Full Name of Payee
Mailing Address
City State Zip Code
Purpose of Expenditure Category/Type
Name of Federal Candidate Support Oppose Office Sought: House Senate State:
Calendar Year-To-Date Per Election for Office Sought
Disbursement For: Primary General Other (specify)

Table with 2 columns: Description and Amount. (a) SUBTOTAL of Itemized Independent Expenditures 107.86; (b) SUBTOTAL of Unitemized Independent Expenditures; (c) TOTAL Independent Expenditures 50000.00

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.
Signature SCOTT B MACKENZIE [Electronically Filed] Date 11/18/2015