

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

THE CONSERVATIVE STRIKEFORCE

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="63446.34"/> | <input type="text" value="63446.34"/> |
| (b) Cash on Hand at Beginning of Reporting Period..... | <input type="text" value="19432.39"/> | |
| (c) Total Receipts (from Line 19) | <input type="text" value="288785.30"/> | <input type="text" value="950861.89"/> |
| (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="308217.69"/> | <input type="text" value="1014308.23"/> |
| 7. Total Disbursements (from Line 31)..... | <input type="text" value="238221.61"/> | <input type="text" value="944312.15"/> |
| 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))..... | <input type="text" value="69996.08"/> | <input type="text" value="69996.08"/> |
| 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="162882.18"/> | |

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

Write or Type Committee Name

THE CONSERVATIVE STRIKEFORCE

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)..... | 79740.10 | 194454.60 |
| (ii) Unitemized | 206112.59 | 743527.77 |
| (iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶ | 285852.69 | 937982.37 |
| (b) Political Party Committees | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs)..... | 0.00 | 5000.00 |
| (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) | 285852.69 | 942982.37 |
| 12. Transfers From Affiliated/Other Party Committees..... | 0.00 | 0.00 |
| 13. All Loans Received | 0.00 | 700.00 |
| 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 | 1.00 |
| 17. Other Federal Receipts (Dividends, Interest, etc.)..... | 2932.61 | 7178.52 |
| 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))..... ▶ | 288785.30 | 950861.89 |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶ | 288785.30 | 950861.89 |

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 | 205656.81 | 812087.85 |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) | 205656.81 | 812087.85 |
| 22. Transfers to Affiliated/Other Party Committees..... | 0.00 | 0.00 |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees..... | 5000.00 | 16000.00 |
| 24. Independent Expenditures (use Schedule E) | 27564.80 | 113024.30 |
| 25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F)..... | 0.00 | 0.00 |
| 26. Loan Repayments Made..... | 0.00 | 700.00 |
| 27. Loans Made..... | 0.00 | 0.00 |
| 28. Refunds of Contributions To: | | |
| (a) Individuals/Persons Other Than Political Committees | 0.00 | 0.00 |
| (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 | 0.00 |
| 29. Other Disbursements | 0.00 | 2500.00 |
| 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)) .. | 238221.61 | 944312.15 |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 238221.61 | 944312.15 |

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) | 285852.69 | 942982.37 |
| 34. Total Contribution Refunds (from Line 28(d)) | 0.00 | 0.00 |
| 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) | 285852.69 | 942982.37 |
| 36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ▶ | 205656.81 | 812087.85 |
| 37. Offsets to Operating Expenditures (from Line 15, page 3)..... | 0.00 | 0.00 |
| 38. Net Operating Expenditures (subtract Line 37 from Line 36)▶ | 205656.81 | 812087.85 |

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

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

FOR LINE NUMBER: PAGE 6 OF 190
(check only one)
 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. MARGARET ADAMS 366

Mailing Address 8240 HEALY DR

City MOBILE State AL Zip Code 36695

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 425.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 04 / 2014

Transaction ID : SA11Al.87670

Amount of Each Receipt this Period
 100.00

Full Name (Last, First, Middle Initial)
B. MARGARET ADAMS 366

Mailing Address 8240 HEALY DR

City MOBILE State AL Zip Code 36695

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 525.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 17 / 2014

Transaction ID : SA11Al.87671

Amount of Each Receipt this Period
 100.00

Full Name (Last, First, Middle Initial)
C. GARY ADAMS 927

Mailing Address 3420-H W MACARTHUR BLVD

City SANTA ANA State CA Zip Code 92704

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

Name of Employer Occupation
 ADAMS PROPERTIES PROPERTY MANAGEMENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 19 / 2014

Transaction ID : SA11Al.87675

Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00

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 190 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
THE CONSERVATIVE STRIKEFORCE

A. MR WILLIAM ALCOCK 103
 Full Name (Last, First, Middle Initial)
 Mailing Address 149 WILD AVE
 City STATEN ISLAND State NY Zip Code 10314
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NY COURT SYSTEM Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 13 / 2014
Transaction ID : SA11Al.87702
 Amount of Each Receipt this Period
 600.00

B. GENEVA ALLEN 472
 Full Name (Last, First, Middle Initial)
 Mailing Address 2223 HEIDEMAN DR
 City SEYMOUR State IN Zip Code 47274
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 11 / 2014
Transaction ID : SA11Al.87738
 Amount of Each Receipt this Period
 50.00

C. CARMELO AMATO 954
 Full Name (Last, First, Middle Initial)
 Mailing Address 816 REVEL RD
 City HEALDSBURG State CA Zip Code 95448
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MAXIM ELECTRONIC SALES Occupation SALES ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 29 / 2014
Transaction ID : SA11Al.87789
 Amount of Each Receipt this Period
 250.00

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 900.00 |
| 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 8 OF 190
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE CONSERVATIVE STRIKEFORCE

A. MS LORNA E ARNOLD 787
 Full Name (Last, First, Middle Initial)
 Mailing Address 4901 TOMAHAWK TRL
 City AUSTIN State TX Zip Code 78745
 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 ▼ 290.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2014
Transaction ID : SA11AI.87874
 Amount of Each Receipt this Period
 165.00

B. MS LORNA E ARNOLD 787
 Full Name (Last, First, Middle Initial)
 Mailing Address 4901 TOMAHAWK TRL
 City AUSTIN State TX Zip Code 78745
 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 M / D D D / Y Y Y Y Y Y
 09 / 15 / 2014
Transaction ID : SA11AI.87875
 Amount of Each Receipt this Period
 35.00

C. WALTER BAHLER 479
 Full Name (Last, First, Middle Initial)
 Mailing Address 5927 S CREEKSIDE CT
 City REMINGTON State IN Zip Code 47977
 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 M / D D D / Y Y Y Y Y Y
 08 / 28 / 2014
Transaction ID : SA11AI.87935
 Amount of Each Receipt this Period
 50.00

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 | FOR LINE NUMBER: (check only one) | PAGE 9 OF 190 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
THE CONSERVATIVE STRIKEFORCE

A. DR MYRTISE W BALLARD 853
 Full Name (Last, First, Middle Initial)
 Mailing Address 19303 N NEW TRADITION RD APT 327
 City SUN CITY WEST State AZ Zip Code 85375
 FEC ID number of contributing federal political committee. **C**
 Name of Employer LA UNIFIED SCHOOL DISTRICT Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 08 / 2014
Transaction ID : SA11AI.87979
 Amount of Each Receipt this Period
 100.00

B. MS MARY BALZHISER 974
 Full Name (Last, First, Middle Initial)
 Mailing Address 494 W 10TH AVE UNIT 408
 City EUGENE State OR Zip Code 97401
 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 M / D D D / Y Y Y Y Y Y
 09 / 15 / 2014
Transaction ID : SA11AI.87985
 Amount of Each Receipt this Period
 25.00

C. MRS NANCY L BARNHART 380
 Full Name (Last, First, Middle Initial)
 Mailing Address 7370 WALSH RD
 City MILLINGTON State TN Zip Code 38053
 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 ▼ 550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 23 / 2014
Transaction ID : SA11AI.88030
 Amount of Each Receipt this Period
 150.00

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 275.00 |
| 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 10 OF 190 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | | <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. MR RAY R BARRETT 797 JR | | | Date of Receipt |
| Mailing Address HC 34 BOX 3 | | | <input type="text" value="07"/> / <input type="text" value="15"/> / <input type="text" value="2014"/> |
| City | State | Zip Code | Transaction ID : SA11AI.88039 |
| MIDKIFF | TX | 79755 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | <input type="text" value="C"/> | | <input type="text" value="250.00"/> |
| Name of Employer | Occupation | | |
| SELF EMPLOYED | FARMER / RANCHER | | |
| Receipt For: | Aggregate Year-to-Date ▼ | | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General | <input type="text" value="750.00"/> | | |
| <input type="checkbox"/> Other (specify) ▼ | | | |

| | | | |
|--|-------------------------------------|----------|---|
| Full Name (Last, First, Middle Initial) B. MRS NANCY BATES 946 | | | Date of Receipt |
| Mailing Address 20 BELLEVUE AVE | | | <input type="text" value="09"/> / <input type="text" value="20"/> / <input type="text" value="2014"/> |
| City | State | Zip Code | Transaction ID : SA11AI.88064 |
| PIEDMONT | CA | 94611 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | <input type="text" value="C"/> | | <input type="text" value="375.00"/> |
| Name of Employer | Occupation | | |
| JOHN & NANCY BATES FOUNDATION | TRUSTEE | | |
| Receipt For: | Aggregate Year-to-Date ▼ | | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General | <input type="text" value="375.00"/> | | |
| <input type="checkbox"/> Other (specify) ▼ | | | |

| | | | |
|--|-------------------------------------|----------|---|
| Full Name (Last, First, Middle Initial) C. MR DAVID WAYNE BELL 750 | | | Date of Receipt |
| Mailing Address 1909 DEBORAH DR | | | <input type="text" value="08"/> / <input type="text" value="15"/> / <input type="text" value="2014"/> |
| City | State | Zip Code | Transaction ID : SA11AI.88148 |
| SHERMAN | TX | 75090 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | <input type="text" value="C"/> | | <input type="text" value="50.00"/> |
| Name of Employer | Occupation | | |
| SELF EMPLOYED | CLINICAL PSYCHOLOGY | | |
| Receipt For: | Aggregate Year-to-Date ▼ | | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General | <input type="text" value="360.00"/> | | |
| <input type="checkbox"/> Other (specify) ▼ | | | |

| | |
|--|-------------------------------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | <input type="text" value="675.00"/> |
| TOTAL This Period (last page this line number only).....▶ | <input type="text" value=""/> |

**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 11 OF 190 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | | <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. MR DAVID WAYNE BELL 750 | | Date of Receipt |
| Mailing Address 1909 DEBORAH DR | | <input type="text" value="08"/> / <input type="text" value="25"/> / <input type="text" value="2014"/> |
| City | State | Zip Code |
| SHERMAN | TX | 75090 |
| FEC ID number of contributing federal political committee. | | <input type="text" value="C"/> |
| Name of Employer | Occupation | Transaction ID : SA11AI.88149 |
| SELF EMPLOYED | CLINICAL PSYCHOLOGY | |
| Receipt For: | Aggregate Year-to-Date ▼ | Amount of Each Receipt this Period |
| <input type="checkbox"/> Primary <input type="checkbox"/> General | <input type="text" value="390.00"/> | <input type="text" value="30.00"/> |
| <input type="checkbox"/> Other (specify) ▼ | | |

| | | |
|--|-------------------------------------|---|
| Full Name (Last, First, Middle Initial) B. MR DAVID WAYNE BELL 750 | | Date of Receipt |
| Mailing Address 1909 DEBORAH DR | | <input type="text" value="09"/> / <input type="text" value="22"/> / <input type="text" value="2014"/> |
| City | State | Zip Code |
| SHERMAN | TX | 75090 |
| FEC ID number of contributing federal political committee. | | <input type="text" value="C"/> |
| Name of Employer | Occupation | Transaction ID : SA11AI.88147 |
| SELF EMPLOYED | CLINICAL PSYCHOLOGY | |
| Receipt For: | Aggregate Year-to-Date ▼ | Amount of Each Receipt this Period |
| <input type="checkbox"/> Primary <input type="checkbox"/> General | <input type="text" value="465.00"/> | <input type="text" value="75.00"/> |
| <input type="checkbox"/> Other (specify) ▼ | | |

| | | |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial) C. MR RICHARD G BENNETT 838 | | Date of Receipt |
| Mailing Address 1694 E HAYDEN AVE | | <input type="text" value="09"/> / <input type="text" value="08"/> / <input type="text" value="2014"/> |
| City | State | Zip Code |
| HAYDEN LAKE | ID | 83835 |
| FEC ID number of contributing federal political committee. | | <input type="text" value="C"/> |
| Name of Employer | Occupation | Transaction ID : SA11AI.88182 |
| NONE | RETIRED | |
| Receipt For: | Aggregate Year-to-Date ▼ | Amount of Each Receipt this Period |
| <input type="checkbox"/> Primary <input type="checkbox"/> General | <input type="text" value="450.00"/> | <input type="text" value="300.00"/> |
| <input type="checkbox"/> Other (specify) ▼ | | |

| | |
|--|-------------------------------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | <input type="text" value="405.00"/> |
| TOTAL This Period (last page this line number only).....▶ | <input type="text"/> |

**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 190
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE CONSERVATIVE STRIKEFORCE

A. YVONNE BERRY 112
 Full Name (Last, First, Middle Initial)
 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 Occupation
 NONE RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 25 / 2014
Transaction ID : SA11AI.88228
 Amount of Each Receipt this Period
 200.00

B. MR EDWIN BIEDERMAN 168
 Full Name (Last, First, Middle Initial)
 Mailing Address 1651 DOGWOOD CIR
 City State Zip Code
 STATE COLLEGE PA 16803
 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 M / D D D / Y Y Y Y Y Y
 09 / 04 / 2014
Transaction ID : SA11AI.88256
 Amount of Each Receipt this Period
 25.00

C. MRS GENEVIEVE L BISHOP 662
 Full Name (Last, First, Middle Initial)
 Mailing Address 10230 EDELWEISS CIR
 City State Zip Code
 SHAWNEE KS 66203
 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 M / D D D / Y Y Y Y Y Y
 07 / 28 / 2014
Transaction ID : SA11AI.88302
 Amount of Each Receipt this Period
 225.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 450.00
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 13 OF 190 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
THE CONSERVATIVE STRIKEFORCE

A. JOHN BLASDALE 079
 Full Name (Last, First, Middle Initial)
 Mailing Address 28 FIELDSTONE DR
 City WHIPPANY State NJ Zip Code 07981
 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 M / D D D / Y Y Y Y Y Y
 08 / 27 / 2014
Transaction ID : SA11AI.88337
 Amount of Each Receipt this Period
 250.00

B. PATRICIA BONAPARTE 760
 Full Name (Last, First, Middle Initial)
 Mailing Address 1623 MOCKINGBIRD LANE
 City SOUTHLAKE State TX Zip Code 76092
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF EMPLOYED Occupation ACCOUNTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 24 / 2014
Transaction ID : SA11AI.88390
 Amount of Each Receipt this Period
 150.00

C. MRS MILDRED BOOTH 188
 Full Name (Last, First, Middle Initial)
 Mailing Address 589 BOOTH RD
 City HALLSTEAD State PA Zip Code 18822
 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 M / D D D / Y Y Y Y Y Y
 08 / 15 / 2014
Transaction ID : SA11AI.88396
 Amount of Each Receipt this Period
 100.00

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 500.00 |
| 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 14 OF 190
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE CONSERVATIVE STRIKEFORCE

A. MARCIA BOWER 852
 Full Name (Last, First, Middle Initial)
 Mailing Address 7414 E CACTUS WREN RD
 City State Zip Code
 SCOTTSDALE AZ 85250
 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 ▼
 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 17 / 2014
Transaction ID : SA11AI.88439
 Amount of Each Receipt this Period
 100.00

B. MARCIA BOWER 852
 Full Name (Last, First, Middle Initial)
 Mailing Address 7414 E CACTUS WREN RD
 City State Zip Code
 SCOTTSDALE AZ 85250
 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 M / D D D / Y Y Y Y Y Y
 09 / 23 / 2014
Transaction ID : SA11AI.88440
 Amount of Each Receipt this Period
 100.00

C. MARCIA BOWER 852
 Full Name (Last, First, Middle Initial)
 Mailing Address 7414 E CACTUS WREN RD
 City State Zip Code
 SCOTTSDALE AZ 85250
 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 ▼
 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 24 / 2014
Transaction ID : SA11AI.88436
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
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 15 OF 190 |
| | (check only one) | |
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 12 |
| | | <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. VINAL BOWYER 469 | | Date of Receipt |
| Mailing Address 2539 S WILLOW CREEK DR | | <input type="text" value="09"/> / <input type="text" value="02"/> / <input type="text" value="2014"/> |
| City | State | Zip Code |
| PERU | IN | 46970 |
| FEC ID number of contributing federal political committee. | <input type="text" value="C"/> | Transaction ID : SA11AI.88459 |
| Name of Employer | Occupation | Amount of Each Receipt this Period |
| SELF EMPLOYED | FARMER | <input type="text" value="100.00"/> |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | <input type="text" value="705.00"/> | |

| | | |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial) B. MS KAYE F BOYD 333 | | Date of Receipt |
| Mailing Address 815 SW 8TH TER | | <input type="text" value="09"/> / <input type="text" value="26"/> / <input type="text" value="2014"/> |
| City | State | Zip Code |
| FORT LAUDERDALE | FL | 33315 |
| FEC ID number of contributing federal political committee. | <input type="text" value="C"/> | Transaction ID : SA11AI.88464 |
| Name of Employer | Occupation | Amount of Each Receipt this Period |
| | | <input type="text" value="100.00"/> |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | <input type="text" value="300.00"/> | |

| | | |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial) C. MR BILL BRAMHALL 665 | | Date of Receipt |
| Mailing Address 2844 TUMBLEWEED RD | | <input type="text" value="09"/> / <input type="text" value="17"/> / <input type="text" value="2014"/> |
| City | State | Zip Code |
| VERMILLION | KS | 66544 |
| FEC ID number of contributing federal political committee. | <input type="text" value="C"/> | Transaction ID : SA11AI.88496 |
| Name of Employer | Occupation | Amount of Each Receipt this Period |
| | | <input type="text" value="315.00"/> |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | <input type="text" value="315.00"/> | |

| | |
|--|-------------------------------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | <input type="text" value="515.00"/> |
| TOTAL This Period (last page this line number only).....▶ | <input type="text"/> |

**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 190
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE CONSERVATIVE STRIKEFORCE

A. MS MARY A BRATETICH 499
 Full Name (Last, First, Middle Initial)
 Mailing Address 25651 WEDGE ST
 City CALUMET State MI Zip Code 49913
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 320.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 12 / 2014
Transaction ID : SA11AI.88510
 Amount of Each Receipt this Period
 180.00

B. MS MARY A BRATETICH 499
 Full Name (Last, First, Middle Initial)
 Mailing Address 25651 WEDGE ST
 City CALUMET State MI Zip Code 49913
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 420.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 29 / 2014
Transaction ID : SA11AI.88509
 Amount of Each Receipt this Period
 100.00

C. MRS ROSEMARY H BRIGGS 752
 Full Name (Last, First, Middle Initial)
 Mailing Address 4711 WATAUGA RD
 City DALLAS State TX Zip Code 75209
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 ROSEMARY BRIGGS INC BUSINESS WOMAN
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 28 / 2014
Transaction ID : SA11AI.88545
 Amount of Each Receipt this Period
 400.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 680.00
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 17 OF 190
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE CONSERVATIVE STRIKEFORCE

A. MR JOHN L BROUILLARD 959
 Full Name (Last, First, Middle Initial)
 Mailing Address 374 STILSON CANYON RD
 City CHICO State CA Zip Code 95928
 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 M / D D D / Y Y Y Y Y Y
 08 / 22 / 2014
Transaction ID : SA11AI.88591
 Amount of Each Receipt this Period
 100.00

B. MR JOHN L BROUILLARD 959
 Full Name (Last, First, Middle Initial)
 Mailing Address 374 STILSON CANYON RD
 City CHICO State CA Zip Code 95928
 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 ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 12 / 2014
Transaction ID : SA11AI.88588
 Amount of Each Receipt this Period
 100.00

C. LARRY BROWN 801
 Full Name (Last, First, Middle Initial)
 Mailing Address 5455 LANDMARK PL#1207
 City GREENWOOD VILLAGE State CO Zip Code 80111
 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 M / D D D / Y Y Y Y Y Y
 08 / 20 / 2014
Transaction ID : SA11AI.88625
 Amount of Each Receipt this Period
 250.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 450.00
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 18 OF 190 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
THE CONSERVATIVE STRIKEFORCE

A. LARRY BROWN 801
Full Name (Last, First, Middle Initial)

Mailing Address 5455 LANDMARK PL#1207

| | | |
|---------------------------|-------------|-------------------|
| City GREENWOOD VILLAGE | State CO | Zip Code 80111 |
|---------------------------|-------------|-------------------|

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 |
| 09 | / | 04 | / | 2014 |

Transaction ID : SA11AI.88626

Amount of Each Receipt this Period
100.00

B. HENRY BUHL 100
Full Name (Last, First, Middle Initial)

Mailing Address 114 GREENE ST FL 5

| | | |
|------------------|-------------|-------------------|
| City NEW YORK | State NY | Zip Code 10012 |
|------------------|-------------|-------------------|

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 M | / | D D D | / | Y Y Y Y Y |
| 07 | / | 21 | / | 2014 |

Transaction ID : SA11AI.88687

Amount of Each Receipt this Period
250.00

C. MR ROBERT W BURKS 079
Full Name (Last, First, Middle Initial)

Mailing Address 13 BIRCH HILL DR

| | | |
|-----------------|-------------|-------------------|
| City CHATHAM | State NJ | Zip Code 07928 |
|-----------------|-------------|-------------------|

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 M | / | D D D | / | Y Y Y Y Y |
| 09 | / | 12 | / | 2014 |

Transaction ID : SA11AI.88730

Amount of Each Receipt this Period
200.00

| | |
|--|--------|
| 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: (check only one) | PAGE 19 OF 190 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | | <input type="checkbox"/> 15 |
| | | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
THE CONSERVATIVE STRIKEFORCE

A. MR WILLIAM F BURT 017
Full Name (Last, First, Middle Initial)

Mailing Address 1 HARVEST CIR STE 003

| | | |
|-----------------|-------------|-------------------|
| City LINCOLN | State MA | Zip Code 01773 |
|-----------------|-------------|-------------------|

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

| | |
|-------------------------------------|-------------------------|
| Name of Employer THOMSEN REUTERS | Occupation EXECUTIVE |
|-------------------------------------|-------------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 08 | / | 19 | / | 2014 |

Transaction ID : SA11AI.88752

Amount of Each Receipt this Period
50.00

B. MR WILLIAM F BURT 017
Full Name (Last, First, Middle Initial)

Mailing Address 1 HARVEST CIR STE 003

| | | |
|-----------------|-------------|-------------------|
| City LINCOLN | State MA | Zip Code 01773 |
|-----------------|-------------|-------------------|

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

| | |
|-------------------------------------|-------------------------|
| Name of Employer THOMSEN REUTERS | Occupation EXECUTIVE |
|-------------------------------------|-------------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09 | / | 25 | / | 2014 |

Transaction ID : SA11AI.88751

Amount of Each Receipt this Period
50.00

C. JOHN BUTLER 787
Full Name (Last, First, Middle Initial)

Mailing Address 12500 CEDAR

| | | |
|----------------|-------------|-------------------|
| City AUSTIN | State TX | Zip Code 78732 |
|----------------|-------------|-------------------|

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 M | / | D D D | / | Y Y Y Y Y Y |
| 09 | / | 23 | / | 2014 |

Transaction ID : SA11AI.88782

Amount of Each Receipt this Period
100.00

| | |
|--|--------|
| 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) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 20 OF 190 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | | <input type="checkbox"/> 15 |
| | | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
THE CONSERVATIVE STRIKEFORCE

A. DAVE CAMP 724
Full Name (Last, First, Middle Initial)
Mailing Address 2405 HATCHER DR
City PARAGOULD State AR Zip Code 72450
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
07 / 11 / 2014
Transaction ID : SA11AI.88840
Amount of Each Receipt this Period
50.00

B. MRS BILLIE M CAMPBELL 427
Full Name (Last, First, Middle Initial)
Mailing Address 108 DIECKS DR APT 320
City ELIZABETHTOWN State KY Zip Code 42701
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
NONE WIDOW
Receipt For:
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼ 490.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 22 / 2014
Transaction ID : SA11AI.88849
Amount of Each Receipt this Period
390.00

C. MS SUE M CANNON 802
Full Name (Last, First, Middle Initial)
Mailing Address 6420 W LAKERIDGE RD
City LAKEWOOD State CO Zip Code 80227
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 ▼ 3000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
08 / 26 / 2014
Transaction ID : SA11AI.88865
Amount of Each Receipt this Period
2000.00

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 2440.00 |
| 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 190
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE CONSERVATIVE STRIKEFORCE

A. MS SUE M CANNON 802
 Full Name (Last, First, Middle Initial)
 Mailing Address 6420 W LAKERIDGE RD
 City LAKEWOOD State CO Zip Code 80227
 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 ▼ 4000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 17 / 2014
Transaction ID : SA11AI.88864
 Amount of Each Receipt this Period
 1000.00

B. EUGENE CARR 341
 Full Name (Last, First, Middle Initial)
 Mailing Address 875 18TH AVE S
 City NAPLES State FL Zip Code 34102
 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 M / D D D / Y Y Y Y Y Y
 07 / 10 / 2014
Transaction ID : SA11AI.88918
 Amount of Each Receipt this Period
 300.00

C. MS DONNA CARRICO 902
 Full Name (Last, First, Middle Initial)
 Mailing Address 221 AVENUE D
 City REDONDO BEACH State CA Zip Code 90277
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MATH TECH Occupation IT MANAGER
 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
 07 / 09 / 2014
Transaction ID : SA11AI.88924
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 1400.00
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 22 OF 190 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | | <input type="checkbox"/> 15 |
| | | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
THE CONSERVATIVE STRIKEFORCE

A. ISABEL CASTILLO 339
 Full Name (Last, First, Middle Initial)
 Mailing Address 28200 BERMONT RD16-C
 City PUNTA GORDA State FL Zip Code 33982
 FEC ID number of contributing federal political committee. **C**
 Name of Employer STATE OF FLORIDA Occupation RETIREE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 27 / 2014
Transaction ID : SA11AI.88964
 Amount of Each Receipt this Period
 50.00

B. DALE CAZIER 092
 Full Name (Last, First, Middle Initial)
 Mailing Address UNIT 7900 BOX 2936
 City DPO State AE Zip Code 09213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer US DEPT OF STATE Occupation DIPLOMAT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 15 / 2014
Transaction ID : SA11AI.96884
 Amount of Each Receipt this Period
 100.00

C. DR JACK CHAFFIN 837 MD
 Full Name (Last, First, Middle Initial)
 Mailing Address 863 CHARDIE RD
 City BOISE State ID Zip Code 83702
 FEC ID number of contributing federal political committee. **C**
 Name of Employer ST ALPHONSUS REGIONAL MEDICAL CENTE Occupation PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 23 / 2014
Transaction ID : SA11AI.88982
 Amount of Each Receipt this Period
 250.00

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 400.00 |
| 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 23 OF 190
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE CONSERVATIVE STRIKEFORCE

A. GEOFFREY CHAMPION 341
 Full Name (Last, First, Middle Initial)
 Mailing Address 999 VANDERBILT BEACH ROAD
 City State Zip Code
 NAPLES FL 34108
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 CHAMPIONSCOTT PARTNERS CHAIRMAN
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 23 / 2014
Transaction ID : SA11AI.88987
 Amount of Each Receipt this Period
 500.00

B. MR MICHAEL CHODORCOFF 070
 Full Name (Last, First, Middle Initial)
 Mailing Address 109 JESSE CT
 City State Zip Code
 MONTVILLE NJ 07045
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 SELF EMPLOYED INSURANCE
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 19 / 2014
Transaction ID : SA11AI.89027
 Amount of Each Receipt this Period
 100.00

C. RUBY CHOI 944
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 4877
 City State Zip Code
 FOSTER CITY CA 94404
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 SELF EMPLOYED PROPERTY MANAGEMENT
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 15 / 2014
Transaction ID : SA11AI.89028
 Amount of Each Receipt this Period
 500.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 1100.00
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 24 OF 190 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
THE CONSERVATIVE STRIKEFORCE

A. MR GORDON B CLARK 079
 Full Name (Last, First, Middle Initial)
 Mailing Address 34 CHERRY LN
 City BASKING RIDGE State NJ Zip Code 07920
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 07 / 2014
Transaction ID : SA11AI.89064
 Amount of Each Receipt this Period
 300.00

B. MS JUDITH S CLARK 902
 Full Name (Last, First, Middle Initial)
 Mailing Address 19781 GRAND VIEW DR
 City TOPANGA State CA Zip Code 90290
 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 ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 15 / 2014
Transaction ID : SA11AI.89082
 Amount of Each Receipt this Period
 400.00

C. JUDITH SOMERSET CLARK 902
 Full Name (Last, First, Middle Initial)
 Mailing Address 19781 GRAND VIEW DR
 City TOPANGA State CA Zip Code 90290
 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 ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 28 / 2014
Transaction ID : SA11AI.89083
 Amount of Each Receipt this Period
 200.00

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 900.00 |
| 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 190
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE CONSERVATIVE STRIKEFORCE

A. MR WILLIAM C CLARKE 034 JR
 Full Name (Last, First, Middle Initial)
 Mailing Address 25 BLOSSOM ST
 City KEENE State NH Zip Code 03431
 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 ▼ 230.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 17 / 2014
Transaction ID : SA11AI.89087
 Amount of Each Receipt this Period
 300.00

B. MRS ELEANOR C COBB 900
 Full Name (Last, First, Middle Initial)
 Mailing Address 131 S VISTA ST
 City LOS ANGELES State CA Zip Code 90036
 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 ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 15 / 2014
Transaction ID : SA11AI.89135
 Amount of Each Receipt this Period
 400.00

C. MRS ELEANOR L COBB 900
 Full Name (Last, First, Middle Initial)
 Mailing Address 131 S VISTA ST
 City LOS ANGELES State CA Zip Code 90036
 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 M / D D D / Y Y Y Y Y Y
 09 / 26 / 2014
Transaction ID : SA11AI.89137
 Amount of Each Receipt this Period
 500.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 930.00
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 26 OF 190 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <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. PAMELA COLGATE 038 | | Date of Receipt |
| Mailing Address 10 WHITE OAK DR APT 209 | | <input type="text" value="07"/> / <input type="text" value="05"/> / <input type="text" value="2014"/> |
| City | State | Zip Code |
| EXETER | NH | 03833 |
| FEC ID number of contributing federal political committee. | <input type="text" value="C"/> | |
| Name of Employer | Occupation | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | <input type="text" value="300.00"/> | |
| | | Amount of Each Receipt this Period |
| | | <input type="text" value="300.00"/> |

| | | |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial) B. KATHLEEN COLSMAN 857 | | Date of Receipt |
| Mailing Address 5044 N CRESTRIDGE DR | | <input type="text" value="07"/> / <input type="text" value="27"/> / <input type="text" value="2014"/> |
| City | State | Zip Code |
| TUCSON | AZ | 85718 |
| FEC ID number of contributing federal political committee. | <input type="text" value="C"/> | |
| Name of Employer | Occupation | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | <input type="text" value="235.00"/> | |
| | | Amount of Each Receipt this Period |
| | | <input type="text" value="35.00"/> |

| | | |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial) C. DEVEN COMBS 223 | | Date of Receipt |
| Mailing Address 5709 WOODLAWN GREEN CIR APT D | | <input type="text" value="07"/> / <input type="text" value="21"/> / <input type="text" value="2014"/> |
| City | State | Zip Code |
| ALEXANDRIA | VA | 22309 |
| FEC ID number of contributing federal political committee. | <input type="text" value="C"/> | |
| Name of Employer | Occupation | |
| US MILITARY | MILITARY | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | <input type="text" value="300.00"/> | |
| | | Amount of Each Receipt this Period |
| | | <input type="text" value="50.00"/> |

| | |
|---|-------------------------------------|
| SUBTOTAL of Receipts This Page (optional)..... | <input type="text" value="385.00"/> |
| TOTAL This Period (last page this line number only)..... | <input type="text" value=""/> |

**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 27 OF 190 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
THE CONSERVATIVE STRIKEFORCE

A. MR JAMES COOLEY 283
Full Name (Last, First, Middle Initial)

Mailing Address 5 CHATHAM LN

| | | |
|-------------------|-------------|-------------------|
| City PINEHURST | State NC | Zip Code 28374 |
|-------------------|-------------|-------------------|

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 ▼
359.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07 | / | 10 | / | 2014 |

Transaction ID : SA11AI.89245

Amount of Each Receipt this Period
100.00

B. PAT CORRIGAN 329
Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 690068

| | | |
|--------------------|-------------|-------------------|
| City VERO BEACH | State FL | Zip Code 32969 |
|--------------------|-------------|-------------------|

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

| | |
|------------------------------------|---------------------|
| Name of Employer CORRIGAN RANCH | Occupation OWNER |
|------------------------------------|---------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 08 | / | 30 | / | 2014 |

Transaction ID : SA11AI.89278

Amount of Each Receipt this Period
300.00

C. PAUL CORRIGAN 480
Full Name (Last, First, Middle Initial)

Mailing Address 26980 CRESTWOOD DR

| | | |
|------------------|-------------|-------------------|
| City FRANKLIN | State MI | Zip Code 48025 |
|------------------|-------------|-------------------|

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

Transaction ID : SA11AI.89281

Amount of Each Receipt this Period
200.00

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 600.00 |
| 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 28 OF 190 |
| | (check only one) | |
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 12 |
| | | <input type="checkbox"/> 15 |
| | | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
THE CONSERVATIVE STRIKEFORCE

A. JOHN CREMER 494
Full Name (Last, First, Middle Initial)

Mailing Address 2654 THRUSH DR

City JENISON State MI Zip Code 49428

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

Name of Employer SELF EMPLOYED Occupation REAL ESTATE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 19 / 2014

Transaction ID : SA11AI.89368

Amount of Each Receipt this Period
 250.00

B. DRUSCILLA DOHRMAN 341
Full Name (Last, First, Middle Initial)

Mailing Address POBOX 2165

City NAPLES State FL Zip Code 34108

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

Name of Employer VISA Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 25 / 2014

Transaction ID : SA11AI.89460

Amount of Each Receipt this Period
 250.00

C. MATILDA DANLER 675
Full Name (Last, First, Middle Initial)

Mailing Address 1145 90TH AVE

City KINSLEY State KS Zip Code 67547

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 ▼ 375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 28 / 2014

Transaction ID : SA11AI.89503

Amount of Each Receipt this Period
 375.00

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 875.00 |
| 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 29 OF 190 |
| | (check only one) | |
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 12 |
| | | <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. LEWIS DEDON 708 | | Date of Receipt |
| Mailing Address 5826 CONGRESS BLVD | | <input type="text" value="07"/> / <input type="text" value="21"/> / <input type="text" value="2014"/> |
| City | State | Zip Code |
| BATON ROUGE | LA | 70808 |
| FEC ID number of contributing federal political committee. | <input type="text" value="C"/> | |
| Name of Employer | Occupation | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ | |
| | <input type="text" value="300.00"/> | |
| | | Transaction ID : SA11AI.89607 |
| | | Amount of Each Receipt this Period |
| | | <input type="text" value="100.00"/> |

| | | |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial) B. MRS VIRGINIA L DEKKER 287 | | Date of Receipt |
| Mailing Address 24 IROQUOIS DR | | <input type="text" value="09"/> / <input type="text" value="16"/> / <input type="text" value="2014"/> |
| City | State | Zip Code |
| HENDERSONVILLE | NC | 28791 |
| FEC ID number of contributing federal political committee. | <input type="text" value="C"/> | |
| Name of Employer | Occupation | |
| NONE | RETIRED | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ | |
| | <input type="text" value="400.00"/> | |
| | | Transaction ID : SA11AI.89624 |
| | | Amount of Each Receipt this Period |
| | | <input type="text" value="200.00"/> |

| | | |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial) C. DONNA DENNIS 559 | | Date of Receipt |
| Mailing Address 54894 300TH ST | | <input type="text" value="07"/> / <input type="text" value="10"/> / <input type="text" value="2014"/> |
| City | State | Zip Code |
| AUSTIN | MN | 55912 |
| FEC ID number of contributing federal political committee. | <input type="text" value="C"/> | |
| Name of Employer | Occupation | |
| NONE | RETIRED | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ | |
| | <input type="text" value="285.00"/> | |
| | | Transaction ID : SA11AI.89647 |
| | | Amount of Each Receipt this Period |
| | | <input type="text" value="50.00"/> |

| | |
|--|-------------------------------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | <input type="text" value="350.00"/> |
| TOTAL This Period (last page this line number only).....▶ | <input type="text"/> |

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

| | | |
|---|------------------------------|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: | PAGE 30 OF 190 |
| | (check only one) | |
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 12 |
| | | <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. DONNA DENNIS 559 | | | Date of Receipt |
| Mailing Address 54894 300TH ST | | | <input type="text" value="07"/> / <input type="text" value="19"/> / <input type="text" value="2014"/> |
| City | State | Zip Code | Transaction ID : SA11AI.89646 |
| AUSTIN | MN | 55912 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | <input type="text" value="C"/> | | <input type="text" value="40.00"/> |
| Name of Employer | Occupation | | |
| NONE | RETIRED | | |
| Receipt For: | Aggregate Year-to-Date ▼ | | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General | <input type="text" value="325.00"/> | | |
| <input type="checkbox"/> Other (specify) ▼ | | | |

| | | | |
|---|-------------------------------------|----------|---|
| Full Name (Last, First, Middle Initial) B. DONNA DENNIS 559 | | | Date of Receipt |
| Mailing Address 54894 300TH ST | | | <input type="text" value="09"/> / <input type="text" value="02"/> / <input type="text" value="2014"/> |
| City | State | Zip Code | Transaction ID : SA11AI.89649 |
| AUSTIN | MN | 55912 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | <input type="text" value="C"/> | | <input type="text" value="35.00"/> |
| Name of Employer | Occupation | | |
| NONE | RETIRED | | |
| Receipt For: | Aggregate Year-to-Date ▼ | | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General | <input type="text" value="360.00"/> | | |
| <input type="checkbox"/> Other (specify) ▼ | | | |

| | | | |
|---|-------------------------------------|----------|---|
| Full Name (Last, First, Middle Initial) C. DONNA DENNIS 559 | | | Date of Receipt |
| Mailing Address 54894 300TH ST | | | <input type="text" value="09"/> / <input type="text" value="29"/> / <input type="text" value="2014"/> |
| City | State | Zip Code | Transaction ID : SA11AI.89648 |
| AUSTIN | MN | 55912 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | <input type="text" value="C"/> | | <input type="text" value="25.00"/> |
| Name of Employer | Occupation | | |
| NONE | RETIRED | | |
| Receipt For: | Aggregate Year-to-Date ▼ | | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General | <input type="text" value="385.00"/> | | |
| <input type="checkbox"/> Other (specify) ▼ | | | |

| | |
|--|-------------------------------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | <input type="text" value="100.00"/> |
| TOTAL This Period (last page this line number only).....▶ | <input type="text"/> |

**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 31 OF 190 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | | <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. MR PERCY DOBBS 628 | | Date of Receipt |
| Mailing Address 729 W NORTH ST | | <input type="text" value="09"/> / <input type="text" value="28"/> / <input type="text" value="2014"/> |
| City | State | Zip Code |
| GRAYVILLE | IL | 62844 |
| FEC ID number of contributing federal political committee. | <input type="text" value="C"/> | Transaction ID : SA11AI.89735 |
| Name of Employer | Occupation | Amount of Each Receipt this Period |
| | | <input type="text" value="200.00"/> |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | <input type="text" value="300.00"/> | |

| | | |
|---|--------------------------------------|---|
| Full Name (Last, First, Middle Initial) B. DRUSCILLA DOEHRMAN 341 | | Date of Receipt |
| Mailing Address PO BOX 2165 | | <input type="text" value="09"/> / <input type="text" value="25"/> / <input type="text" value="2014"/> |
| City | State | Zip Code |
| NAPLES | FL | 34106 |
| FEC ID number of contributing federal political committee. | <input type="text" value="C"/> | Transaction ID : SA11AI.89757 |
| Name of Employer | Occupation | Amount of Each Receipt this Period |
| NONE | RETIRED | <input type="text" value="250.00"/> |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | <input type="text" value="1350.00"/> | |

| | | |
|---|--------------------------------------|---|
| Full Name (Last, First, Middle Initial) C. DRUSCILLA DOEHRMAN 341 | | Date of Receipt |
| Mailing Address PO BOX 2165 | | <input type="text" value="09"/> / <input type="text" value="25"/> / <input type="text" value="2014"/> |
| City | State | Zip Code |
| NAPLES | FL | 34106 |
| FEC ID number of contributing federal political committee. | <input type="text" value="C"/> | Transaction ID : SA11AI.89758 |
| Name of Employer | Occupation | Amount of Each Receipt this Period |
| NONE | RETIRED | <input type="text" value="250.00"/> |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | <input type="text" value="1600.00"/> | |

| | |
|--|-------------------------------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | <input type="text" value="700.00"/> |
| TOTAL This Period (last page this line number only).....▶ | <input type="text"/> |

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

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

FOR LINE NUMBER: PAGE 32 OF 190
(check only one)
 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

A. ELIZABETH DRISCOLL 551
 Full Name (Last, First, Middle Initial)
 Mailing Address 357 SALEM CHURCH RD
 City SAINT PAUL State MN Zip Code 55118
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 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
 09 / 19 / 2014
Transaction ID : SA11AI.89847
 Amount of Each Receipt this Period
 50.00

B. MRS LINDA DUDLEY 891
 Full Name (Last, First, Middle Initial)
 Mailing Address 1895 SYCAMORE TRL
 City LAS VEGAS State NV Zip Code 89108
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 200.10

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 19 / 2014
Transaction ID : SA11AI.89861
 Amount of Each Receipt this Period
 200.10

C. MR PAUL H DUDLEY 977 JR
 Full Name (Last, First, Middle Initial)
 Mailing Address 60230 TEKAMPE RD
 City BEND State OR Zip Code 97702
 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
 07 / 23 / 2014
Transaction ID : SA11AI.89862
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 350.10
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 33 OF 190 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <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)
THE CONSERVATIVE STRIKEFORCE

A. LOIS EDGERLY 021
 Full Name (Last, First, Middle Initial)
 Mailing Address 32 HIGHLAND ST
 City CAMBRIDGE State MA Zip Code 02138
 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 M / D D D / Y Y Y Y Y Y
 07 / 10 / 2014
Transaction ID : SA11AI.89951
 Amount of Each Receipt this Period
 50.00

B. MR JOHN D EHRISMAN 922
 Full Name (Last, First, Middle Initial)
 Mailing Address 7667 ACOMA TRL
 City YUCCA VALLEY State CA Zip Code 92284
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 29 / 2014
Transaction ID : SA11AI.89976
 Amount of Each Receipt this Period
 180.00

C. EVA P ELKINS 900
 Full Name (Last, First, Middle Initial)
 Mailing Address 10375 WILSHIRE BLVD 9G
 City LOS ANGELES State CA Zip Code 90024
 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 ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 03 / 2014
Transaction ID : SA11AI.89989
 Amount of Each Receipt this Period
 1000.00

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 1230.00 |
| 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 34 OF 190
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE CONSERVATIVE STRIKEFORCE

A. DONALD G ELLIOTT 782
 Full Name (Last, First, Middle Initial)
 Mailing Address 101 CASTLE GARDENS DR
 City State Zip Code
 CASTLE HILLS TX 78213
 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 ▼
 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 12 / 2014
Transaction ID : SA11AI.89994
 Amount of Each Receipt this Period
 100.00

B. DONALD G ELLIOTT 782
 Full Name (Last, First, Middle Initial)
 Mailing Address 101 CASTLE GARDENS DR
 City State Zip Code
 CASTLE HILLS TX 78213
 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 M / D D D / Y Y Y Y Y Y
 09 / 09 / 2014
Transaction ID : SA11AI.89995
 Amount of Each Receipt this Period
 100.00

C. DONALD G ELLIOTT 782
 Full Name (Last, First, Middle Initial)
 Mailing Address 101 CASTLE GARDENS DR
 City State Zip Code
 CASTLE HILLS TX 78213
 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 ▼
 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 15 / 2014
Transaction ID : SA11AI.89997
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
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 35 OF 190
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE CONSERVATIVE STRIKEFORCE

A. JIM ENGEL 933
 Full Name (Last, First, Middle Initial)
 Mailing Address 7512 PEMBROKE AVE
 City BAKERSFIELD State CA Zip Code 93308
 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 ▼ 235.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 09 / 2014
Transaction ID : SA11AI.90035
 Amount of Each Receipt this Period
 10.00

B. JIM ENGEL 933
 Full Name (Last, First, Middle Initial)
 Mailing Address 7512 PEMBROKE AVE
 City BAKERSFIELD State CA Zip Code 93308
 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 M / D D D / Y Y Y Y Y Y
 08 / 08 / 2014
Transaction ID : SA11AI.90036
 Amount of Each Receipt this Period
 25.00

C. JIM ENGEL 933
 Full Name (Last, First, Middle Initial)
 Mailing Address 7512 PEMBROKE AVE
 City BAKERSFIELD State CA Zip Code 93308
 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 ▼ 360.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 16 / 2014
Transaction ID : SA11AI.90034
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 135.00
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 36 OF 190
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE CONSERVATIVE STRIKEFORCE

A. MR HAL A ENGER 921
 Full Name (Last, First, Middle Initial)
 Mailing Address 3840 CADDEN WAY
 City SAN DIEGO State CA Zip Code 92117
 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 M / D D D / Y Y Y Y Y Y
 07 / 23 / 2014
Transaction ID : SA11AI.90043
 Amount of Each Receipt this Period
 100.00

B. MR HAL A ENGER 921
 Full Name (Last, First, Middle Initial)
 Mailing Address 3840 CADDEN WAY
 City SAN DIEGO State CA Zip Code 92117
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 30 / 2014
Transaction ID : SA11AI.90042
 Amount of Each Receipt this Period
 150.00

C. CLIFFORD EPSTEIN 335
 Full Name (Last, First, Middle Initial)
 Mailing Address 18823 AVENUE BIARRITZ
 City LUTZ State FL Zip Code 33558
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 RETAIL PROCESS ENGINEERING PRESIDENT
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 29 / 2014
Transaction ID : SA11AI.90060
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
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 37 OF 190 |
| | (check only one) | |
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 12 |
| | | <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. CLIFFORD EPSTEIN 335 | | | Date of Receipt |
| Mailing Address 18823 AVENUE BIARRITZ | | | <input type="text" value="08"/> / <input type="text" value="07"/> / <input type="text" value="2014"/> |
| City | State | Zip Code | Transaction ID : SA11AI.90062 |
| LUTZ | FL | 33558 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | <input type="text" value="C"/> | | <input type="text" value="30.00"/> |
| Name of Employer | Occupation | | |
| RETAIL PROCESS ENGINEERING | PRESIDENT | | |
| Receipt For: | Aggregate Year-to-Date ▼ | | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General | <input type="text" value="255.00"/> | | |
| <input type="checkbox"/> Other (specify) ▼ | | | |

| | | | |
|---|-------------------------------------|----------|---|
| Full Name (Last, First, Middle Initial) B. CLIFFORD EPSTEIN 335 | | | Date of Receipt |
| Mailing Address 18823 AVENUE BIARRITZ | | | <input type="text" value="08"/> / <input type="text" value="08"/> / <input type="text" value="2014"/> |
| City | State | Zip Code | Transaction ID : SA11AI.90061 |
| LUTZ | FL | 33558 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | <input type="text" value="C"/> | | <input type="text" value="25.00"/> |
| Name of Employer | Occupation | | |
| RETAIL PROCESS ENGINEERING | PRESIDENT | | |
| Receipt For: | Aggregate Year-to-Date ▼ | | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General | <input type="text" value="280.00"/> | | |
| <input type="checkbox"/> Other (specify) ▼ | | | |

| | | | |
|--|-------------------------------------|----------|---|
| Full Name (Last, First, Middle Initial) C. CHARLES EVELAND 957 | | | Date of Receipt |
| Mailing Address 4225 ROSE CREEK ROAD | | | <input type="text" value="08"/> / <input type="text" value="18"/> / <input type="text" value="2014"/> |
| City | State | Zip Code | Transaction ID : SA11AI.90099 |
| ROSEVILLE | CA | 95747 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | <input type="text" value="C"/> | | <input type="text" value="250.00"/> |
| Name of Employer | Occupation | | |
| NONE | RETIRED | | |
| Receipt For: | Aggregate Year-to-Date ▼ | | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General | <input type="text" value="250.00"/> | | |
| <input type="checkbox"/> Other (specify) ▼ | | | |

| | |
|--|-------------------------------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | <input type="text" value="305.00"/> |
| TOTAL This Period (last page this line number only).....▶ | <input type="text"/> |

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

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

FOR LINE NUMBER: PAGE 38 OF 190
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE CONSERVATIVE STRIKEFORCE

A. MR JAMES FELGER 467
 Full Name (Last, First, Middle Initial)
 Mailing Address 4222 N 175 E
 City State Zip Code
 OSSIAN IN 46777
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 SELF EMPLOYED FARMER
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 19 / 2014
Transaction ID : SA11AI.90172
 Amount of Each Receipt this Period
 250.00

B. JAMES FENNELL 777
 Full Name (Last, First, Middle Initial)
 Mailing Address 6960 KILLARNEY DR
 City State Zip Code
 BEAUMONT TX 77706
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 11 / 2014
Transaction ID : SA11AI.90177
 Amount of Each Receipt this Period
 500.00

C. H DUSTIN FILLMORE 761
 Full Name (Last, First, Middle Initial)
 Mailing Address 2712 MANORWOOD TRAIL
 City State Zip Code
 FORT WORTH TX 76109
 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 M / D D D / Y Y Y Y Y Y
 09 / 02 / 2014
Transaction ID : SA11AI.90191
 Amount of Each Receipt this Period
 250.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 1000.00
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 39 OF 190 |
| | (check only one) | |
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 12 |
| | | <input type="checkbox"/> 15 |
| | | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
THE CONSERVATIVE STRIKEFORCE

A. MR RAYMOND FINK 488
Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 134

City WILLIAMSTON State MI Zip Code 48895

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 ▼ **785.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 15 / 2014

Transaction ID : SA11AI.90208

Amount of Each Receipt this Period
75.00

B. GENE FISCARELLI 856
Full Name (Last, First, Middle Initial)

Mailing Address 5020 W MOCKINGBIRD LN

City MC NEAL State AZ Zip Code 85617

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 ▼ **456.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 08 / 2014

Transaction ID : SA11AI.90214

Amount of Each Receipt this Period
230.00

C. GENE FISCARELLI 856
Full Name (Last, First, Middle Initial)

Mailing Address 5020 W MOCKINGBIRD LN

City MC NEAL State AZ Zip Code 85617

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 ▼ **801.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 29 / 2014

Transaction ID : SA11AI.90213

Amount of Each Receipt this Period
345.00

| | |
|--|---------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 650.00 |
| 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 40 OF 190
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE CONSERVATIVE STRIKEFORCE

A. GENE FISCARELLI 856
 Full Name (Last, First, Middle Initial)
 Mailing Address 5020 W MOCKINGBIRD LN
 City State Zip Code
 MC NEAL AZ 85617
 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 ▼
 916.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 20 / 2014
Transaction ID : SA11AI.90212
 Amount of Each Receipt this Period
 115.00

B. GENE FISCARELLI 856
 Full Name (Last, First, Middle Initial)
 Mailing Address 5020 W MOCKINGBIRD LN
 City State Zip Code
 MC NEAL AZ 85617
 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 ▼
 1116.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 23 / 2014
Transaction ID : SA11AI.90215
 Amount of Each Receipt this Period
 200.00

C. BARBARA FITKIN 731
 Full Name (Last, First, Middle Initial)
 Mailing Address 2205 NW 49TH ST
 City State Zip Code
 OKLAHOMA CITY OK 73112
 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 ▼
 230.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 04 / 2014
Transaction ID : SA11AI.90237
 Amount of Each Receipt this Period
 30.00

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) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 41 OF 190
(check only one)
 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. JOHN FLOYD 959

Mailing Address 21 LEMON HILL DR

City State Zip Code
OROVILLE CA 95966

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 09 / 2014

Transaction ID : SA11AI.90280

Amount of Each Receipt this Period
300.00

Full Name (Last, First, Middle Initial)
B. MR LAWRENCE FRAMBURG 606

Mailing Address 1555 N ASTOR ST APT 33E

City State Zip Code
CHICAGO IL 60610

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 ▼
443.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 28 / 2014

Transaction ID : SA11AI.90338

Amount of Each Receipt this Period
25.00

Full Name (Last, First, Middle Initial)
C. MR LAWRENCE FRAMBURG 606

Mailing Address 1555 N ASTOR ST APT 33E

City State Zip Code
CHICAGO IL 60610

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 ▼
478.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 06 / 2014

Transaction ID : SA11AI.90339

Amount of Each Receipt this Period
35.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 360.00

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 42 OF 190 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
THE CONSERVATIVE STRIKEFORCE

A. DR MICHAEL J FUGLE 483
 Full Name (Last, First, Middle Initial)
 Mailing Address 4815 SHELDON RD
 City ROCHESTER State MI Zip Code 48306
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF EMPLOYED Occupation PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 25 / 2014
Transaction ID : SA11AI.90403
 Amount of Each Receipt this Period
 100.00

B. DR MICHAEL J FUGLE 483
 Full Name (Last, First, Middle Initial)
 Mailing Address 4815 SHELDON RD
 City ROCHESTER State MI Zip Code 48306
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF EMPLOYED Occupation PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 15 / 2014
Transaction ID : SA11AI.90404
 Amount of Each Receipt this Period
 100.00

C. MR WARREN B GALKIN 028
 Full Name (Last, First, Middle Initial)
 Mailing Address 29 SAGE DR
 City WARWICK State RI Zip Code 02886
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NATCO PRODUCTS CORP Occupation VICO CHARMAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 25 / 2014
Transaction ID : SA11AI.90438
 Amount of Each Receipt this Period
 2000.00

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 2200.00 |
| 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 43 OF 190
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE CONSERVATIVE STRIKEFORCE

A. VIRGINIA GALLAND 846
 Full Name (Last, First, Middle Initial)
 Mailing Address 4218 VINTAGE CIRCLE
 City State Zip Code
 PROVO UT 84604
 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 M / D D D / Y Y Y Y Y Y
 09 / 08 / 2014
Transaction ID : SA11AI.90441
 Amount of Each Receipt this Period
 250.00

B. MR MICHAEL A GALLUCCI 900
 Full Name (Last, First, Middle Initial)
 Mailing Address 2567 WESTRIDGE RD
 City State Zip Code
 LOS ANGELES CA 90049
 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 ▼
 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 27 / 2014
Transaction ID : SA11AI.90452
 Amount of Each Receipt this Period
 60.00

C. MR MICHAEL A GALLUCCI 900
 Full Name (Last, First, Middle Initial)
 Mailing Address 2567 WESTRIDGE RD
 City State Zip Code
 LOS ANGELES CA 90049
 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 ▼
 270.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 08 / 2014
Transaction ID : SA11AI.90454
 Amount of Each Receipt this Period
 60.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 370.00
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 44 OF 190
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE CONSERVATIVE STRIKEFORCE

A. MR MICHAEL A GALLUCCI 900
 Full Name (Last, First, Middle Initial)
 Mailing Address 2567 WESTRIDGE RD
 City LOS ANGELES State CA Zip Code 90049
 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 ▼ 330.00

Date of Receipt
 09 / 22 / 2014
Transaction ID : SA11AI.90453
 Amount of Each Receipt this Period
 60.00

B. MR MICHAEL A GALLUCCI 900
 Full Name (Last, First, Middle Initial)
 Mailing Address 2567 WESTRIDGE RD
 City LOS ANGELES State CA Zip Code 90049
 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 ▼ 451.00

Date of Receipt
 09 / 25 / 2014
Transaction ID : SA11AI.90455
 Amount of Each Receipt this Period
 121.00

C. MR GEORGE F GARDNER 170
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 38
 City CARLISLE State PA Zip Code 17013
 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
 08 / 06 / 2014
Transaction ID : SA11AI.90488
 Amount of Each Receipt this Period
 300.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 481.00
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 190
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE CONSERVATIVE STRIKEFORCE

A. MRS BETTY GARDNER 648
 Full Name (Last, First, Middle Initial)
 Mailing Address 1572 GOODIN HOLLOW RD
 City NOEL State MO Zip Code 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
 08 / 19 / 2014
Transaction ID : SA11AI.90493
 Amount of Each Receipt this Period
 30.00

B. MRS BETTY GARDNER 648
 Full Name (Last, First, Middle Initial)
 Mailing Address 1572 GOODIN HOLLOW RD
 City NOEL State MO Zip Code 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 ▼ 405.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 08 / 2014
Transaction ID : SA11AI.90492
 Amount of Each Receipt this Period
 180.00

C. MRS BETTY GARDNER 648
 Full Name (Last, First, Middle Initial)
 Mailing Address 1572 GOODIN HOLLOW RD
 City NOEL State MO Zip Code 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 ▼ 465.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 26 / 2014
Transaction ID : SA11AI.90494
 Amount of Each Receipt this Period
 60.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 270.00
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 46 OF 190
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE CONSERVATIVE STRIKEFORCE

A. MRS LUCILLE GARLAND 193
 Full Name (Last, First, Middle Initial)
 Mailing Address 932 SCONNELLTOWN RD
 City WEST CHESTER State PA Zip Code 19382
 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 M / D D D / Y Y Y Y Y Y
 09 / 20 / 2014
Transaction ID : SA11AI.90496
 Amount of Each Receipt this Period
 250.00

B. NANCY GARRETT 970
 Full Name (Last, First, Middle Initial)
 Mailing Address 7799 SW SCHOLLS FERRY ROAD
 City BEAVERTON State OR Zip Code 97008
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 03 / 2014
Transaction ID : SA11AI.90505
 Amount of Each Receipt this Period
 100.00

C. CARL GAUSEWITZ 446
 Full Name (Last, First, Middle Initial)
 Mailing Address 2483 WESTBROOK ST SE
 City MAGNOLIA State OH Zip Code 44643
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 10 / 2014
Transaction ID : SA11AI.90530
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 400.00
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 47 OF 190
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE CONSERVATIVE STRIKEFORCE

A. CARL GAUSEWITZ 446
 Full Name (Last, First, Middle Initial)
 Mailing Address 2483 WESTBROOK ST SE
 City MAGNOLIA State OH Zip Code 44643
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 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
 09 / 02 / 2014
Transaction ID : SA11AI.90531
 Amount of Each Receipt this Period
 35.00

B. CARL GAUSEWITZ 446
 Full Name (Last, First, Middle Initial)
 Mailing Address 2483 WESTBROOK ST SE
 City MAGNOLIA State OH Zip Code 44643
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 290.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 17 / 2014
Transaction ID : SA11AI.90529
 Amount of Each Receipt this Period
 50.00

C. J MICHAEL GEARON 303
 Full Name (Last, First, Middle Initial)
 Mailing Address 4476 WOODLAND BROOK DR
 City ATLANTA State GA Zip Code 30339
 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 M / D D D / Y Y Y Y Y Y
 09 / 25 / 2014
Transaction ID : SA11AI.90537
 Amount of Each Receipt this Period
 250.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 335.00
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 48 OF 190 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
THE CONSERVATIVE STRIKEFORCE

A. MR HERMAN GELBACH 981
 Full Name (Last, First, Middle Initial)
 Mailing Address 1280 SW NORMANDY TER
 City NORMANDY PARK State WA Zip Code 98166
 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 ▼ 280.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 06 / 2014
Transaction ID : SA11AI.90545
 Amount of Each Receipt this Period
 50.00

B. MR BENJAMIN K GIBBS 276
 Full Name (Last, First, Middle Initial)
 Mailing Address 806 SPRINGMOOR DR # 177
 City RALEIGH State NC Zip Code 27615
 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 ▼ 735.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2014
Transaction ID : SA11AI.90589
 Amount of Each Receipt this Period
 400.00

C. MS LISE M GOGA 967
 Full Name (Last, First, Middle Initial)
 Mailing Address 95-1089 PAEMOKU PL
 City MILILANI State HI Zip Code 96789
 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 M / D D D / Y Y Y Y Y Y
 09 / 22 / 2014
Transaction ID : SA11AI.90673
 Amount of Each Receipt this Period
 300.00

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 750.00 |
| 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 49 OF 190 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <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. MS LISE M GOGA 967 | | Date of Receipt |
| Mailing Address 95-1089 PAEMOKU PL | | <input type="text" value="09"/> / <input type="text" value="25"/> / <input type="text" value="2014"/> |
| City | State | Zip Code |
| MILILANI | HI | 96789 |
| FEC ID number of contributing federal political committee. | <input type="text" value="C"/> | Transaction ID : SA11AI.90674 |
| Name of Employer | Occupation | Amount of Each Receipt this Period |
| NONE | RETIRED | <input type="text" value="400.00"/> |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | <input type="text" value="700.00"/> | |

| | | |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial) B. MR NORMAN GOYETTE 902 | | Date of Receipt |
| Mailing Address 319 E OAK AVE | | <input type="text" value="09"/> / <input type="text" value="13"/> / <input type="text" value="2014"/> |
| City | State | Zip Code |
| SEGUNDO | CA | 90245 |
| FEC ID number of contributing federal political committee. | <input type="text" value="C"/> | Transaction ID : SA11AI.90727 |
| Name of Employer | Occupation | Amount of Each Receipt this Period |
| AEROSPACE CORP | ENGINEER | <input type="text" value="500.00"/> |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | <input type="text" value="500.00"/> | |

| | | |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial) C. MR FRANK GRANDONE 060 | | Date of Receipt |
| Mailing Address 43 CARRIAGE DR | | <input type="text" value="07"/> / <input type="text" value="11"/> / <input type="text" value="2014"/> |
| City | State | Zip Code |
| TOLLAND | CT | 06084 |
| FEC ID number of contributing federal political committee. | <input type="text" value="C"/> | Transaction ID : SA11AI.90751 |
| Name of Employer | Occupation | Amount of Each Receipt this Period |
| NONE | RETIRED | <input type="text" value="100.00"/> |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | <input type="text" value="300.00"/> | |

| | |
|--|--------------------------------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | <input type="text" value="1000.00"/> |
| TOTAL This Period (last page this line number only).....▶ | <input type="text"/> |

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

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

FOR LINE NUMBER: PAGE 50 OF 190
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE CONSERVATIVE STRIKEFORCE

A. MR WILLIAM S GRAY 605 III
 Full Name (Last, First, Middle Initial)
 Mailing Address 124 DRAGONFLY
 City State Zip Code
 BURR RIDGE IL 60527
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 WILLIAM GRAY & SONS CO PARTNER
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 15 / 2014
Transaction ID : SA11AI.90771
 Amount of Each Receipt this Period
 400.00

B. MR ROBERT GREEN 303
 Full Name (Last, First, Middle Initial)
 Mailing Address 205 LANDFALL RD NW
 City State Zip Code
 ATLANTA GA 30328
 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 ▼
 205.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 05 / 2014
Transaction ID : SA11AI.90787
 Amount of Each Receipt this Period
 50.00

C. ROBERT GREENWALT 953
 Full Name (Last, First, Middle Initial)
 Mailing Address 1550 DOE TRAIL LANE
 City State Zip Code
 TRACY CA 95376
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 LAWRENCE LIVERMORE NATIONAL SECURI ENGINEER
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 23 / 2014
Transaction ID : SA11AI.90811
 Amount of Each Receipt this Period
 250.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 700.00
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 51 OF 190 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
THE CONSERVATIVE STRIKEFORCE

A. MR RICHARD S GRIFFITH 705
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 91610

| | | |
|-------------------|-------------|-------------------|
| City LAFAYETTE | State LA | Zip Code 70509 |
|-------------------|-------------|-------------------|

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

| | |
|-----------------------------------|------------------------|
| Name of Employer SELF EMPLOYED | Occupation INVESTOR |
|-----------------------------------|------------------------|

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
 08 / 01 / 2014
Transaction ID : SA11AI.90832

Amount of Each Receipt this Period
 1000.00

B. SHIRLEY A HAHN 850
 Full Name (Last, First, Middle Initial)
 Mailing Address 3010 N 49TH ST

| | | |
|-----------------|-------------|-------------------|
| City PHOENIX | State AZ | Zip Code 85018 |
|-----------------|-------------|-------------------|

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

| | |
|--------------------------|-----------------------|
| Name of Employer USPS | 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
 09 / 23 / 2014
Transaction ID : SA11AI.90923

Amount of Each Receipt this Period
 300.00

C. MRS FAROLE A HALUSKA 616
 Full Name (Last, First, Middle Initial)
 Mailing Address 5321 N WOODVIEW

| | | |
|----------------|-------------|-------------------|
| City PEORIA | State IL | Zip Code 61614 |
|----------------|-------------|-------------------|

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
 09 / 28 / 2014
Transaction ID : SA11AI.90959

Amount of Each Receipt this Period
 300.00

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 1600.00 |
| 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 52 OF 190
(check only one)
 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

A. MR ROBERT H HAMBURG 365
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 844
 City State Zip Code
 FOLEY AL 36536
 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 M / D D D / Y Y Y Y Y Y
 09 / 15 / 2014
Transaction ID : SA11AI.90965
 Amount of Each Receipt this Period
 300.00

B. MS DOROTHY HARKNESS 915
 Full Name (Last, First, Middle Initial)
 Mailing Address 925 IRVING DR
 City State Zip Code
 BURBANK CA 91504
 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 M / D D D / Y Y Y Y Y Y
 07 / 10 / 2014
Transaction ID : SA11AI.91042
 Amount of Each Receipt this Period
 100.00

C. MR J KERN HARMILTON 950
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 BLOSSOM HILL RD UNIT E324
 City State Zip Code
 LOS GATOS CA 95032
 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 ▼
 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 13 / 2014
Transaction ID : SA11AI.91045
 Amount of Each Receipt this Period
 500.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 900.00
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 53 OF 190 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <input type="checkbox"/> 14 |

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NAME OF COMMITTEE (In Full)
THE CONSERVATIVE STRIKEFORCE

| | | |
|---|--------------------------------------|---|
| Full Name (Last, First, Middle Initial) A. MR J KERN HARMILTON 950 | | Date of Receipt |
| Mailing Address 800 BLOSSOM HILL RD UNIT E324 | | <input type="text" value="09"/> / <input type="text" value="08"/> / <input type="text" value="2014"/> |
| City | State | Zip Code |
| LOS GATOS | CA | 95032 |
| FEC ID number of contributing federal political committee. | <input type="text" value="C"/> | Transaction ID : SA11AI.91044 |
| Name of Employer | Occupation | Amount of Each Receipt this Period |
| NONE | RETIRED | <input type="text" value="500.00"/> |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | <input type="text" value="1000.00"/> | |

| | | |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial) B. LESTER HAWKINS 970 | | Date of Receipt |
| Mailing Address 11050 SW DENNEY RD | | <input type="text" value="07"/> / <input type="text" value="11"/> / <input type="text" value="2014"/> |
| City | State | Zip Code |
| BEAVERTON | OR | 97008 |
| FEC ID number of contributing federal political committee. | <input type="text" value="C"/> | Transaction ID : SA11AI.91143 |
| Name of Employer | Occupation | Amount of Each Receipt this Period |
| SELF EMPLOYED | LANDSCAPER | <input type="text" value="100.00"/> |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | <input type="text" value="355.00"/> | |

| | | |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial) C. MR LESTER HAWKINS 972 | | Date of Receipt |
| Mailing Address 4473 SE ALDERCREST RD | | <input type="text" value="09"/> / <input type="text" value="06"/> / <input type="text" value="2014"/> |
| City | State | Zip Code |
| PORTLAND | OR | 97222 |
| FEC ID number of contributing federal political committee. | <input type="text" value="C"/> | Transaction ID : SA11AI.91144 |
| Name of Employer | Occupation | Amount of Each Receipt this Period |
| OREGON DECORATIVE ROCK | RETIRED | <input type="text" value="75.00"/> |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | <input type="text" value="325.00"/> | |

| | |
|--|-------------------------------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | <input type="text" value="675.00"/> |
| TOTAL This Period (last page this line number only).....▶ | <input type="text"/> |

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

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

FOR LINE NUMBER: PAGE 54 OF 190
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE CONSERVATIVE STRIKEFORCE

A. MRS DIANA HAWTHORNE 652
 Full Name (Last, First, Middle Initial)
 Mailing Address 1616 GLENBROOK CT
 City COLUMBIA State MO Zip Code 65203
 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 M / D D D / Y Y Y Y Y Y
 07 / 28 / 2014
Transaction ID : SA11AI.91149
 Amount of Each Receipt this Period
 250.00

B. MS ELLA M HELM 300
 Full Name (Last, First, Middle Initial)
 Mailing Address 3385 HALLMARK DR SE
 City MARIETTA State GA Zip Code 30067
 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 M / D D D / Y Y Y Y Y Y
 07 / 28 / 2014
Transaction ID : SA11AI.91204
 Amount of Each Receipt this Period
 200.00

C. MS ELLA M HELM 300
 Full Name (Last, First, Middle Initial)
 Mailing Address 3385 HALLMARK DR SE
 City MARIETTA State GA Zip Code 30067
 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 ▼ 425.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 19 / 2014
Transaction ID : SA11AI.91203
 Amount of Each Receipt this Period
 100.00

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 55 OF 190 |
| | (check only one) | |
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 12 |
| | | <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. MS ELLA M HELM 300 | | Date of Receipt |
| Mailing Address 3385 HALLMARK DR SE | | <input type="text" value="09"/> / <input type="text" value="25"/> / <input type="text" value="2014"/> |
| City | State | Transaction ID : SA11AI.91202 |
| MARIETTA | GA | Amount of Each Receipt this Period |
| Zip Code | | <input type="text" value="100.00"/> |
| 30067 | | |
| FEC ID number of contributing federal political committee. | <input type="text" value="C"/> | |
| Name of Employer | Occupation | |
| NONE | RETIRED | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General | <input type="text" value="525.00"/> | |
| <input type="checkbox"/> Other (specify) ▼ | | |

| | | |
|--|-------------------------------------|---|
| Full Name (Last, First, Middle Initial) B. MRS SHIRLEY H HENDERSON 970 | | Date of Receipt |
| Mailing Address PO BOX 787 | | <input type="text" value="08"/> / <input type="text" value="27"/> / <input type="text" value="2014"/> |
| City | State | Transaction ID : SA11AI.91225 |
| BEAVERCREEK | OR | Amount of Each Receipt this Period |
| Zip Code | | <input type="text" value="200.00"/> |
| 97004 | | |
| FEC ID number of contributing federal political committee. | <input type="text" value="C"/> | |
| Name of Employer | Occupation | |
| RETIRED | HOMEMAKER | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General | <input type="text" value="400.00"/> | |
| <input type="checkbox"/> Other (specify) ▼ | | |

| | | |
|--|-------------------------------------|---|
| Full Name (Last, First, Middle Initial) C. MS MILAGROS C HERNANDEZ 489 | | Date of Receipt |
| Mailing Address 2315 GROESBECK AVE | | <input type="text" value="09"/> / <input type="text" value="16"/> / <input type="text" value="2014"/> |
| City | State | Transaction ID : SA11AI.91258 |
| LANSING | MI | Amount of Each Receipt this Period |
| Zip Code | | <input type="text" value="90.00"/> |
| 48912 | | |
| FEC ID number of contributing federal political committee. | <input type="text" value="C"/> | |
| Name of Employer | Occupation | |
| NONE | RETIRED | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General | <input type="text" value="270.00"/> | |
| <input type="checkbox"/> Other (specify) ▼ | | |

| | |
|--|-------------------------------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | <input type="text" value="390.00"/> |
| TOTAL This Period (last page this line number only).....▶ | <input type="text"/> |

**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 56 OF 190 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | | <input type="checkbox"/> 15 |
| | | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
THE CONSERVATIVE STRIKEFORCE

A. MS MILAGROS C HERNANDEZ 489
 Full Name (Last, First, Middle Initial)
 Mailing Address 2315 GROESBECK AVE
 City LANSING State MI Zip Code 48912
 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 ▼ 360.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 23 / 2014
Transaction ID : SA11AI.91259
 Amount of Each Receipt this Period
 90.00

B. TATNALL HILLMAN 816
 Full Name (Last, First, Middle Initial)
 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 NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 4500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 08 / 2014
Transaction ID : SA11AI.91327
 Amount of Each Receipt this Period
 500.00

C. TATNALL HILLMAN 816
 Full Name (Last, First, Middle Initial)
 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 NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 12 / 2014
Transaction ID : SA11AI.91329
 Amount of Each Receipt this Period
 500.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 1090.00
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 57 OF 190
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE CONSERVATIVE STRIKEFORCE

A. DAVID HILLS 452
 Full Name (Last, First, Middle Initial)
 Mailing Address 7345 SANDERSON PLACE
 City State Zip Code
 CINCINNATI OH 45243
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 DUNNHUMBY ATTORNEY
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 25 / 2014
Transaction ID : SA11AI.91332
 Amount of Each Receipt this Period
 50.00

B. ROBERT A HOEHN 662
 Full Name (Last, First, Middle Initial)
 Mailing Address 11436 HIGH DRIVE
 City State Zip Code
 LEAWOOD KS 66211
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 LICO, INC CHAIRMAN
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 23 / 2014
Transaction ID : SA11AI.91352
 Amount of Each Receipt this Period
 1000.00

C. MRS CAROL ANN HOFFMAN 801
 Full Name (Last, First, Middle Initial)
 Mailing Address 1854 W CAPE COD WAY
 City State Zip Code
 LITTLETON CO 80120
 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 M / D D D / Y Y Y Y Y Y
 09 / 20 / 2014
Transaction ID : SA11AI.91367
 Amount of Each Receipt this Period
 250.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 1300.00
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 58 OF 190 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
THE CONSERVATIVE STRIKEFORCE

A. MR GREG J HUGHES 454
 Full Name (Last, First, Middle Initial)
 Mailing Address 2719 TIHART WAY
 City BEAVERCREEK State OH Zip Code 45430
 FEC ID number of contributing federal political committee. **C**
 Name of Employer USAF WRIGHT-PATTERSON AFB Occupation ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 10 / 2014
Transaction ID : SA11AI.91475
 Amount of Each Receipt this Period
 60.00

B. MR GREG J HUGHES 454
 Full Name (Last, First, Middle Initial)
 Mailing Address 2719 TIHART WAY
 City BEAVERCREEK State OH Zip Code 45430
 FEC ID number of contributing federal political committee. **C**
 Name of Employer USAF WRIGHT-PATTERSON AFB Occupation ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 19 / 2014
Transaction ID : SA11AI.91476
 Amount of Each Receipt this Period
 60.00

C. MRS ETHEL HUSER 667
 Full Name (Last, First, Middle Initial)
 Mailing Address 1704 DECATUR RD
 City FREDONIA State KS Zip Code 66736
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation HOUSEWIFE
 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
 09 / 25 / 2014
Transaction ID : SA11AI.91511
 Amount of Each Receipt this Period
 260.00

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 380.00 |
| 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 59 OF 190
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE CONSERVATIVE STRIKEFORCE

A. ROBERT HUTCHESON 215
 Full Name (Last, First, Middle Initial)
 Mailing Address 306 SCHLEY ST
 City CUMBERLAND State MD Zip Code 21502
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 29 / 2014
Transaction ID : SA11AI.91514
 Amount of Each Receipt this Period
 25.00

B. MR HORACE D JACKSON 479
 Full Name (Last, First, Middle Initial)
 Mailing Address 1727 TRACE 17
 City WEST LAFAYETTE State IN Zip Code 47906
 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 ▼ 205.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 09 / 2014
Transaction ID : SA11AI.91575
 Amount of Each Receipt this Period
 25.00

C. MS PATRICIA JACOBSEN 956
 Full Name (Last, First, Middle Initial)
 Mailing Address 7940 AMALFI WAY
 City FAIR OAKS State CA Zip Code 95628
 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 ▼ 445.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 10 / 2014
Transaction ID : SA11AI.91593
 Amount of Each Receipt this Period
 35.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 85.00
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 60 OF 190
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE CONSERVATIVE STRIKEFORCE

A. MS PATRICIA JACOBSEN 956
 Full Name (Last, First, Middle Initial)
 Mailing Address 7940 AMALFI WAY
 City State Zip Code
 FAIR OAKS CA 95628
 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 ▼
 495.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 05 / 2014
Transaction ID : SA11AI.91591
 Amount of Each Receipt this Period
 50.00

B. MS PATRICIA JACOBSEN 956
 Full Name (Last, First, Middle Initial)
 Mailing Address 7940 AMALFI WAY
 City State Zip Code
 FAIR OAKS CA 95628
 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 ▼
 545.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 06 / 2014
Transaction ID : SA11AI.91592
 Amount of Each Receipt this Period
 50.00

C. MS PATRICIA JACOBSEN 956
 Full Name (Last, First, Middle Initial)
 Mailing Address 7940 AMALFI WAY
 City State Zip Code
 FAIR OAKS CA 95628
 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 ▼
 580.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 15 / 2014
Transaction ID : SA11AI.91594
 Amount of Each Receipt this Period
 35.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 135.00
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 61 OF 190 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | | <input type="checkbox"/> 15 |
| | | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
THE CONSERVATIVE STRIKEFORCE

A. MR LOREN A JAHN 604
 Full Name (Last, First, Middle Initial)
 Mailing Address 13149 N COUNTRY CLUB CT
 City PALOS HEIGHTS State IL Zip Code 60463
 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
 07 / 11 / 2014
Transaction ID : SA11AI.91608
 Amount of Each Receipt this Period
 250.00

B. MR LOREN A JAHN 604
 Full Name (Last, First, Middle Initial)
 Mailing Address 13149 N COUNTRY CLUB CT
 City PALOS HEIGHTS State IL Zip Code 60463
 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 ▼ 650.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2014
Transaction ID : SA11AI.91607
 Amount of Each Receipt this Period
 300.00

C. VILAS JOHNSON 287
 Full Name (Last, First, Middle Initial)
 Mailing Address 111 AZALEA PARK DR
 City HENDERSONVILLE State NC Zip Code 28792
 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 M / D D D / Y Y Y Y Y Y
 07 / 21 / 2014
Transaction ID : SA11AI.91690
 Amount of Each Receipt this Period
 30.00

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 580.00 |
| 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 62 OF 190 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
THE CONSERVATIVE STRIKEFORCE

A. RUSSELL L JOHNSON 921
Full Name (Last, First, Middle Initial)

Mailing Address 1810 AVENIDA DEL MUNDO #503

| | | |
|------------------|-------------|-------------------|
| City CORONADO | State CA | Zip Code 92118 |
|------------------|-------------|-------------------|

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 |
| 08 | / | 07 | / | 2014 |

Transaction ID : SA11AI.91746

Amount of Each Receipt this Period
100.00

B. RUSSELL L JOHNSON 921
Full Name (Last, First, Middle Initial)

Mailing Address 1810 AVENIDA DEL MUNDO #503

| | | |
|------------------|-------------|-------------------|
| City CORONADO | State CA | Zip Code 92118 |
|------------------|-------------|-------------------|

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 ▼
450.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 08 | / | 23 | / | 2014 |

Transaction ID : SA11AI.91747

Amount of Each Receipt this Period
100.00

C. RUSSELL L JOHNSON 921
Full Name (Last, First, Middle Initial)

Mailing Address 1810 AVENIDA DEL MUNDO #503

| | | |
|------------------|-------------|-------------------|
| City CORONADO | State CA | Zip Code 92118 |
|------------------|-------------|-------------------|

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 ▼
550.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 08 | / | 27 | / | 2014 |

Transaction ID : SA11AI.91744

Amount of Each Receipt this Period
100.00

| | |
|---|--------|
| SUBTOTAL of Receipts This Page (optional)..... | 300.00 |
| 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 63 OF 190 |
| | (check only one) | |
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 12 |
| | | <input type="checkbox"/> 15 |
| | | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
THE CONSERVATIVE STRIKEFORCE

A. RUSSELL L JOHNSON 921
Full Name (Last, First, Middle Initial)

Mailing Address 1810 AVENIDA DEL MUNDO #503

| | | |
|----------|-------|----------|
| City | State | Zip Code |
| CORONADO | CA | 92118 |

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 ▼
650.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09 | / | 15 | / | 2014 |

Transaction ID : SA11AI.91745

Amount of Each Receipt this Period
100.00

B. MRS R B JOHNSON 974
Full Name (Last, First, Middle Initial)

Mailing Address 265 W 20TH AVE

| | | |
|--------|-------|----------|
| City | State | Zip Code |
| EUGENE | OR | 97405 |

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

Transaction ID : SA11AI.91756

Amount of Each Receipt this Period
300.00

C. BETTY JONES 357
Full Name (Last, First, Middle Initial)

Mailing Address 116 SKYHAWK DR

| | | |
|---------|-------|----------|
| City | State | Zip Code |
| HARVEST | AL | 35749 |

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 M | / | D D D | / | Y Y Y Y Y Y |
| 07 | / | 17 | / | 2014 |

Transaction ID : SA11AI.91786

Amount of Each Receipt this Period
100.00

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 500.00 |
| 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 64 OF 190
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE CONSERVATIVE STRIKEFORCE

A. MELVIN KAFTAN 480
 Full Name (Last, First, Middle Initial)
 Mailing Address 29100 NORTHWESTERN HWY STE 260
 City SOUTHFIELD State MI Zip Code 48034
 FEC ID number of contributing federal political committee. **C**
 Name of Employer KAFTAN ENTERPRISES Occupation REAL ESTATE
 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
 09 / 23 / 2014
Transaction ID : SA11AI.91863
 Amount of Each Receipt this Period
 100.00

B. JANICE KALISKI 031
 Full Name (Last, First, Middle Initial)
 Mailing Address 142 PEAK STREET
 City MANCHESTER State NH Zip Code 03104
 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 M / D D D / Y Y Y Y Y Y
 07 / 30 / 2014
Transaction ID : SA11AI.91874
 Amount of Each Receipt this Period
 50.00

C. GENTRY KARR 906
 Full Name (Last, First, Middle Initial)
 Mailing Address 9429 CALMADA AVE
 City WHITTIER State CA Zip Code 90605
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HDR ENGINEERING INC Occupation SENIOR CONSTRUCTION INSPECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 22 / 2014
Transaction ID : SA11AI.91893
 Amount of Each Receipt this Period
 250.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 400.00
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 65 OF 190
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE CONSERVATIVE STRIKEFORCE

A. MR LEONARD M KIRK 210
 Full Name (Last, First, Middle Initial)
 Mailing Address 6 HUNTER DR
 City State Zip Code
 BEL AIR MD 21014
 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 ▼
 1125.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 10 / 2014
Transaction ID : SA11AI.92091
 Amount of Each Receipt this Period
 500.00

B. MR LEONARD M KIRK 210
 Full Name (Last, First, Middle Initial)
 Mailing Address 6 HUNTER DR
 City State Zip Code
 BEL AIR MD 21014
 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 ▼
 1626.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2014
Transaction ID : SA11AI.92092
 Amount of Each Receipt this Period
 501.00

C. GARY KIRKE 502
 Full Name (Last, First, Middle Initial)
 Mailing Address 5465 MILLS CIVIC PKWY
 UNIT 400
 City State Zip Code
 WEST DES MOINES IA 50266
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 SELF EMPLOYED CEO
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 525.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 06 / 2014
Transaction ID : SA11AI.92095
 Amount of Each Receipt this Period
 175.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 1176.00
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 66 OF 190
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE CONSERVATIVE STRIKEFORCE

A. LOUISE KNOELL 357
 Full Name (Last, First, Middle Initial)
 Mailing Address 113 LAUREL BEND DR
 City MERIDIANVILLE State AL Zip Code 35759
 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 ▼ 675.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 17 / 2014
Transaction ID : SA11AI.92148
 Amount of Each Receipt this Period
 125.00

B. LIV KNUDSON 957
 Full Name (Last, First, Middle Initial)
 Mailing Address 1408 GOLD CIR
 City ROCKLAND State CA Zip Code 95765
 FEC ID number of contributing federal political committee. **C**
 Name of Employer JIMBOYS TACOS Occupation SELF EMPLOYED
 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
 09 / 11 / 2014
Transaction ID : SA11AI.92154
 Amount of Each Receipt this Period
 100.00

C. MR DANIEL D KUBIN 770
 Full Name (Last, First, Middle Initial)
 Mailing Address 1701 BLOUNT ST
 City HOUSTON State TX Zip Code 77008
 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 ▼ 720.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 18 / 2014
Transaction ID : SA11AI.92266
 Amount of Each Receipt this Period
 200.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 425.00
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 67 OF 190 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
THE CONSERVATIVE STRIKEFORCE

A. MR DANIEL D KUBIN 770
 Full Name (Last, First, Middle Initial)
 Mailing Address 1701 BLOUNT ST
 City HOUSTON State TX Zip Code 77008
 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 ▼ 920.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2014
Transaction ID : SA11AI.92265
 Amount of Each Receipt this Period
 200.00

B. LUDWIG KUCHAR 604
 Full Name (Last, First, Middle Initial)
 Mailing Address 901 SHERWOOD PL
 City JOLIET State IL Zip Code 60435
 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 M / D D D / Y Y Y Y Y Y
 09 / 24 / 2014
Transaction ID : SA11AI.92267
 Amount of Each Receipt this Period
 50.00

C. MR LAWRENCE KUHN 140
 Full Name (Last, First, Middle Initial)
 Mailing Address 5853 BROADWAY ST
 City LANCASTER State NY Zip Code 14086
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation DISABLED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 28 / 2014
Transaction ID : SA11AI.92271
 Amount of Each Receipt this Period
 35.00

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 285.00 |
| 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 68 OF 190
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE CONSERVATIVE STRIKEFORCE

A. MR LAWRENCE M KUHN 140
 Full Name (Last, First, Middle Initial)
 Mailing Address 5853 BROADWAY ST
 City LANCASTER, State NY Zip Code 14086
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation NOT EMPLOYED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 12 / 2014
Transaction ID : SA11AI.92274
 Amount of Each Receipt this Period
 25.00

B. MR LAWRENCE M KUHN 140
 Full Name (Last, First, Middle Initial)
 Mailing Address 5853 BROADWAY ST
 City LANCASTER, State NY Zip Code 14086
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation NOT EMPLOYED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2014
Transaction ID : SA11AI.92273
 Amount of Each Receipt this Period
 25.00

C. MARY LAATZ 462
 Full Name (Last, First, Middle Initial)
 Mailing Address 6824 WILLOW RD
 City INDIANAPOLIS State IN Zip Code 46220
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 10 / 2014
Transaction ID : SA11AI.92298
 Amount of Each Receipt this Period
 400.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 450.00
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 69 OF 190 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | | <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. MR EDWARD J LEIK 330 | | Date of Receipt |
| Mailing Address 18010 NW 15TH CT | | <input type="text" value="08"/> / <input type="text" value="22"/> / <input type="text" value="2014"/> |
| City | State | Zip Code |
| PEMBROKE PINES | FL | 33029 |
| FEC ID number of contributing federal political committee. | <input type="text" value="C"/> | Transaction ID : SA11AI.92465 |
| Name of Employer | Occupation | Amount of Each Receipt this Period |
| | | <input type="text" value="300.00"/> |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | <input type="text" value="300.00"/> | |

| | | |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial) B. MR DONALD H LEIN 148 | | Date of Receipt |
| Mailing Address 62 JANIVAR DR | | <input type="text" value="07"/> / <input type="text" value="28"/> / <input type="text" value="2014"/> |
| City | State | Zip Code |
| ITHACA | NY | 14850 |
| FEC ID number of contributing federal political committee. | <input type="text" value="C"/> | Transaction ID : SA11AI.92471 |
| Name of Employer | Occupation | Amount of Each Receipt this Period |
| CORNELL ANIMAL HEALTH DIAGNOSTIC CTR | PROFESSOR EMERITUS | <input type="text" value="100.00"/> |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | <input type="text" value="300.00"/> | |

| | | |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial) C. MR DONALD H LEIN 148 | | Date of Receipt |
| Mailing Address 62 JANIVAR DR | | <input type="text" value="08"/> / <input type="text" value="19"/> / <input type="text" value="2014"/> |
| City | State | Zip Code |
| ITHACA | NY | 14850 |
| FEC ID number of contributing federal political committee. | <input type="text" value="C"/> | Transaction ID : SA11AI.92470 |
| Name of Employer | Occupation | Amount of Each Receipt this Period |
| CORNELL ANIMAL HEALTH DIAGNOSTIC CTI | PROFESSOR EMERITUS | <input type="text" value="200.00"/> |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | <input type="text" value="500.00"/> | |

| | |
|--|-------------------------------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | <input type="text" value="600.00"/> |
| TOTAL This Period (last page this line number only).....▶ | <input type="text" value=""/> |

**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 70 OF 190 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
THE CONSERVATIVE STRIKEFORCE

A. CHAD LEONARD 200
Full Name (Last, First, Middle Initial)

Mailing Address 1514 17TH ST NW #615

| | | |
|--------------------|-------------|-------------------|
| City WASHINGTON | State DC | Zip Code 20036 |
|--------------------|-------------|-------------------|

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

| | |
|---|-----------------------------|
| Name of Employer CW LEONARD CONSULTING | Occupation IT CONSULTANT |
|---|-----------------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09 | / | 23 | / | 2014 |

Transaction ID : SA11AI.92482

Amount of Each Receipt this Period
500.00

B. ONA LESTER 300
Full Name (Last, First, Middle Initial)

Mailing Address 1101 HUMPHRIES RD NW

| | | |
|-----------------|-------------|-------------------|
| City CONYERS | State GA | Zip Code 30012 |
|-----------------|-------------|-------------------|

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 ▼
425.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07 | / | 10 | / | 2014 |

Transaction ID : SA11AI.92489

Amount of Each Receipt this Period
35.00

C. MRS ONA F LESTER 300
Full Name (Last, First, Middle Initial)

Mailing Address 1101 HUMPHRIES RD NW

| | | |
|-----------------|-------------|-------------------|
| City CONYERS | State GA | Zip Code 30012 |
|-----------------|-------------|-------------------|

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 ▼
235.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 08 | / | 19 | / | 2014 |

Transaction ID : SA11AI.92492

Amount of Each Receipt this Period
160.00

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 695.00 |
| 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 71 OF 190 |
| | (check only one) | |
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 12 |
| | | <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. MRS ONA F LESTER 300 | | Date of Receipt |
| Mailing Address 1101 HUMPHRIES RD NW | | <input type="text" value="09"/> / <input type="text" value="24"/> / <input type="text" value="2014"/> |
| City | State | Zip Code |
| CONYERS | GA | 30012 |
| FEC ID number of contributing federal political committee. | | Transaction ID : SA11AI.92493 |
| FEC ID number of contributing federal political committee. <input type="text" value="C"/> | | Amount of Each Receipt this Period |
| | | <input type="text" value="710.00"/> |
| Name of Employer | Occupation | |
| NONE | RETIRED | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General | <input type="text" value="945.00"/> | |
| <input type="checkbox"/> Other (specify) ▼ | | |

| | | |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial) B. DALE LEVINE 130 | | Date of Receipt |
| Mailing Address 42 CHURCH ST UNIT 309 | | <input type="text" value="07"/> / <input type="text" value="30"/> / <input type="text" value="2014"/> |
| City | State | Zip Code |
| CORTLAND | NY | 13045 |
| FEC ID number of contributing federal political committee. | | Transaction ID : SA11AI.92502 |
| FEC ID number of contributing federal political committee. <input type="text" value="C"/> | | Amount of Each Receipt this Period |
| | | <input type="text" value="35.00"/> |
| Name of Employer | Occupation | |
| NONE | RETIRED | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General | <input type="text" value="285.00"/> | |
| <input type="checkbox"/> Other (specify) ▼ | | |

| | | |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial) C. DALE LEVINE 130 | | Date of Receipt |
| Mailing Address 42 CHURCH ST UNIT 309 | | <input type="text" value="08"/> / <input type="text" value="05"/> / <input type="text" value="2014"/> |
| City | State | Zip Code |
| CORTLAND | NY | 13045 |
| FEC ID number of contributing federal political committee. | | Transaction ID : SA11AI.92503 |
| FEC ID number of contributing federal political committee. <input type="text" value="C"/> | | Amount of Each Receipt this Period |
| | | <input type="text" value="25.00"/> |
| Name of Employer | Occupation | |
| NONE | RETIRED | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General | <input type="text" value="310.00"/> | |
| <input type="checkbox"/> Other (specify) ▼ | | |

| | |
|--|-------------------------------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | <input type="text" value="770.00"/> |
| TOTAL This Period (last page this line number only).....▶ | <input type="text" value=""/> |

**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 72 OF 190 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | | <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. DALE LEVINE 130 | | Date of Receipt |
| Mailing Address 42 CHURCH ST UNIT 309 | | <input type="text" value="08"/> / <input type="text" value="12"/> / <input type="text" value="2014"/> |
| City CORTLAND | State NY | Zip Code 13045 |
| FEC ID number of contributing federal political committee. <input type="text" value="C"/> | | Transaction ID : SA11AI.92505 |
| Name of Employer NONE | | Amount of Each Receipt this Period |
| Occupation RETIRED | | <input type="text" value="35.00"/> |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ | |
| | <input type="text" value="345.00"/> | |

| | | |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial) B. DALE LEVINE 130 | | Date of Receipt |
| Mailing Address 42 CHURCH ST UNIT 309 | | <input type="text" value="08"/> / <input type="text" value="29"/> / <input type="text" value="2014"/> |
| City CORTLAND | State NY | Zip Code 13045 |
| FEC ID number of contributing federal political committee. <input type="text" value="C"/> | | Transaction ID : SA11AI.92504 |
| Name of Employer NONE | | Amount of Each Receipt this Period |
| Occupation RETIRED | | <input type="text" value="35.00"/> |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ | |
| | <input type="text" value="380.00"/> | |

| | | |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial) C. MS MARJORIE R LINDSEY 933 | | Date of Receipt |
| Mailing Address 10202 DUTCH IRIS DR | | <input type="text" value="08"/> / <input type="text" value="28"/> / <input type="text" value="2014"/> |
| City BAKERSFIELD | State CA | Zip Code 93311 |
| FEC ID number of contributing federal political committee. <input type="text" value="C"/> | | Transaction ID : SA11AI.92547 |
| Name of Employer NONE | | Amount of Each Receipt this Period |
| Occupation HOMEMAKER | | <input type="text" value="200.00"/> |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ | |
| | <input type="text" value="300.00"/> | |

| | |
|--|-------------------------------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | <input type="text" value="270.00"/> |
| TOTAL This Period (last page this line number only).....▶ | <input type="text"/> |

**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 73 OF 190 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | | <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. MS MARJORIE R LINDSEY 933 | | Date of Receipt |
| Mailing Address 10202 DUTCH IRIS DR | | <input type="text" value="09"/> / <input type="text" value="29"/> / <input type="text" value="2014"/> |
| City | State | Zip Code |
| BAKERSFIELD | CA | 93311 |
| FEC ID number of contributing federal political committee. | <input type="text" value="C"/> | Transaction ID : SA11AI.92548 |
| Name of Employer | Occupation | Amount of Each Receipt this Period |
| NONE | HOMEMAKER | <input type="text" value="300.00"/> |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | <input type="text" value="600.00"/> | |

| | | |
|---|--------------------------------------|---|
| Full Name (Last, First, Middle Initial) B. MRS LINDA R LONNECKER 804 | | Date of Receipt |
| Mailing Address PO BOX 7384 | | <input type="text" value="09"/> / <input type="text" value="13"/> / <input type="text" value="2014"/> |
| City | State | Zip Code |
| GOLDEN | CO | 80403 |
| FEC ID number of contributing federal political committee. | <input type="text" value="C"/> | Transaction ID : SA11AI.92609 |
| Name of Employer | Occupation | Amount of Each Receipt this Period |
| NONE | RETIRED | <input type="text" value="1000.00"/> |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | <input type="text" value="1000.00"/> | |

| | | |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial) C. DR WALTER S F LUNG 968 DDS | | Date of Receipt |
| Mailing Address 4244 HUANUI ST | | <input type="text" value="09"/> / <input type="text" value="22"/> / <input type="text" value="2014"/> |
| City | State | Zip Code |
| HONOLULU | HI | 96816 |
| FEC ID number of contributing federal political committee. | <input type="text" value="C"/> | Transaction ID : SA11AI.92663 |
| Name of Employer | Occupation | Amount of Each Receipt this Period |
| RETIRED | DENTIST | <input type="text" value="105.00"/> |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | <input type="text" value="210.00"/> | |

| | |
|---|--------------------------------------|
| SUBTOTAL of Receipts This Page (optional)..... | <input type="text" value="1405.00"/> |
| TOTAL This Period (last page this line number only)..... | <input type="text"/> |

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

| | | |
|---|------------------------------|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: | PAGE 74 OF 190 |
| | (check only one) | |
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 12 |
| | | <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. DR WALTER S F LUNG 968 DDS | | | Date of Receipt |
| Mailing Address 4244 HUANUI ST | | | <input type="text" value="09"/> / <input type="text" value="25"/> / <input type="text" value="2014"/> |
| City | State | Zip Code | Transaction ID : SA11AI.92662 |
| HONOLULU | HI | 96816 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | <input type="text" value="C"/> | | <input type="text" value="110.00"/> |
| Name of Employer | Occupation | | |
| RETIRED | DENTIST | | |
| Receipt For: | Aggregate Year-to-Date ▼ | | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General | <input type="text" value="320.00"/> | | |
| <input type="checkbox"/> Other (specify) ▼ | | | |

| | | | |
|---|-------------------------------------|----------|---|
| Full Name (Last, First, Middle Initial) B. ANTONIA L MARSHALL 934 | | | Date of Receipt |
| Mailing Address PO BOX 399 | | | <input type="text" value="09"/> / <input type="text" value="08"/> / <input type="text" value="2014"/> |
| City | State | Zip Code | Transaction ID : SA11AI.92796 |
| PISMO BEACH | CA | 93448 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | <input type="text" value="C"/> | | <input type="text" value="250.00"/> |
| Name of Employer | Occupation | | |
| | | | |
| Receipt For: | Aggregate Year-to-Date ▼ | | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General | <input type="text" value="250.00"/> | | |
| <input type="checkbox"/> Other (specify) ▼ | | | |

| | | | |
|--|-------------------------------------|----------|---|
| Full Name (Last, First, Middle Initial) C. MR DOUG MASTERS 688 | | | Date of Receipt |
| Mailing Address 80152 NINE MILE AVE | | | <input type="text" value="09"/> / <input type="text" value="03"/> / <input type="text" value="2014"/> |
| City | State | Zip Code | Transaction ID : SA11AI.92849 |
| ARCADIA | NE | 68815 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | <input type="text" value="C"/> | | <input type="text" value="50.00"/> |
| Name of Employer | Occupation | | |
| NONE | RETIRED | | |
| Receipt For: | Aggregate Year-to-Date ▼ | | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General | <input type="text" value="245.00"/> | | |
| <input type="checkbox"/> Other (specify) ▼ | | | |

| | |
|--|-------------------------------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | <input type="text" value="410.00"/> |
| TOTAL This Period (last page this line number only).....▶ | <input type="text" value=""/> |

**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 75 OF 190 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | | <input type="checkbox"/> 15 |
| | | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
THE CONSERVATIVE STRIKEFORCE

A. MS JOAN MCCORMACK 910
 Full Name (Last, First, Middle Initial)
 Mailing Address 10209 HELENDALE AVE
 City TUJUNGA State CA Zip Code 91042
 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 M / D D D / Y Y Y Y Y Y
 09 / 16 / 2014
Transaction ID : SA11AI.92933
 Amount of Each Receipt this Period
 300.00

B. LARRY MCCOY 624
 Full Name (Last, First, Middle Initial)
 Mailing Address 206 N HOWARD ST
 City ROBINSON State IL Zip Code 62454
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 ROBINSON TOWNSHIP SUPERVISOR
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 27 / 2014
Transaction ID : SA11AI.92939
 Amount of Each Receipt this Period
 250.00

C. BARBARA MCDONALD 774
 Full Name (Last, First, Middle Initial)
 Mailing Address 1809 HAWTHORN DRIVE
 City RICHMOND State TX Zip Code 77469
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 NONE RETIRED TEACHER
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 04 / 2014
Transaction ID : SA11AI.92969
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 650.00
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 76 OF 190
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE CONSERVATIVE STRIKEFORCE

A. MS BETTY MCPHEETERS 691
 Full Name (Last, First, Middle Initial)
 Mailing Address 23998 S MCPHEETERS RD
 City GOTHENBURG State NE Zip Code 69138
 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 ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 16 / 2014
Transaction ID : SA11AI.93046
 Amount of Each Receipt this Period
 300.00

B. MR EDWIN B MEADE 232 JR
 Full Name (Last, First, Middle Initial)
 Mailing Address 1500 WESTBROOK CT APT 3144
 City RICHMOND State VA Zip Code 23227
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 218.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 21 / 2014
Transaction ID : SA11AI.93059
 Amount of Each Receipt this Period
 50.00

C. MR EDWIN B MEADE 232 JR
 Full Name (Last, First, Middle Initial)
 Mailing Address 1500 WESTBROOK CT APT 3144
 City RICHMOND State VA Zip Code 23227
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 233.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 19 / 2014
Transaction ID : SA11AI.93062
 Amount of Each Receipt this Period
 15.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 365.00
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 77 OF 190 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <input type="checkbox"/> 14 |

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NAME OF COMMITTEE (In Full)
THE CONSERVATIVE STRIKEFORCE

| | | |
|---|------------------------------------|---|
| Full Name (Last, First, Middle Initial) A. MR EDWIN B MEADE 232 JR | | Date of Receipt |
| Mailing Address 1500 WESTBROOK CT APT 3144 | | M M M / D D D / Y Y Y Y Y Y 09 / 29 / 2014 |
| City | State | Zip Code |
| RICHMOND | VA | 23227 |
| FEC ID number of contributing federal political committee. | Transaction ID : SA11AI.93060 | |
| | Amount of Each Receipt this Period | |
| | 75.00 | |
| Name of Employer | Occupation | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | 308.00 | |

| | | |
|---|------------------------------------|---|
| Full Name (Last, First, Middle Initial) B. MICHAEL MILLER 600 | | Date of Receipt |
| Mailing Address 123 WEST MAIN ST | | M M M / D D D / Y Y Y Y Y Y 09 / 25 / 2014 |
| City | State | Zip Code |
| BARRINGTON | IL | 60010 |
| FEC ID number of contributing federal political committee. | Transaction ID : SA11AI.93182 | |
| | Amount of Each Receipt this Period | |
| | 250.00 | |
| Name of Employer | Occupation | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | 250.00 | |

| | | |
|---|------------------------------------|---|
| Full Name (Last, First, Middle Initial) C. MICHAEL JAMES MILLER 600 | | Date of Receipt |
| Mailing Address 123 WEST MAIN ST | | M M M / D D D / Y Y Y Y Y Y 08 / 20 / 2014 |
| City | State | Zip Code |
| BARRINGTON | IL | 60010 |
| FEC ID number of contributing federal political committee. | Transaction ID : SA11AI.93184 | |
| | Amount of Each Receipt this Period | |
| | 250.00 | |
| Name of Employer | Occupation | |
| SELF EMPLOYED | JEWELER | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | 250.00 | |

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 575.00 |
| 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 78 OF 190 |
| | (check only one) | |
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 12 |
| | | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
THE CONSERVATIVE STRIKEFORCE

A. MR KENDALL C MILLER 936
 Full Name (Last, First, Middle Initial)
 Mailing Address 7350 WAKEFIELD AVE
 City REEDLEY State CA Zip Code 93654
 FEC ID number of contributing federal political committee. **C**
 Name of Employer KENCAROL INC Occupation FARM MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 29 / 2014
Transaction ID : SA11AI.93203
 Amount of Each Receipt this Period
 750.00

B. MR DOUGLAS MILLER 959
 Full Name (Last, First, Middle Initial)
 Mailing Address 714 N HUMBOLDT AVE
 APT 901
 City WILLOWS State CA Zip Code 95988
 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 M / D D D / Y Y Y Y Y Y
 07 / 15 / 2014
Transaction ID : SA11AI.93207
 Amount of Each Receipt this Period
 1000.00

C. MR DOUGLAS MILLER 959
 Full Name (Last, First, Middle Initial)
 Mailing Address 714 N HUMBOLDT AVE
 APT 901
 City WILLOWS State CA Zip Code 95988
 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 ▼ 1600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 15 / 2014
Transaction ID : SA11AI.93208
 Amount of Each Receipt this Period
 600.00

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 2350.00 |
| 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 79 OF 190 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | | <input type="checkbox"/> 15 |
| | | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
THE CONSERVATIVE STRIKEFORCE

A. MR DOUGLAS MILLER 959
 Full Name (Last, First, Middle Initial)
 Mailing Address 714 N HUMBOLDT AVE
 APT 901
 City State Zip Code
 WILLOWS CA 95988
 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 ▼
 2600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 21 / 2014
Transaction ID : SA11AI.93206
 Amount of Each Receipt this Period
 1000.00

B. BETTY MILNER 782
 Full Name (Last, First, Middle Initial)
 Mailing Address 5322 KING GEORGE DR
 City State Zip Code
 SAN ANTONIO TX 78229
 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 M / D D D / Y Y Y Y Y Y
 09 / 16 / 2014
Transaction ID : SA11AI.93225
 Amount of Each Receipt this Period
 25.00

C. MS HELEN MITCHELL 954
 Full Name (Last, First, Middle Initial)
 Mailing Address 301 WHITE OAK DR
 UNIT 253
 City State Zip Code
 SANTA ROSA CA 95409
 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 ▼
 320.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 19 / 2014
Transaction ID : SA11AI.93254
 Amount of Each Receipt this Period
 50.00

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 1075.00 |
| 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 80 OF 190 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | | <input type="checkbox"/> 15 |
| | | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
THE CONSERVATIVE STRIKEFORCE

A. RICHARD MOGAN 900
Full Name (Last, First, Middle Initial)

Mailing Address 10375 WILSHIRE BLVD 14E

| | | |
|-------------|-------|----------|
| City | State | Zip Code |
| LOS ANGELES | CA | 90024 |

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 ▼
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 24 / 2014

Transaction ID : SA11AI.93272

Amount of Each Receipt this Period
500.00

B. RICHARD MOGAN 900
Full Name (Last, First, Middle Initial)

Mailing Address 10375 WILSHIRE BLVD 14E

| | | |
|-------------|-------|----------|
| City | State | Zip Code |
| LOS ANGELES | CA | 90024 |

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 ▼
1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 25 / 2014

Transaction ID : SA11AI.93273

Amount of Each Receipt this Period
500.00

C. MR RICHARD MOLDT 134
Full Name (Last, First, Middle Initial)

Mailing Address 9732 DEERPATH CIR

| | | |
|-------|-------|----------|
| City | State | Zip Code |
| MARCY | NY | 13403 |

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 M / D D D / Y Y Y Y Y Y
 07 / 10 / 2014

Transaction ID : SA11AI.93275

Amount of Each Receipt this Period
25.00

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 1025.00 |
| 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 81 OF 190
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE CONSERVATIVE STRIKEFORCE

A. MR RICHARD MOLDT 134
 Full Name (Last, First, Middle Initial)
 Mailing Address 9732 DEERPATH CIR
 City MARCY State NY Zip Code 13403
 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
 09 / 03 / 2014
Transaction ID : SA11AI.93276
 Amount of Each Receipt this Period
 250.00

B. MS PATRICIA MOLLINO 117
 Full Name (Last, First, Middle Initial)
 Mailing Address 515 N BAY AVE
 City MASSAPEQUA State NY Zip Code 11758
 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 ▼ 218.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 07 / 2014
Transaction ID : SA11AI.93283
 Amount of Each Receipt this Period
 25.00

C. MS PATRICIA MOLLINO 117
 Full Name (Last, First, Middle Initial)
 Mailing Address 515 N BAY AVE
 City MASSAPEQUA State NY Zip Code 11758
 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 ▼ 253.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 25 / 2014
Transaction ID : SA11AI.93285
 Amount of Each Receipt this Period
 35.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 85.00
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 82 OF 190
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE CONSERVATIVE STRIKEFORCE

A. MS PATRICIA MOLLINO 117
 Full Name (Last, First, Middle Initial)
 Mailing Address 515 N BAY AVE
 City MASSAPEQUA State NY Zip Code 11758
 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 ▼ 278.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 26 / 2014
Transaction ID : SA11AI.93280
 Amount of Each Receipt this Period
 25.00

B. MS PATRICIA MOLLINO 117
 Full Name (Last, First, Middle Initial)
 Mailing Address 515 N BAY AVE
 City MASSAPEQUA State NY Zip Code 11758
 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 ▼ 308.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 11 / 2014
Transaction ID : SA11AI.93279
 Amount of Each Receipt this Period
 30.00

C. MS PATRICIA MOLLINO 117
 Full Name (Last, First, Middle Initial)
 Mailing Address 515 N BAY AVE
 City MASSAPEQUA State NY Zip Code 11758
 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 ▼ 333.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 19 / 2014
Transaction ID : SA11AI.93282
 Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 80.00
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 83 OF 190 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
THE CONSERVATIVE STRIKEFORCE

| | | |
|--|-------------------------------------|---|
| Full Name (Last, First, Middle Initial) A. MS PATRICIA MOLLINO 117 | | Date of Receipt |
| Mailing Address 515 N BAY AVE | | <input type="text" value="09"/> / <input type="text" value="23"/> / <input type="text" value="2014"/> |
| City | State | Zip Code |
| MASSAPEQUA | NY | 11758 |
| FEC ID number of contributing federal political committee. | | Transaction ID : SA11AI.93281 |
| <input type="text" value="C"/> | | Amount of Each Receipt this Period |
| | | <input type="text" value="2500"/> |
| Name of Employer | Occupation | |
| NONE | RETIRED | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General | <input type="text" value="358.00"/> | |
| <input type="checkbox"/> Other (specify) ▼ | | |

| | | |
|--|-------------------------------------|---|
| Full Name (Last, First, Middle Initial) B. MRS MARIE B MORSE 447 | | Date of Receipt |
| Mailing Address 3025 WOODCLIFF DR NW | | <input type="text" value="09"/> / <input type="text" value="05"/> / <input type="text" value="2014"/> |
| City | State | Zip Code |
| CANTON | OH | 44718 |
| FEC ID number of contributing federal political committee. | | Transaction ID : SA11AI.93380 |
| <input type="text" value="C"/> | | Amount of Each Receipt this Period |
| | | <input type="text" value="200.00"/> |
| Name of Employer | Occupation | |
| NONE | RETIRED | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General | <input type="text" value="300.00"/> | |
| <input type="checkbox"/> Other (specify) ▼ | | |

| | | |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial) C. MS JOY MUNKRES 874 | | Date of Receipt |
| Mailing Address 168 ROAD 3000 | | <input type="text" value="07"/> / <input type="text" value="12"/> / <input type="text" value="2014"/> |
| City | State | Zip Code |
| AZTEC | NM | 87410 |
| FEC ID number of contributing federal political committee. | | Transaction ID : SA11AI.93448 |
| <input type="text" value="C"/> | | Amount of Each Receipt this Period |
| | | <input type="text" value="35.00"/> |
| Name of Employer | Occupation | |
| RETIRED | DAIRY FARMER | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General | <input type="text" value="210.00"/> | |
| <input type="checkbox"/> Other (specify) ▼ | | |

| | |
|--|-------------------------------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | <input type="text" value="260.00"/> |
| TOTAL This Period (last page this line number only).....▶ | <input type="text" value=""/> |

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

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

FOR LINE NUMBER: PAGE 84 OF 190
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE CONSERVATIVE STRIKEFORCE

A. MS CLAIR J MURPHY 551
 Full Name (Last, First, Middle Initial)
 Mailing Address 1626 RUTH ST N
 City SAINT PAUL State MN Zip Code 55119
 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
 07 / 15 / 2014
Transaction ID : SA11AI.93458
 Amount of Each Receipt this Period
 50.00

B. MS CLAIR J MURPHY 551
 Full Name (Last, First, Middle Initial)
 Mailing Address 1626 RUTH ST N
 City SAINT PAUL State MN Zip Code 55119
 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 M / D D D / Y Y Y Y Y Y
 08 / 20 / 2014
Transaction ID : SA11AI.93460
 Amount of Each Receipt this Period
 150.00

C. MS CLAIR J MURPHY 551
 Full Name (Last, First, Middle Initial)
 Mailing Address 1626 RUTH ST N
 City SAINT PAUL State MN Zip Code 55119
 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 ▼ 550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 22 / 2014
Transaction ID : SA11AI.93462
 Amount of Each Receipt this Period
 50.00

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

FOR LINE NUMBER: PAGE 85 OF 190
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE CONSERVATIVE STRIKEFORCE

A. MS CLAIR J MURPHY 551
 Full Name (Last, First, Middle Initial)
 Mailing Address 1626 RUTH ST N
 City SAINT PAUL State MN Zip Code 55119
 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 ▼ 650.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 12 / 2014
Transaction ID : SA11AI.93461
 Amount of Each Receipt this Period
 100.00

B. MS CLAIR J MURPHY 551
 Full Name (Last, First, Middle Initial)
 Mailing Address 1626 RUTH ST N
 City SAINT PAUL State MN Zip Code 55119
 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 ▼ 800.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 23 / 2014
Transaction ID : SA11AI.93459
 Amount of Each Receipt this Period
 150.00

C. MS CLAIR J MURPHY 551
 Full Name (Last, First, Middle Initial)
 Mailing Address 1626 RUTH ST N
 City SAINT PAUL State MN Zip Code 55119
 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 ▼ 950.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 26 / 2014
Transaction ID : SA11AI.93457
 Amount of Each Receipt this Period
 150.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 400.00
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 86 OF 190 |
| | (check only one) | |
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 12 |
| | | <input type="checkbox"/> 15 |
| | | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
THE CONSERVATIVE STRIKEFORCE

A. E. WILLIAM NASH 322

Full Name (Last, First, Middle Initial)
Mailing Address 505 LANCASTER STREET

City JACKSONVILLE State FL Zip Code 32204

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

Name of Employer Occupation

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
09 / 03 / 2014

Transaction ID : SA11AI.93516

Amount of Each Receipt this Period
200.00

B. MARY NAUGHTON 112

Full Name (Last, First, Middle Initial)
Mailing Address 9453 RIDGE BLVD, APT 1A

City BROOKLYN State NY Zip Code 11209

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

Name of Employer Occupation
 RETIRED TEACHER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **225.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 26 / 2014

Transaction ID : SA11AI.93523

Amount of Each Receipt this Period
25.00

C. MARY NAUGHTON 112

Full Name (Last, First, Middle Initial)
Mailing Address 9453 RIDGE BLVD, APT 1A

City BROOKLYN State NY Zip Code 11209

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

Name of Employer Occupation
 RETIRED TEACHER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **325.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
09 / 28 / 2014

Transaction ID : SA11AI.93522

Amount of Each Receipt this Period
100.00

| | |
|--|---------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 325.00 |
| 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 87 OF 190 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | | <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. MR JIM H NEAL 748 | | Date of Receipt MM / DD / YYYY 09 / 23 / 2014 Transaction ID : SA11AI.93532 |
| Mailing Address 23874 STATE HIGHWAY 1E PO BOX 1676 | | Amount of Each Receipt this Period 150.00 |
| City ADA | State OK | Zip Code 74821 |
| FEC ID number of contributing federal political committee. C | Name of Employer | Occupation |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 225.00 | |

| | | |
|---|------------------------------------|---|
| Full Name (Last, First, Middle Initial) B. PHYLLIS NICHOLAS 068 | | Date of Receipt MM / DD / YYYY 08 / 07 / 2014 Transaction ID : SA11AI.93593 |
| Mailing Address 40 HOWARD ROAD | | Amount of Each Receipt this Period 200.00 |
| City GREENWICH | State CT | Zip Code 06831 |
| FEC ID number of contributing federal political committee. C | Name of Employer NONE | Occupation HOMEMAKER |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 800.00 | |

| | | |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial) C. PHYLLIS NICHOLAS 068 | | Date of Receipt MM / DD / YYYY 08 / 14 / 2014 Transaction ID : SA11AI.93594 |
| Mailing Address 40 HOWARD ROAD | | Amount of Each Receipt this Period 200.00 |
| City GREENWICH | State CT | Zip Code 06831 |
| FEC ID number of contributing federal political committee. C | Name of Employer NONE | Occupation HOMEMAKER |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 1000.00 | |

| | |
|--|--------|
| 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: (check only one) | PAGE 88 OF 190 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
THE CONSERVATIVE STRIKEFORCE

A. BRUCE NICHOLSON 873
Full Name (Last, First, Middle Initial)

Mailing Address 920 E HISTORIC HIGHWAY 66

| | | |
|--------|-------|----------|
| City | State | Zip Code |
| GALLUP | NM | 87301 |

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

| | |
|------------------|------------|
| Name of Employer | Occupation |
| SELF EMPLOYED | MARKETER |

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
07 / 10 / 2014

Transaction ID : SA11AI.93603

Amount of Each Receipt this Period
200.00

B. BRUCE NICHOLSON 873
Full Name (Last, First, Middle Initial)

Mailing Address 920 E HISTORIC HIGHWAY 66

| | | |
|--------|-------|----------|
| City | State | Zip Code |
| GALLUP | NM | 87301 |

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

| | |
|------------------|------------|
| Name of Employer | Occupation |
| SELF EMPLOYED | MARKETER |

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
09 / 03 / 2014

Transaction ID : SA11AI.93604

Amount of Each Receipt this Period
100.00

C. BRUCE NICHOLSON 873
Full Name (Last, First, Middle Initial)

Mailing Address 920 E HISTORIC HIGHWAY 66

| | | |
|--------|-------|----------|
| City | State | Zip Code |
| GALLUP | NM | 87301 |

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

| | |
|------------------|------------|
| Name of Employer | Occupation |
| SELF EMPLOYED | MARKETER |

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
09 / 29 / 2014

Transaction ID : SA11AI.93602

Amount of Each Receipt this Period
400.00

| | |
|---|--------|
| SUBTOTAL of Receipts This Page (optional)..... | 700.00 |
| 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 89 OF 190 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
THE CONSERVATIVE STRIKEFORCE

| | | |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial) A. SANDRA O'BRIEN 770 | | Date of Receipt |
| Mailing Address 206 ARBORWAY | | <input type="text" value="09"/> / <input type="text" value="17"/> / <input type="text" value="2014"/> |
| City | State | Zip Code |
| HOUSTON | TX | 77057 |
| FEC ID number of contributing federal political committee. | <input type="text" value="C"/> | Transaction ID : SA11AI.93685 |
| Name of Employer | Occupation | Amount of Each Receipt this Period |
| RETIRED | FORMER TEACHER | <input type="text" value="250.00"/> |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | <input type="text" value="250.00"/> | |

| | | |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial) B. MR JAMES OLSON 200 | | Date of Receipt |
| Mailing Address 2700 CONNECTICUT AVE NW UNIT 302B | | <input type="text" value="09"/> / <input type="text" value="15"/> / <input type="text" value="2014"/> |
| City | State | Zip Code |
| WASHINGTON | DC | 20008 |
| FEC ID number of contributing federal political committee. | <input type="text" value="C"/> | Transaction ID : SA11AI.93733 |
| Name of Employer | Occupation | Amount of Each Receipt this Period |
| NONE | RETIRED | <input type="text" value="20.00"/> |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | <input type="text" value="215.00"/> | |

| | | |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial) C. MR DALE OYHUS 586 | | Date of Receipt |
| Mailing Address 13973 FRANKS CREEK RD | | <input type="text" value="09"/> / <input type="text" value="08"/> / <input type="text" value="2014"/> |
| City | State | Zip Code |
| MEDORA | ND | 58645 |
| FEC ID number of contributing federal political committee. | <input type="text" value="C"/> | Transaction ID : SA11AI.93789 |
| Name of Employer | Occupation | Amount of Each Receipt this Period |
| SELF EMPLOYED | RANCHER | <input type="text" value="125.00"/> |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | <input type="text" value="350.00"/> | |

| | |
|--|-------------------------------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | <input type="text" value="395.00"/> |
| TOTAL This Period (last page this line number only).....▶ | <input type="text" value=""/> |

**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 90 OF 190 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | | <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. MRS JANALU PARCHMAN 786 | | Date of Receipt |
| Mailing Address 408 LISCIO CV | | <input type="text" value="09"/> / <input type="text" value="24"/> / <input type="text" value="2014"/> |
| City | State | Zip Code |
| GEORGETOWN | TX | 78628 |
| FEC ID number of contributing federal political committee. | | <input type="text" value="C"/> |
| Name of Employer | Occupation | Transaction ID : SA11AI.93840 |
| RETIRED | ELEMENTARY TEACHER | |
| Receipt For: | Aggregate Year-to-Date ▼ | Amount of Each Receipt this Period |
| <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | <input type="text" value="240.50"/> | <input type="text" value="17.00"/> |

| | | |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial) B. MR NICHOLAS PEAY 441 JR | | Date of Receipt |
| Mailing Address 2965 FAIRMOUNT BLVD | | <input type="text" value="09"/> / <input type="text" value="20"/> / <input type="text" value="2014"/> |
| City | State | Zip Code |
| CLEVELAND HEIGHTS | OH | 44118 |
| FEC ID number of contributing federal political committee. | | <input type="text" value="C"/> |
| Name of Employer | Occupation | Transaction ID : SA11AI.93915 |
| NONE | RETIRED | |
| Receipt For: | Aggregate Year-to-Date ▼ | Amount of Each Receipt this Period |
| <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | <input type="text" value="250.00"/> | <input type="text" value="250.00"/> |

| | | |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial) C. MR ROBERT S PERKIN 068 | | Date of Receipt |
| Mailing Address 160 BROOKSIDE RD | | <input type="text" value="07"/> / <input type="text" value="28"/> / <input type="text" value="2014"/> |
| City | State | Zip Code |
| DARIEN | CT | 06820 |
| FEC ID number of contributing federal political committee. | | <input type="text" value="C"/> |
| Name of Employer | Occupation | Transaction ID : SA11AI.93944 |
| SELF EMPLOYED | MUSIC INSTRUCTOR | |
| Receipt For: | Aggregate Year-to-Date ▼ | Amount of Each Receipt this Period |
| <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | <input type="text" value="600.00"/> | <input type="text" value="100.00"/> |

| | |
|--|-------------------------------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | <input type="text" value="367.00"/> |
| TOTAL This Period (last page this line number only).....▶ | <input type="text"/> |

**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 91 OF 190 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | | <input type="checkbox"/> 15 |
| | | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
THE CONSERVATIVE STRIKEFORCE

A. MR GEORGE O PFAFF 288
 Full Name (Last, First, Middle Initial)
 Mailing Address 16 SALISBURY DR #7118
 City ASHEVILLE State NC Zip Code 28803
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 17 / 2014
Transaction ID : SA11AI.94013
 Amount of Each Receipt this Period
 500.00

B. RICHARD POGIN 554
 Full Name (Last, First, Middle Initial)
 Mailing Address 3171 HILLSBORO AVE S
 City SAINT LOUIS PARK State MN Zip Code 55426
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 INVESTMENT MANAGEMENT INC CFO
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 24 / 2014
Transaction ID : SA11AI.94103
 Amount of Each Receipt this Period
 500.00

C. MRS ANTHONY POGODZINSKI 545
 Full Name (Last, First, Middle Initial)
 Mailing Address 9609 MANITOU PARK DR
 City MINOCQUA State WI Zip Code 54548
 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 ▼ 1050.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 19 / 2014
Transaction ID : SA11AI.94104
 Amount of Each Receipt this Period
 100.00

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 1100.00 |
| 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 92 OF 190 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | | <input type="checkbox"/> 15 |
| | | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
THE CONSERVATIVE STRIKEFORCE

A. MRS PHYLLIS POHL 105
Full Name (Last, First, Middle Initial)
Mailing Address 720 MILTON ROAD APT NORTH F1
City RYE State NY Zip Code 10580
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 ▼ 245.00

Date of Receipt 09 / 17 / 2014
Transaction ID : SA11AI.94112
Amount of Each Receipt this Period 75.00

B. MS BETTY PRIDAY 977
Full Name (Last, First, Middle Initial)
Mailing Address 1281 NW WALL ST
City BEND State OR Zip Code 97701
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 ▼ 280.00

Date of Receipt 09 / 06 / 2014
Transaction ID : SA11AI.94193
Amount of Each Receipt this Period 50.00

C. MR ROY R PRIEST 752 JR
Full Name (Last, First, Middle Initial)
Mailing Address 3242 GOLFING GREEN PL
City FARMERS BRANCH State TX Zip Code 75234
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 07 / 15 / 2014
Transaction ID : SA11AI.94195
Amount of Each Receipt this Period 300.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 425.00
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 93 OF 190
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE CONSERVATIVE STRIKEFORCE

A. DIANNE PULSE 386
 Full Name (Last, First, Middle Initial)
 Mailing Address 113 E SPRING ST
 City State Zip Code
 RIPLEY MS 38663
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 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
 07 / 10 / 2014
Transaction ID : SA11AI.94215
 Amount of Each Receipt this Period
 50.00

B. MS LENORA PUSTA 855
 Full Name (Last, First, Middle Initial)
 Mailing Address 138 W SUNFLOWER DRIVE
 City State Zip Code
 PAYSON AZ 85541
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 EUCID, OH BD OF EDUC. RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 10 / 2014
Transaction ID : SA11AI.94222
 Amount of Each Receipt this Period
 100.00

C. MS BEATRICE R PUTNAM 050
 Full Name (Last, First, Middle Initial)
 Mailing Address 225 PUTNAM RD
 City State Zip Code
 NEWBURY VT 05051
 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 M / D D D / Y Y Y Y Y Y
 08 / 29 / 2014
Transaction ID : SA11AI.94224
 Amount of Each Receipt this Period
 200.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 350.00
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 94 OF 190 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
THE CONSERVATIVE STRIKEFORCE

A. MS BEATRICE R PUTNAM 050
 Full Name (Last, First, Middle Initial)
 Mailing Address 225 PUTNAM RD
 City NEWBURY State VT Zip Code 05051
 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 M / D D D / Y Y Y Y Y Y
 09 / 22 / 2014
Transaction ID : SA11AI.94225
 Amount of Each Receipt this Period
 100.00

B. MR FRANK PYLE 770
 Full Name (Last, First, Middle Initial)
 Mailing Address 1035 DAIRY ASHFORD ST STE 15
 City HOUSTON State TX Zip Code 77079
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF EMPLOYED Occupation INSURANCE AGENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 202.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 19 / 2014
Transaction ID : SA11AI.94231
 Amount of Each Receipt this Period
 55.00

C. MISS LEURETTA M RALLENS 852
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 7749
 City MESA State AZ Zip Code 85216
 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 M / D D D / Y Y Y Y Y Y
 08 / 25 / 2014
Transaction ID : SA11AI.94279
 Amount of Each Receipt this Period
 100.00

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 255.00 |
| 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 95 OF 190 |
| | (check only one) | |
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 12 |
| | | <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. MR IRWIN RASKIN 334 | | Date of Receipt |
| Mailing Address 8735 GRASSY ISLE TRL | | <input type="text" value="09"/> / <input type="text" value="19"/> / <input type="text" value="2014"/> |
| City | State | Zip Code |
| LAKE WORTH | FL | 33467 |
| FEC ID number of contributing federal political committee. | | <input type="text" value="C"/> |
| Name of Employer | Occupation | Transaction ID : SA11AI.94322 |
| NONE | RETIRED | |
| Receipt For: | Aggregate Year-to-Date ▼ | Amount of Each Receipt this Period |
| <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | <input type="text" value="325.00"/> | <input type="text" value="165.00"/> |

| | | |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial) B. MR IRWIN RASKIN 334 | | Date of Receipt |
| Mailing Address 8735 GRASSY ISLE TRL | | <input type="text" value="09"/> / <input type="text" value="29"/> / <input type="text" value="2014"/> |
| City | State | Zip Code |
| LAKE WORTH | FL | 33467 |
| FEC ID number of contributing federal political committee. | | <input type="text" value="C"/> |
| Name of Employer | Occupation | Transaction ID : SA11AI.94323 |
| NONE | RETIRED | |
| Receipt For: | Aggregate Year-to-Date ▼ | Amount of Each Receipt this Period |
| <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | <input type="text" value="380.00"/> | <input type="text" value="55.00"/> |

| | | |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial) C. JOHN REDDEN 410 | | Date of Receipt |
| Mailing Address 1917 FORTSIDE CIR | | <input type="text" value="07"/> / <input type="text" value="11"/> / <input type="text" value="2014"/> |
| City | State | Zip Code |
| FT MITCHELL | KY | 41011 |
| FEC ID number of contributing federal political committee. | | <input type="text" value="C"/> |
| Name of Employer | Occupation | Transaction ID : SA11AI.94351 |
| | | |
| Receipt For: | Aggregate Year-to-Date ▼ | Amount of Each Receipt this Period |
| <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | <input type="text" value="300.00"/> | <input type="text" value="50.00"/> |

| | |
|--|-------------------------------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | <input type="text" value="270.00"/> |
| TOTAL This Period (last page this line number only).....▶ | <input type="text"/> |

**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 96 OF 190 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | | <input type="checkbox"/> 15 |
| | | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
THE CONSERVATIVE STRIKEFORCE

A. DONALD REINHARD 180
Full Name (Last, First, Middle Initial)
Mailing Address 75 HARVARD AVE

| | | |
|-------------------|-------------|-------------------|
| City PALMERTON | State PA | Zip Code 18071 |
|-------------------|-------------|-------------------|

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

| | |
|---|---------------------------------|
| Name of Employer PENCOR SERVICES INC | Occupation SEMI RETIRED EXEC |
|---|---------------------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09 | / | 08 | / | 2014 |

Transaction ID : SA11AI.94376

Amount of Each Receipt this Period
1000.00

B. DONALD REINHARD 180
Full Name (Last, First, Middle Initial)
Mailing Address 75 HARVARD AVE

| | | |
|-------------------|-------------|-------------------|
| City PALMERTON | State PA | Zip Code 18071 |
|-------------------|-------------|-------------------|

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

| | |
|---|---------------------------------|
| Name of Employer PENCOR SERVICES INC | Occupation SEMI RETIRED EXEC |
|---|---------------------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3000.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09 | / | 25 | / | 2014 |

Transaction ID : SA11AI.94375

Amount of Each Receipt this Period
1000.00

C. FRED REINHARD 180
Full Name (Last, First, Middle Initial)
Mailing Address 874 COLUMBIA AVE

| | | |
|-------------------|-------------|-------------------|
| City PALMERTON | State PA | Zip Code 18071 |
|-------------------|-------------|-------------------|

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

| | |
|-------------------------------------|------------------------|
| Name of Employer PEWCOR SERVICES | Occupation CHAIRMAN |
|-------------------------------------|------------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07 | / | 29 | / | 2014 |

Transaction ID : SA11AI.94377

Amount of Each Receipt this Period
500.00

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 2500.00 |
| 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 97 OF 190 |
| | (check only one) | |
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 12 |
| | | <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. QUENTIN REMEIN 208 | | | Date of Receipt |
| Mailing Address 18 WYNKOOP CT | | | <input type="text" value="08"/> / <input type="text" value="22"/> / <input type="text" value="2014"/> |
| City | State | Zip Code | Transaction ID : SA11AI.94386 |
| BETHESDA | MD | 20817 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. <input type="text" value="C"/> | | | <input type="text" value="450.00"/> |
| Name of Employer | Occupation | | |
| NONE | RETIRED | | |
| Receipt For: | Aggregate Year-to-Date ▼ | | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General | <input type="text" value="700.00"/> | | |
| <input type="checkbox"/> Other (specify) ▼ | | | |

| | | | |
|---|-------------------------------------|----------|---|
| Full Name (Last, First, Middle Initial) B. MR ERIK RENKEN 774 | | | Date of Receipt |
| Mailing Address 401 OSCAR ST | | | <input type="text" value="07"/> / <input type="text" value="10"/> / <input type="text" value="2014"/> |
| City | State | Zip Code | Transaction ID : SA11AI.94393 |
| EL CAMPO | TX | 77437 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. <input type="text" value="C"/> | | | <input type="text" value="85.00"/> |
| Name of Employer | Occupation | | |
| POWER INC | RETIRED | | |
| Receipt For: | Aggregate Year-to-Date ▼ | | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General | <input type="text" value="390.00"/> | | |
| <input type="checkbox"/> Other (specify) ▼ | | | |

| | | | |
|---|-------------------------------------|----------|---|
| Full Name (Last, First, Middle Initial) C. MR ERIK RENKEN 774 | | | Date of Receipt |
| Mailing Address 401 OSCAR ST | | | <input type="text" value="08"/> / <input type="text" value="18"/> / <input type="text" value="2014"/> |
| City | State | Zip Code | Transaction ID : SA11AI.94391 |
| EL CAMPO | TX | 77437 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. <input type="text" value="C"/> | | | <input type="text" value="95.00"/> |
| Name of Employer | Occupation | | |
| POWER INC | RETIRED | | |
| Receipt For: | Aggregate Year-to-Date ▼ | | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General | <input type="text" value="485.00"/> | | |
| <input type="checkbox"/> Other (specify) ▼ | | | |

| | |
|--|-------------------------------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | <input type="text" value="630.00"/> |
| TOTAL This Period (last page this line number only).....▶ | <input type="text" value=""/> |

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

| | | |
|---|------------------------------|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: | PAGE 98 OF 190 |
| | (check only one) | |
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 12 |
| | | <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. MR ERIK RENKEN 774 | | | Date of Receipt |
| Mailing Address 401 OSCAR ST | | | <input type="text" value="09"/> / <input type="text" value="02"/> / <input type="text" value="2014"/> |
| City | State | Zip Code | Transaction ID : SA11AI.94392 |
| EL CAMPO | TX | 77437 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | <input type="text" value="C"/> | | <input type="text" value="75.00"/> |
| Name of Employer | Occupation | | |
| POWER INC | RETIRED | | |
| Receipt For: | Aggregate Year-to-Date ▼ | | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General | <input type="text" value="560.00"/> | | |
| <input type="checkbox"/> Other (specify) ▼ | | | |

| | | | |
|--|-------------------------------------|----------|---|
| Full Name (Last, First, Middle Initial) B. MR PHILIP E RITCH 967 | | | Date of Receipt |
| Mailing Address 146 KALUAMOO ST | | | <input type="text" value="08"/> / <input type="text" value="19"/> / <input type="text" value="2014"/> |
| City | State | Zip Code | Transaction ID : SA11AI.94543 |
| KAILUA | HI | 96734 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | <input type="text" value="C"/> | | <input type="text" value="50.00"/> |
| Name of Employer | Occupation | | |
| NONE | RETIRED | | |
| Receipt For: | Aggregate Year-to-Date ▼ | | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General | <input type="text" value="217.00"/> | | |
| <input type="checkbox"/> Other (specify) ▼ | | | |

| | | | |
|--|-------------------------------------|----------|---|
| Full Name (Last, First, Middle Initial) C. MR PHILIP E RITCH 967 | | | Date of Receipt |
| Mailing Address 146 KALUAMOO ST | | | <input type="text" value="09"/> / <input type="text" value="15"/> / <input type="text" value="2014"/> |
| City | State | Zip Code | Transaction ID : SA11AI.94544 |
| KAILUA | HI | 96734 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | <input type="text" value="C"/> | | <input type="text" value="35.00"/> |
| Name of Employer | Occupation | | |
| NONE | RETIRED | | |
| Receipt For: | Aggregate Year-to-Date ▼ | | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General | <input type="text" value="252.00"/> | | |
| <input type="checkbox"/> Other (specify) ▼ | | | |

| | |
|--|-------------------------------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | <input type="text" value="160.00"/> |
| TOTAL This Period (last page this line number only).....▶ | <input type="text"/> |

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

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

FOR LINE NUMBER: PAGE 99 OF 190
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE CONSERVATIVE STRIKEFORCE

A. MRS MAUREEN M ROBERTS 791
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 2925
 City AMARILLO State TX Zip Code 79105
 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 ▼ 630.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 06 / 2014
Transaction ID : SA11AI.94572
 Amount of Each Receipt this Period
 630.00

B. MS EVELYN C ROBERTS 920
 Full Name (Last, First, Middle Initial)
 Mailing Address 27446 MOUNTAIN MEADOW RD
 City ESCONDIDO State CA Zip Code 92026
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CIRCLE P RANCH INC Occupation R MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2014
Transaction ID : SA11AI.94574
 Amount of Each Receipt this Period
 450.00

C. MARK RODACK 331
 Full Name (Last, First, Middle Initial)
 Mailing Address 16051 COLLINS AVE APT3502
 City SUNNY ISLES BEACH State FL Zip Code 33160
 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 M / D D D / Y Y Y Y Y Y
 09 / 30 / 2014
Transaction ID : SA11AI.94595
 Amount of Each Receipt this Period
 250.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 1330.00
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 100 OF 190
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE CONSERVATIVE STRIKEFORCE

A. RICHARD ROGERS 840
 Full Name (Last, First, Middle Initial)
 Mailing Address 4639 W VERMILLION DR
 City SOUTH JORDAN State UT Zip Code 84095
 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 M / D D D / Y Y Y Y Y Y
 07 / 05 / 2014
Transaction ID : SA11AI.94611
 Amount of Each Receipt this Period
 250.00

B. KENNETH L ROLFE 973
 Full Name (Last, First, Middle Initial)
 Mailing Address 301 SE FOUNDATION DR
 City DALLAS State OR Zip Code 97338
 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 ▼ 753.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 10 / 2014
Transaction ID : SA11AI.94625
 Amount of Each Receipt this Period
 300.00

C. KENNETH L ROLFE 973
 Full Name (Last, First, Middle Initial)
 Mailing Address 301 SE FOUNDATION DR
 City DALLAS State OR Zip Code 97338
 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 ▼ 803.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 25 / 2014
Transaction ID : SA11AI.94626
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 600.00
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 101 OF 190 |
| | (check only one) | |
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 12 |
| | | <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. MRS W A ROQUEMORE 316 | | | Date of Receipt |
| Mailing Address PO BOX 217 | | | <input type="text" value="09"/> / <input type="text" value="13"/> / <input type="text" value="2014"/> |
| City | State | Zip Code | Transaction ID : SA11AI.94644 |
| LAKELAND | GA | 31635 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | <input type="text" value="C"/> | | <input type="text" value="230.00"/> |
| Name of Employer | Occupation | | |
| NONE | RETIRED | | |
| Receipt For: | Aggregate Year-to-Date ▼ | | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General | <input type="text" value="380.00"/> | | |
| <input type="checkbox"/> Other (specify) ▼ | | | |

| | | | |
|---|-------------------------------------|----------|---|
| Full Name (Last, First, Middle Initial) B. MR ELMER H RUEHLMANN 980 | | | Date of Receipt |
| Mailing Address 7454 NEWCASTLE GOLF CLUB RD #321 | | | <input type="text" value="07"/> / <input type="text" value="11"/> / <input type="text" value="2014"/> |
| City | State | Zip Code | Transaction ID : SA11AI.94707 |
| NEWCASTLE | WA | 98059 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | <input type="text" value="C"/> | | <input type="text" value="75.00"/> |
| Name of Employer | Occupation | | |
| NONE | RETIRED | | |
| Receipt For: | Aggregate Year-to-Date ▼ | | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General | <input type="text" value="280.00"/> | | |
| <input type="checkbox"/> Other (specify) ▼ | | | |

| | | | |
|---|-------------------------------------|----------|---|
| Full Name (Last, First, Middle Initial) C. NICK RUNNEBOHM 461 | | | Date of Receipt |
| Mailing Address 3177 S 375 E | | | <input type="text" value="08"/> / <input type="text" value="26"/> / <input type="text" value="2014"/> |
| City | State | Zip Code | Transaction ID : SA11AI.94725 |
| SHELBYVILLE | IN | 46176 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | <input type="text" value="C"/> | | <input type="text" value="200.00"/> |
| Name of Employer | Occupation | | |
| RUNNEBOHM CONSTRUCTION CO INC | GENERAL CONTRACTOR | | |
| Receipt For: | Aggregate Year-to-Date ▼ | | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General | <input type="text" value="700.00"/> | | |
| <input type="checkbox"/> Other (specify) ▼ | | | |

| | |
|--|-------------------------------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | <input type="text" value="505.00"/> |
| TOTAL This Period (last page this line number only).....▶ | <input type="text" value=""/> |

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

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

FOR LINE NUMBER: PAGE 102 OF 190
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE CONSERVATIVE STRIKEFORCE

A. MS ANNE RYAN 334
 Full Name (Last, First, Middle Initial)
 Mailing Address 5402 PENNOCK POINT RD
 City JUPITER State FL Zip Code 33458
 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 ▼ 1080.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 11 / 2014
Transaction ID : SA11AI.94754
 Amount of Each Receipt this Period
 300.00

B. GEORGE D RYERSON 432
 Full Name (Last, First, Middle Initial)
 Mailing Address 2407 RAVENEL DR
 City COLUMBUS State OH Zip Code 43209
 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 ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 08 / 2014
Transaction ID : SA11AI.94758
 Amount of Each Receipt this Period
 100.00

C. GEORGE D RYERSON 432
 Full Name (Last, First, Middle Initial)
 Mailing Address 2407 RAVENEL DR
 City COLUMBUS State OH Zip Code 43209
 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 M / D D D / Y Y Y Y Y Y
 09 / 23 / 2014
Transaction ID : SA11AI.94759
 Amount of Each Receipt this Period
 200.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 600.00
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 103 OF 190
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE CONSERVATIVE STRIKEFORCE

A. MS THEODORA SABROSKY 586
 Full Name (Last, First, Middle Initial)
 Mailing Address 1829 PRAIRIE OAK DR
 City DICKINSON State ND Zip Code 58601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 255.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 29 / 2014
Transaction ID : SA11AI.94769
 Amount of Each Receipt this Period
 100.00

B. MRS MARTHA A SANDERS 460
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 484
 City WINDFALL State IN Zip Code 46076
 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 ▼
 245.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 23 / 2014
Transaction ID : SA11AI.94802
 Amount of Each Receipt this Period
 140.00

C. MRS JULIE E SCHAFFER 553
 Full Name (Last, First, Middle Initial)
 Mailing Address 150 2ND ST W
 City HECTOR State MN Zip Code 55342
 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 ▼
 205.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 26 / 2014
Transaction ID : SA11AI.94862
 Amount of Each Receipt this Period
 105.00

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) for each category of the Detailed Summary Page | FOR LINE NUMBER: | PAGE 104 OF 190 |
| | (check only one) | |
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 12 |
| | | <input type="checkbox"/> 15 |
| | | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
THE CONSERVATIVE STRIKEFORCE

A. GAYLE SCHULZ 784
Full Name (Last, First, Middle Initial)

Mailing Address 4217 PEACH CREEK CT

City State Zip Code
CORPUS CHRISTI TX 78410

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

Name of Employer Occupation
NONE HOUSEWIFE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
09 / 24 / 2014
Transaction ID : SA11AI.94966

Amount of Each Receipt this Period
150.00

B. MRS EVA F SCOTT 230
Full Name (Last, First, Middle Initial)

Mailing Address 15830 GADDES BRIDGE RD

City State Zip Code
AMELIA COURT HOUSE VA 23002

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

Name of Employer Occupation
SELF EMPLOYED SMALL BUSINESS OWNER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
725.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
09 / 08 / 2014
Transaction ID : SA11AI.95012

Amount of Each Receipt this Period
500.00

C. MR WILLIAM P SCULLY 329
Full Name (Last, First, Middle Initial)

Mailing Address 771 MANATEE COVE

City State Zip Code
VERO BEACH FL 32963

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
09 / 28 / 2014
Transaction ID : SA11AI.95040

Amount of Each Receipt this Period
1000.00

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 1650.00 |
| 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 105 OF 190 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | | <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. ROBERT SEALE 770

Mailing Address **6627 WANITA PLACE**

City **HOUSTON** State **TX** Zip Code **77007**

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 ▼ **250.00**

Date of Receipt
09 / 02 / 2014

Transaction ID : SA11AI.95045

Amount of Each Receipt this Period
250.00

Full Name (Last, First, Middle Initial)
B. MRS JANICE E SHALLENBERG 601

Mailing Address **140 WINDSOR PARK DR
APT E301**

City **CAROL STREAM** State **IL** Zip Code **60188**

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
09 / 26 / 2014

Transaction ID : SA11AI.95098

Amount of Each Receipt this Period
100.00

Full Name (Last, First, Middle Initial)
C. LOUISE SHOFF 960

Mailing Address **845 FRANZEL RD**

City **RED BLUFF** State **CA** Zip Code **96080**

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 ▼ **245.00**

Date of Receipt
09 / 06 / 2014

Transaction ID : SA11AI.95162

Amount of Each Receipt this Period
35.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **385.00**

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 106 OF 190
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE CONSERVATIVE STRIKEFORCE

A. MR JOHN J SIEFFERT 480 JR
 Full Name (Last, First, Middle Initial)
 Mailing Address 740 RANDALL DR
 City TROY State MI Zip Code 48085
 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 M / D D D / Y Y Y Y Y Y
 07 / 31 / 2014
Transaction ID : SA11AI.95183
 Amount of Each Receipt this Period
 200.00

B. MR JOHN R SILL 894
 Full Name (Last, First, Middle Initial)
 Mailing Address 930 CHIP CREEK CT
 City MINDEN State NV Zip Code 89423
 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 ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 19 / 2014
Transaction ID : SA11AI.95190
 Amount of Each Receipt this Period
 300.00

C. MR JOHN R SILL 894
 Full Name (Last, First, Middle Initial)
 Mailing Address 930 CHIP CREEK CT
 City MINDEN State NV Zip Code 89423
 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 ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 15 / 2014
Transaction ID : SA11AI.95191
 Amount of Each Receipt this Period
 200.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 700.00
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 107 OF 190 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | | <input type="checkbox"/> 15 |
| | | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
THE CONSERVATIVE STRIKEFORCE

A. MRS NANCY LEA SKELSEY 787
 Full Name (Last, First, Middle Initial)
 Mailing Address 3106 BARTON POINT DR
 City AUSTIN State TX Zip Code 78733
 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 09 / 26 / 2014
Transaction ID : SA11AI.95237
 Amount of Each Receipt this Period 200.00

B. LECIA SMITH 240
 Full Name (Last, First, Middle Initial)
 Mailing Address 3245 LAUREL DRIVE
 City BLACKSBURG State VA Zip Code 24060
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation HOUSEWIFE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 11 / 2014
Transaction ID : SA11AI.95262
 Amount of Each Receipt this Period 250.00

C. EDWARD SMITH 372
 Full Name (Last, First, Middle Initial)
 Mailing Address 6109 STONEHAVEN DR
 City NASHVILLE State TN Zip Code 37215
 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 07 / 22 / 2014
Transaction ID : SA11AI.95272
 Amount of Each Receipt this Period 100.00

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: (check only one) | PAGE 108 OF 190 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
THE CONSERVATIVE STRIKEFORCE

A. EDWARD SMITH 372
Full Name (Last, First, Middle Initial)

Mailing Address 6109 STONEHAVEN DR

City NASHVILLE State TN Zip Code 37215

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 ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 30 / 2014

Transaction ID : SA11AI.95271

Amount of Each Receipt this Period
 100.00

B. EDWARD SMITH 372
Full Name (Last, First, Middle Initial)

Mailing Address 6109 STONEHAVEN DR

City NASHVILLE State TN Zip Code 37215

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 M / D D D / Y Y Y Y Y Y
 08 / 12 / 2014

Transaction ID : SA11AI.95275

Amount of Each Receipt this Period
 100.00

C. EDWARD SMITH 372
Full Name (Last, First, Middle Initial)

Mailing Address 6109 STONEHAVEN DR

City NASHVILLE State TN Zip Code 37215

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

Transaction ID : SA11AI.95274

Amount of Each Receipt this Period
 100.00

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 300.00 |
| 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 109 OF 190
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE CONSERVATIVE STRIKEFORCE

A. MR WILLIAM SMITH 514
 Full Name (Last, First, Middle Initial)
 Mailing Address 1722 TERRACE DR
 City CARROLL State IA Zip Code 51401
 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 ▼ 315.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 03 / 2014
Transaction ID : SA11AI.95287
 Amount of Each Receipt this Period
 50.00

B. MS BARBARA SMITH 532
 Full Name (Last, First, Middle Initial)
 Mailing Address 3222 E HAMPSHIRE AVE
 City MILWAUKEE State WI Zip Code 53211
 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 M / D D D / Y Y Y Y Y Y
 07 / 05 / 2014
Transaction ID : SA11AI.95288
 Amount of Each Receipt this Period
 300.00

C. LORI SMITH 981
 Full Name (Last, First, Middle Initial)
 Mailing Address 4220 S 175TH ST
 City SEATTLE State WA Zip Code 98188
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF EMPLOYED Occupation ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 27 / 2014
Transaction ID : SA11AI.95332
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 400.00
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 110 OF 190
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE CONSERVATIVE STRIKEFORCE

A. KURT SNAPPER 201
 Full Name (Last, First, Middle Initial)
 Mailing Address 2486 IRON FORGE ROAD
 City OAK HILL State VA Zip Code 20171
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 30 / 2014
Transaction ID : SA11AI.95337
 Amount of Each Receipt this Period
 250.00

B. MS PATRICIA SNYDER 940
 Full Name (Last, First, Middle Initial)
 Mailing Address 225 VALLEJO CT
 City MILLBRAE State CA Zip Code 94030
 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 M / D D D / Y Y Y Y Y Y
 09 / 16 / 2014
Transaction ID : SA11AI.95353
 Amount of Each Receipt this Period
 300.00

C. EJLEF H SORENSEN 913
 Full Name (Last, First, Middle Initial)
 Mailing Address 10527 YOLANDA AVE
 City NORTHRIDGE State CA Zip Code 91326
 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 ▼ 230.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 29 / 2014
Transaction ID : SA11AI.95369
 Amount of Each Receipt this Period
 60.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 610.00
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 111 OF 190
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE CONSERVATIVE STRIKEFORCE

A. AVIS SPIES 193
 Full Name (Last, First, Middle Initial)
 Mailing Address 60 HEYBURN RD
 City CHADDS FORD State PA Zip Code 19317
 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 M / D D D / Y Y Y Y Y Y
 09 / 17 / 2014
Transaction ID : SA11AI.95414
 Amount of Each Receipt this Period
 50.00

B. DAVID STANLEY 283
 Full Name (Last, First, Middle Initial)
 Mailing Address 3433 FLEA HILL RD
 City FAYETTEVILLE State NC Zip Code 28312
 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 M / D D D / Y Y Y Y Y Y
 09 / 17 / 2014
Transaction ID : SA11AI.95466
 Amount of Each Receipt this Period
 50.00

C. MRS NELL T STEELE 723
 Full Name (Last, First, Middle Initial)
 Mailing Address 1034 ARKANSAS
 City HELENA State AR Zip Code 72342
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 20 / 2014
Transaction ID : SA11AI.95503
 Amount of Each Receipt this Period
 450.00

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: (check only one) | PAGE 112 OF 190 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
THE CONSERVATIVE STRIKEFORCE

A. ROBERT G STEINER 921
Full Name (Last, First, Middle Initial)

Mailing Address 600 W BROADWAY STE 2600

| | | |
|-------------------|-------------|-------------------|
| City SAN DIEGO | State CA | Zip Code 92101 |
|-------------------|-------------|-------------------|

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

| | |
|-----------------------------------|----------------------|
| Name of Employer SELF EMPLOYED | Occupation LAWYER |
|-----------------------------------|----------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
700.00

Date of Receipt

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 07 | | 11 | | 2014 |

Transaction ID : SA11AI.95516

Amount of Each Receipt this Period
600.00

B. ROBERT G STEINER 921
Full Name (Last, First, Middle Initial)

Mailing Address 600 W BROADWAY STE 2600

| | | |
|-------------------|-------------|-------------------|
| City SAN DIEGO | State CA | Zip Code 92101 |
|-------------------|-------------|-------------------|

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

| | |
|-----------------------------------|----------------------|
| Name of Employer SELF EMPLOYED | Occupation LAWYER |
|-----------------------------------|----------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
800.00

Date of Receipt

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 09 | | 09 | | 2014 |

Transaction ID : SA11AI.95517

Amount of Each Receipt this Period
100.00

C. MARGENE STEVENS 907
Full Name (Last, First, Middle Initial)

Mailing Address 6157 CARPINTERO AVE

| | | |
|------------------|-------------|-------------------|
| City LAKEWOOD | State CA | Zip Code 90713 |
|------------------|-------------|-------------------|

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

| | |
|-----------------------------|------------------------|
| Name of Employer RETIRED | Occupation EDUCATOR |
|-----------------------------|------------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 08 | | 17 | | 2014 |

Transaction ID : SA11AI.95542

Amount of Each Receipt this Period
500.00

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 1200.00 |
| 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 113 OF 190 |
| | (check only one) | |
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 12 |
| | | <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. GENEVA STICH 667 | | Date of Receipt |
| Mailing Address 7335 140TH RD | | <input type="text" value="09"/> / <input type="text" value="26"/> / <input type="text" value="2014"/> |
| City | State | Zip Code |
| CHANUTE | KS | 66720 |
| FEC ID number of contributing federal political committee. | | Transaction ID : SA11AI.95558 |
| <input type="text" value="C"/> | | Amount of Each Receipt this Period |
| | | <input type="text" value="35.00"/> |
| Name of Employer | Occupation | |
| NONE | RETIRED | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General | <input type="text" value="230.00"/> | |
| <input type="checkbox"/> Other (specify) ▼ | | |

| | | |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial) B. MR HAROLD J STIRLING 329 | | Date of Receipt |
| Mailing Address 471 PINE NEEDLES CT | | <input type="text" value="08"/> / <input type="text" value="11"/> / <input type="text" value="2014"/> |
| City | State | Zip Code |
| MELBOURNE | FL | 32940 |
| FEC ID number of contributing federal political committee. | | Transaction ID : SA11AI.95562 |
| <input type="text" value="C"/> | | Amount of Each Receipt this Period |
| | | <input type="text" value="300.00"/> |
| Name of Employer | Occupation | |
| | | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General | <input type="text" value="300.00"/> | |
| <input type="checkbox"/> Other (specify) ▼ | | |

| | | |
|---|--------------------------------------|---|
| Full Name (Last, First, Middle Initial) C. DAVID E STOKES 194 | | Date of Receipt |
| Mailing Address 4502 BRIAR HL W | | <input type="text" value="07"/> / <input type="text" value="10"/> / <input type="text" value="2014"/> |
| City | State | Zip Code |
| LAFAYETTE HILL | PA | 19444 |
| FEC ID number of contributing federal political committee. | | Transaction ID : SA11AI.95568 |
| <input type="text" value="C"/> | | Amount of Each Receipt this Period |
| | | <input type="text" value="1000.00"/> |
| Name of Employer | Occupation | |
| STOKES ASSOCIATES | OWNER | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General | <input type="text" value="1000.00"/> | |
| <input type="checkbox"/> Other (specify) ▼ | | |

| | |
|--|--------------------------------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | <input type="text" value="1335.00"/> |
| TOTAL This Period (last page this line number only).....▶ | <input type="text"/> |

**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 114 OF 190 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | | <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. NANCY SWEATT 950 | | Date of Receipt |
| Mailing Address PO BOX 3087 | | <input type="text" value="09"/> / <input type="text" value="02"/> / <input type="text" value="2014"/> |
| City | State | Zip Code |
| SANTA CRUZ | CA | 95063 |
| FEC ID number of contributing federal political committee. | <input type="text" value="C"/> | Transaction ID : SA11AI.95714 |
| Name of Employer | Occupation | Amount of Each Receipt this Period |
| NONE | RETIRED ATTORNEY | <input type="text" value="250.00"/> |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | <input type="text" value="215.00"/> | |

| | | |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial) B. PAUL SZARKOWSKI 584 | | Date of Receipt |
| Mailing Address 2614 87TH AVE SE | | <input type="text" value="07"/> / <input type="text" value="15"/> / <input type="text" value="2014"/> |
| City | State | Zip Code |
| JAMESTOWN | ND | 58401 |
| FEC ID number of contributing federal political committee. | <input type="text" value="C"/> | Transaction ID : SA11AI.95734 |
| Name of Employer | Occupation | Amount of Each Receipt this Period |
| NONE | RETIRED | <input type="text" value="25.00"/> |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | <input type="text" value="260.00"/> | |

| | | |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial) C. MR NORMAN V TAYLOR 405 | | Date of Receipt |
| Mailing Address 924 LAUDERDALE DR | | <input type="text" value="09"/> / <input type="text" value="25"/> / <input type="text" value="2014"/> |
| City | State | Zip Code |
| LEXINGTON | KY | 40515 |
| FEC ID number of contributing federal political committee. | <input type="text" value="C"/> | Transaction ID : SA11AI.95777 |
| Name of Employer | Occupation | Amount of Each Receipt this Period |
| NONE | RETIRED | <input type="text" value="105.00"/> |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | <input type="text" value="210.00"/> | |

| | |
|--|-------------------------------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | <input type="text" value="155.00"/> |
| TOTAL This Period (last page this line number only).....▶ | <input type="text"/> |

**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 115 OF 190 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
THE CONSERVATIVE STRIKEFORCE

A. MS SARA G THOMAS 381
Full Name (Last, First, Middle Initial)

Mailing Address 177 N HIGHLAND ST #4207

| | | |
|---------|-------|----------|
| City | State | Zip Code |
| MEMPHIS | TN | 38111 |

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 ▼
244.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 07 / 2014

Transaction ID : SA11AI.95832

Amount of Each Receipt this Period
100.00

B. VICKI THOMAS 465
Full Name (Last, First, Middle Initial)

Mailing Address 1618 LILAC LANE

| | | |
|--------|-------|----------|
| City | State | Zip Code |
| WARSAW | IN | 46580 |

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

| | |
|------------------|------------|
| Name of Employer | Occupation |
| | |

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 17 / 2014

Transaction ID : SA11AI.95833

Amount of Each Receipt this Period
500.00

C. MR JOHN D TURNBULL 614
Full Name (Last, First, Middle Initial)

Mailing Address 8679 TOWNSHIP ROAD 1300 N

| | | |
|--------|-------|----------|
| City | State | Zip Code |
| TOULON | IL | 61483 |

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

| | |
|-----------------------|------------------|
| Name of Employer | Occupation |
| TURNBULL FUNERAL HOME | FUNERAL DIRECTOR |

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 02 / 2014

Transaction ID : SA11AI.96005

Amount of Each Receipt this Period
50.00

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 650.00 |
| 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 116 OF 190 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <input type="checkbox"/> 14 |

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NAME OF COMMITTEE (In Full)
THE CONSERVATIVE STRIKEFORCE

| | | |
|---|--------------------------|---|
| Full Name (Last, First, Middle Initial) A. MS GLORIA VAALER 585 | | Date of Receipt |
| Mailing Address 204 6TH AVE NW | | M M M / D D D / Y Y Y Y Y Y 08 / 22 / 2014 |
| City | State | Zip Code |
| ELGIN | ND | 58533 |
| FEC ID number of contributing federal political committee. | | Transaction ID : SA11AI.96041 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period |
| | | 130.00 |
| Name of Employer | Occupation | |
| NONE | RETIRED | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | 230.00 | |

| | | |
|---|--------------------------|---|
| Full Name (Last, First, Middle Initial) B. MRS MARTHA L VAN LIERE 902 | | Date of Receipt |
| Mailing Address 10 STIRRUP RD | | M M M / D D D / Y Y Y Y Y Y 09 / 13 / 2014 |
| City | State | Zip Code |
| RANCHO PALOS VERDE | CA | 90275 |
| FEC ID number of contributing federal political committee. | | Transaction ID : SA11AI.96082 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period |
| | | 100.00 |
| Name of Employer | Occupation | |
| NONE | HOMEMAKER | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | 300.00 | |

| | | |
|---|--------------------------|---|
| Full Name (Last, First, Middle Initial) C. MRS ELIZABETH R WADE 931 | | Date of Receipt |
| Mailing Address 5364 CALLE REAL APT D | | M M M / D D D / Y Y Y Y Y Y 07 / 30 / 2014 |
| City | State | Zip Code |
| SANTA BARBARA | CA | 93111 |
| FEC ID number of contributing federal political committee. | | Transaction ID : SA11AI.96208 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period |
| | | 300.00 |
| Name of Employer | Occupation | |
| | | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | 400.00 | |

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 530.00 |
| 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 117 OF 190
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE CONSERVATIVE STRIKEFORCE

A. MRS ELIZABETH R WADE 931
 Full Name (Last, First, Middle Initial)
 Mailing Address 5364 CALLE REAL APT D
 City SANTA BARBARA State CA Zip Code 93111
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 26 / 2014
Transaction ID : SA11AI.96206
 Amount of Each Receipt this Period
 50.00

B. MR WILLIAM A WALSH 920
 Full Name (Last, First, Middle Initial)
 Mailing Address 906 SANTA HIDALGA
 City SOLANA BEACH State CA Zip Code 92075
 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 ▼
 688.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 11 / 2014
Transaction ID : SA11AI.96269
 Amount of Each Receipt this Period
 500.00

C. MARY ANN WATSON 381
 Full Name (Last, First, Middle Initial)
 Mailing Address 172 PLAINVIEW ST
 City MEMPHIS State TN Zip Code 38111
 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 ▼
 505.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 11 / 2014
Transaction ID : SA11AI.96315
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 650.00
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 118 OF 190
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE CONSERVATIVE STRIKEFORCE

A. MARY ANN WATSON 381
 Full Name (Last, First, Middle Initial)
 Mailing Address 172 PLAINVIEW ST
 City MEMPHIS State TN Zip Code 38111
 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 ▼ 555.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 15 / 2014
Transaction ID : SA11AI.96313
 Amount of Each Receipt this Period
 50.00

B. MARY ANN WATSON 381
 Full Name (Last, First, Middle Initial)
 Mailing Address 172 PLAINVIEW ST
 City MEMPHIS State TN Zip Code 38111
 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 ▼ 645.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 03 / 2014
Transaction ID : SA11AI.96316
 Amount of Each Receipt this Period
 90.00

C. MARY ANN WATSON 381
 Full Name (Last, First, Middle Initial)
 Mailing Address 172 PLAINVIEW ST
 City MEMPHIS State TN Zip Code 38111
 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 ▼ 695.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 15 / 2014
Transaction ID : SA11AI.96314
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 190.00
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 119 OF 190 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
THE CONSERVATIVE STRIKEFORCE

A. MRS LULA WEISENFELS 729
 Full Name (Last, First, Middle Initial)
 Mailing Address 405 BROWNWOOD EST
 City FORT SMITH State AR Zip Code 72916
 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 **480.00**

Date of Receipt **09 / 15 / 2014**
Transaction ID : SA11AI.96368
 Amount of Each Receipt this Period **50.00**

B. MR RONALD WHANN 975
 Full Name (Last, First, Middle Initial)
 Mailing Address 8278 24TH ST
 City WHITE CITY State OR Zip Code 97503
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation VETERAN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **275.00**

Date of Receipt **09 / 12 / 2014**
Transaction ID : SA11AI.96440
 Amount of Each Receipt this Period **100.00**

C. MR JAMES W WHITCOMB 981
 Full Name (Last, First, Middle Initial)
 Mailing Address 620 S 198TH ST
 City SEATTLE State WA Zip Code 98148
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF EMPLOYED Occupation ENGINEERING CONSULTANT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **220.00**

Date of Receipt **08 / 22 / 2014**
Transaction ID : SA11AI.96456
 Amount of Each Receipt this Period **50.00**

| | |
|---|---------------|
| 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) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 120 OF 190
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE CONSERVATIVE STRIKEFORCE

A. MS RUTH WIEGMAN 448
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 43
 City CHATFIELD State OH Zip Code 44825
 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 ▼ 265.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 23 / 2014
Transaction ID : SA11AI.96495
 Amount of Each Receipt this Period
 200.00

B. MR JAMES W WILL 984
 Full Name (Last, First, Middle Initial)
 Mailing Address 616 BROADWAY
 City TACOMA State WA Zip Code 98402
 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 M / D D D / Y Y Y Y Y Y
 09 / 22 / 2014
Transaction ID : SA11AI.96531
 Amount of Each Receipt this Period
 100.00

C. MR CALVIN WILLIS 302
 Full Name (Last, First, Middle Initial)
 Mailing Address 819 PINEY WOODS DR
 City LAGRANGE State GA Zip Code 30240
 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 ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 08 / 2014
Transaction ID : SA11AI.96573
 Amount of Each Receipt this Period
 200.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 320.00
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 121 OF 190 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | | <input type="checkbox"/> 15 |
| | | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
THE CONSERVATIVE STRIKEFORCE

A. MR JOHN H WILSON 922
Full Name (Last, First, Middle Initial)
Mailing Address 5801 SUN LAKES BLVD APT 119

| | | |
|-----------------|-------------|-------------------|
| City BANNING | State CA | Zip Code 92220 |
|-----------------|-------------|-------------------|

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 M | / | D D D | / | Y Y Y Y Y Y |
| 07 | | 17 | | 2014 |

Transaction ID : SA11AI.96612

Amount of Each Receipt this Period
5.00

B. MR JOHN H WILSON 922
Full Name (Last, First, Middle Initial)
Mailing Address 5801 SUN LAKES BLVD APT 119

| | | |
|-----------------|-------------|-------------------|
| City BANNING | State CA | Zip Code 92220 |
|-----------------|-------------|-------------------|

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 M | / | D D D | / | Y Y Y Y Y Y |
| 09 | | 29 | | 2014 |

Transaction ID : SA11AI.96613

Amount of Each Receipt this Period
50.00

C. CAROL WILSON 945
Full Name (Last, First, Middle Initial)
Mailing Address 2197 SUTTER VIEW LN

| | | |
|-----------------|-------------|-------------------|
| City LINCOLN | State CO | Zip Code 94548 |
|-----------------|-------------|-------------------|

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 M | / | D D D | / | Y Y Y Y Y Y |
| 09 | | 02 | | 2014 |

Transaction ID : SA11AI.96620

Amount of Each Receipt this Period
1000.00

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 1055.00 |
| 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 122 OF 190
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE CONSERVATIVE STRIKEFORCE

A. CAROL WILSON 956
 Full Name (Last, First, Middle Initial)
 Mailing Address 2197 SUTTER VIEW LANE
 City State Zip Code
 LINCOLN CA 95648
 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 ▼
 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 08 / 12 / 2014
Transaction ID : SA11AI.96623
 Amount of Each Receipt this Period
 200.00

B. MS LORRAINE C WINK 601
 Full Name (Last, First, Middle Initial)
 Mailing Address 611 S OAKLAND AVE
 City State Zip Code
 VILLA PARK IL 60181
 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
 08 / 26 / 2014
Transaction ID : SA11AI.96640
 Amount of Each Receipt this Period
 45.00

C. MS LORRAINE C WINK 601
 Full Name (Last, First, Middle Initial)
 Mailing Address 611 S OAKLAND AVE
 City State Zip Code
 VILLA PARK IL 60181
 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 ▼
 325.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 09 / 11 / 2014
Transaction ID : SA11AI.96637
 Amount of Each Receipt this Period
 100.00

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) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 123 OF 190
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE CONSERVATIVE STRIKEFORCE

A. MS LORRAINE C WINK 601
 Full Name (Last, First, Middle Initial)
 Mailing Address 611 S OAKLAND AVE
 City State Zip Code
 VILLA PARK IL 60181
 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 ▼
 370.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 17 / 2014
Transaction ID : SA11AI.96639
 Amount of Each Receipt this Period
 45.00

B. MS LORRAINE C WINK 601
 Full Name (Last, First, Middle Initial)
 Mailing Address 611 S OAKLAND AVE
 City State Zip Code
 VILLA PARK IL 60181
 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 ▼
 610.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2014
Transaction ID : SA11AI.96636
 Amount of Each Receipt this Period
 240.00

C. MRS JANE P WOLD 826
 Full Name (Last, First, Middle Initial)
 Mailing Address 1231 30TH ST
 City State Zip Code
 CASPER WY 82601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 261.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 24 / 2014
Transaction ID : SA11AI.96667
 Amount of Each Receipt this Period
 201.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 486.00
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 124 OF 190
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE CONSERVATIVE STRIKEFORCE

A. MRS ALVERA WOLLGAST 630
 Full Name (Last, First, Middle Initial)
 Mailing Address 13005 OLD HALLS FERRY RD
 City State Zip Code
 FLORISSANT MO 63033
 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 ▼
 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 23 / 2014
Transaction ID : SA11AI.96680
 Amount of Each Receipt this Period
 100.00

B. MR EDWARD G WONG 921
 Full Name (Last, First, Middle Initial)
 Mailing Address 11186 PACEMONT LN
 City State Zip Code
 SAN DIEGO CA 92126
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 RETIRED ATTORNEY
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 905.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 11 / 2014
Transaction ID : SA11AI.96694
 Amount of Each Receipt this Period
 500.00

C. MR EDWARD G WONG 921
 Full Name (Last, First, Middle Initial)
 Mailing Address 11186 PACEMONT LN
 City State Zip Code
 SAN DIEGO CA 92126
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 RETIRED ATTORNEY
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1905.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 26 / 2014
Transaction ID : SA11AI.96693
 Amount of Each Receipt this Period
 1000.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 1600.00
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 125 OF 190 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <input type="checkbox"/> 14 |

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NAME OF COMMITTEE (In Full)
THE CONSERVATIVE STRIKEFORCE

| | | |
|---|--------------------------|---|
| Full Name (Last, First, Middle Initial) A. MR EDWARD G WONG 921 | | Date of Receipt |
| Mailing Address 11186 PACEMONT LN | | M M M / D D D / Y Y Y Y Y Y 09 / 16 / 2014 |
| City | State | Zip Code |
| SAN DIEGO | CA | 92126 |
| FEC ID number of contributing federal political committee. | | Transaction ID : SA11AI.96695 |
| C | | Amount of Each Receipt this Period |
| | | 2000.00 |
| Name of Employer | Occupation | |
| RETIRED | ATTORNEY | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | 3905.00 |

| | | |
|---|--------------------------|---|
| Full Name (Last, First, Middle Initial) B. MR EDWARD G WONG 921 | | Date of Receipt |
| Mailing Address 11186 PACEMONT LN | | M M M / D D D / Y Y Y Y Y Y 09 / 22 / 2014 |
| City | State | Zip Code |
| SAN DIEGO | CA | 92126 |
| FEC ID number of contributing federal political committee. | | Transaction ID : SA11AI.96692 |
| C | | Amount of Each Receipt this Period |
| | | 1000.00 |
| Name of Employer | Occupation | |
| RETIRED | ATTORNEY | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | 4905.00 |

| | | |
|---|--------------------------|---|
| Full Name (Last, First, Middle Initial) C. MS CHRISTINE WOOD 994 | | Date of Receipt |
| Mailing Address 2739 LAUREL DR | | M M M / D D D / Y Y Y Y Y Y 07 / 11 / 2014 |
| City | State | Zip Code |
| CLARKSTON | WA | 99403 |
| FEC ID number of contributing federal political committee. | | Transaction ID : SA11AI.96706 |
| C | | Amount of Each Receipt this Period |
| | | 25.00 |
| Name of Employer | Occupation | |
| ASOTIN COUNTY EMPLOYEE | ASSESSOR | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | 225.00 |

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 3025.00 |
| 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 126 OF 190
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE CONSERVATIVE STRIKEFORCE

A. MS CHRISTINE WOOD 994
 Full Name (Last, First, Middle Initial)
 Mailing Address 2739 LAUREL DR
 City CLARKSTON State WA Zip Code 99403
 FEC ID number of contributing federal political committee. **C**
 Name of Employer ASOTIN COUNTY EMPLOYEE Occupation ASSESSOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 15 / 2014
Transaction ID : SA11AI.96707
 Amount of Each Receipt this Period
 250.00

B. MR PIERS WOODRIF 229
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 503
 City SOMERSET State VA Zip Code 22972
 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 M / D D D / Y Y Y Y Y Y
 09 / 22 / 2014
Transaction ID : SA11AI.96715
 Amount of Each Receipt this Period
 100.00

C. ORVAN YODER 465
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 144
 City TOPEKA State IN Zip Code 46571
 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 M / D D D / Y Y Y Y Y Y
 07 / 27 / 2014
Transaction ID : SA11AI.96785
 Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 150.00
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 127 OF 190 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <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. MR EDWARD S YOUNG 174 | | | Date of Receipt |
| Mailing Address 1673 WYNTRE BROOKE DR | | | <input type="text" value="07"/> / <input type="text" value="23"/> / <input type="text" value="2014"/> |
| City | State | Zip Code | Transaction ID : SA11AI.96795 |
| YORK | PA | 17403 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | <input type="text" value="C"/> | | <input type="text" value="100.00"/> |
| Name of Employer | Occupation | | |
| NONE | RETIRED | | |
| Receipt For: | Aggregate Year-to-Date ▼ | | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General | <input type="text" value="300.00"/> | | |
| <input type="checkbox"/> Other (specify) ▼ | | | |

| | | | |
|--|-------------------------------------|----------|---|
| Full Name (Last, First, Middle Initial) B. MR EDWARD S YOUNG 174 | | | Date of Receipt |
| Mailing Address 1673 WYNTRE BROOKE DR | | | <input type="text" value="08"/> / <input type="text" value="18"/> / <input type="text" value="2014"/> |
| City | State | Zip Code | Transaction ID : SA11AI.96794 |
| YORK | PA | 17403 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | <input type="text" value="C"/> | | <input type="text" value="100.00"/> |
| Name of Employer | Occupation | | |
| NONE | RETIRED | | |
| Receipt For: | Aggregate Year-to-Date ▼ | | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General | <input type="text" value="400.00"/> | | |
| <input type="checkbox"/> Other (specify) ▼ | | | |

| | | | |
|--|-------------------------------------|----------|---|
| Full Name (Last, First, Middle Initial) C. MR EDWARD S YOUNG 174 | | | Date of Receipt |
| Mailing Address 1673 WYNTRE BROOKE DR | | | <input type="text" value="09"/> / <input type="text" value="23"/> / <input type="text" value="2014"/> |
| City | State | Zip Code | Transaction ID : SA11AI.96796 |
| YORK | PA | 17403 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | <input type="text" value="C"/> | | <input type="text" value="100.00"/> |
| Name of Employer | Occupation | | |
| NONE | RETIRED | | |
| Receipt For: | Aggregate Year-to-Date ▼ | | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General | <input type="text" value="500.00"/> | | |
| <input type="checkbox"/> Other (specify) ▼ | | | |

| | |
|--|-------------------------------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | <input type="text" value="300.00"/> |
| TOTAL This Period (last page this line number only).....▶ | <input type="text" value=""/> |

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

| | | |
|---|------------------------------|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: | PAGE 128 OF 190 |
| | (check only one) | |
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 12 |
| | | <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. MR ROBERT A YOUNG 857 | | Date of Receipt |
| Mailing Address 616 W QUIET SPRINGS DR | | <input type="text" value="09"/> / <input type="text" value="26"/> / <input type="text" value="2014"/> |
| City | State | Zip Code |
| ORO VALLEY | AZ | 85755 |
| FEC ID number of contributing federal political committee. | | <input type="text" value="C"/> |
| Name of Employer | Occupation | Transaction ID : SA11AI.96808 |
| NONE | RETIRED | |
| Receipt For: | Aggregate Year-to-Date ▼ | Amount of Each Receipt this Period |
| <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | <input type="text" value="350.00"/> | <input type="text" value="150.00"/> |

| | | |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial) B. MR JOHN W ZIEGLER 173 JR | | Date of Receipt |
| Mailing Address 515 GRACE TER | | <input type="text" value="08"/> / <input type="text" value="11"/> / <input type="text" value="2014"/> |
| City | State | Zip Code |
| NEW OXFORD | PA | 17350 |
| FEC ID number of contributing federal political committee. | | <input type="text" value="C"/> |
| Name of Employer | Occupation | Transaction ID : SA11AI.96847 |
| SELF EMPLOYED | AUTHOR | |
| Receipt For: | Aggregate Year-to-Date ▼ | Amount of Each Receipt this Period |
| <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | <input type="text" value="250.00"/> | <input type="text" value="250.00"/> |

| | | |
|---|--------------------------|--|
| Full Name (Last, First, Middle Initial) C. | | Date of Receipt |
| Mailing Address | | <input type="text"/> / <input type="text"/> / <input type="text"/> |
| City | State | Zip Code |
| | | |
| FEC ID number of contributing federal political committee. | | <input type="text" value="C"/> |
| Name of Employer | Occupation | Transaction ID : SA11AI.96847 |
| | | |
| Receipt For: | Aggregate Year-to-Date ▼ | Amount of Each Receipt this Period |
| <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | <input type="text"/> | <input type="text"/> |

| | |
|--|---------------------------------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | <input type="text" value="400.00"/> |
| TOTAL This Period (last page this line number only).....▶ | <input type="text" value="79740.10"/> |

**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 129 OF 190 |
| <input 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 checked="" 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)
THE CONSERVATIVE STRIKEFORCE

| | | |
|---|--------------------------------|---|
| Full Name (Last, First, Middle Initial) A. ACTIVE ENGAGEMENT LLC | | Date of Receipt |
| Mailing Address 44084 RIVERSIDE PKWY SUITE 350 | | <input type="text" value="07"/> / <input type="text" value="17"/> / <input type="text" value="2014"/> |
| City LANSDOWNE | State VA | Zip Code 20176 |
| FEC ID number of contributing federal political committee. | <input type="text" value="C"/> | Transaction ID : SA17.87641 |
| Name of Employer | Occupation | Amount of Each Receipt this Period |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ | <input type="text" value="2595.95"/> |
| | | LIST RENTAL INCOME |

| | | |
|---|--------------------------------|---|
| Full Name (Last, First, Middle Initial) B. ACTIVE ENGAGEMENT LLC | | Date of Receipt |
| Mailing Address 44084 RIVERSIDE PKWY SUITE 350 | | <input type="text" value="08"/> / <input type="text" value="21"/> / <input type="text" value="2014"/> |
| City LANSDOWNE | State VA | Zip Code 20176 |
| FEC ID number of contributing federal political committee. | <input type="text" value="C"/> | Transaction ID : SA17.87642 |
| Name of Employer | Occupation | Amount of Each Receipt this Period |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ | <input type="text" value="123.20"/> |
| | | LIST RENTAL INCOME |

| | | |
|---|--------------------------------|---|
| Full Name (Last, First, Middle Initial) C. ACTIVE ENGAGEMENT LLC | | Date of Receipt |
| Mailing Address 44084 RIVERSIDE PKWY SUITE 350 | | <input type="text" value="09"/> / <input type="text" value="20"/> / <input type="text" value="2014"/> |
| City LANSDOWNE | State VA | Zip Code 20176 |
| FEC ID number of contributing federal political committee. | <input type="text" value="C"/> | Transaction ID : SA17.87643 |
| Name of Employer | Occupation | Amount of Each Receipt this Period |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ | <input type="text" value="213.46"/> |
| | | LIST RENTAL INCOME |

| | |
|--|--------------------------------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | <input type="text" value="2932.61"/> |
| TOTAL This Period (last page this line number only).....▶ | <input type="text" value="2932.61"/> |

**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)
THE CONSERVATIVE STRIKEFORCE

Full Name (Last, First, Middle Initial)

A. ACTIVE ENGAGEMENT LLC

Mailing Address 44084 RIVERSIDE PKWY
SUITE 350

City LANSDOWNE State VA Zip Code 20176

Purpose of Disbursement
PAC TELEMARKETING SERVICES

003

Candidate Name
THE CONSERVATIVE STRIKEFORCE

Category/
Type

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
07 / 08 / 2014

Transaction ID : SB21B.83301

Amount of Each Disbursement this Period

405.20

Full Name (Last, First, Middle Initial)

B. ACTIVE ENGAGEMENT LLC

Mailing Address 44084 RIVERSIDE PKWY
SUITE 350

City LANSDOWNE State VA Zip Code 20176

Purpose of Disbursement
PAC TELEMARKETING SERVICES

003

Candidate Name
THE CONSERVATIVE STRIKEFORCE

Category/
Type

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
07 / 15 / 2014

Transaction ID : SB21B.83302

Amount of Each Disbursement this Period

1412.50

Full Name (Last, First, Middle Initial)

C. ACTIVE ENGAGEMENT LLC

Mailing Address 44084 RIVERSIDE PKWY
SUITE 350

City LANSDOWNE State VA Zip Code 20176

Purpose of Disbursement
PAC TELEMARKETING SERVICES

003

Candidate Name
THE CONSERVATIVE STRIKEFORCE

Category/
Type

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
07 / 29 / 2014

Transaction ID : SB21B.83303

Amount of Each Disbursement this Period

2100.00

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

3917.70

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

**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)
THE CONSERVATIVE STRIKEFORCE

Full Name (Last, First, Middle Initial)

A. ACTIVE ENGAGEMENT LLC

Mailing Address 44084 RIVERSIDE PKWY
SUITE 350

City LANSDOWNE State VA Zip Code 20176

Purpose of Disbursement
PAC TELEMARKETING SERVICES

003

Candidate Name
THE CONSERVATIVE STRIKEFORCE

Category/
Type

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
08 / 05 / 2014

Transaction ID : **SB21B.83304**

Amount of Each Disbursement this Period

1200.00

Full Name (Last, First, Middle Initial)

B. ACTIVE ENGAGEMENT LLC

Mailing Address 44084 RIVERSIDE PKWY
SUITE 350

City LANSDOWNE State VA Zip Code 20176

Purpose of Disbursement
PAC TELEMARKETING SERVICES

003

Candidate Name
THE CONSERVATIVE STRIKEFORCE

Category/
Type

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
08 / 12 / 2014

Transaction ID : **SB21B.83305**

Amount of Each Disbursement this Period

2560.00

Full Name (Last, First, Middle Initial)

C. ACTIVE ENGAGEMENT LLC

Mailing Address 44084 RIVERSIDE PKWY
SUITE 350

City LANSDOWNE State VA Zip Code 20176

Purpose of Disbursement
PAC TELEMARKETING SERVICES

003

Candidate Name
THE CONSERVATIVE STRIKEFORCE

Category/
Type

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
08 / 26 / 2014

Transaction ID : **SB21B.83310**

Amount of Each Disbursement this Period

4475.00

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

8235.00

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

**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)
THE CONSERVATIVE STRIKEFORCE

Full Name (Last, First, Middle Initial)

A. ACTIVE ENGAGEMENT LLC

Mailing Address 44084 RIVERSIDE PKWY
SUITE 350

City LANSLOWNE State VA Zip Code 20176

Purpose of Disbursement
PAC TELEMARKETING SERVICES

003

Candidate Name
THE CONSERVATIVE STRIKEFORCE

Category/
Type

Office Sought: House Senate President
Disbursement For: Primary General
 Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
09 / 16 / 2014

Transaction ID : **SB21B.83306**

Amount of Each Disbursement this Period

144.00

Full Name (Last, First, Middle Initial)

B. AMBASSADOR ACCOUNTING INC

Mailing Address 7521 PRESIDENTIAL LN

City MANASSAS State VA Zip Code 20109

Purpose of Disbursement
ESCROW SERVICES

001

Candidate Name
THE CONSERVATIVE STRIKEFORCE

Category/
Type

Office Sought: House Senate President
Disbursement For: Primary General
 Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
07 / 08 / 2014

Transaction ID : **SB21B.83315**

Amount of Each Disbursement this Period

110.77

Full Name (Last, First, Middle Initial)

C. AMBASSADOR ACCOUNTING INC

Mailing Address 7521 PRESIDENTIAL LN

City MANASSAS State VA Zip Code 20109

Purpose of Disbursement
ESCROW SERVICES

001

Candidate Name
THE CONSERVATIVE STRIKEFORCE

Category/
Type

Office Sought: House Senate President
Disbursement For: Primary General
 Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
08 / 05 / 2014

Transaction ID : **SB21B.83316**

Amount of Each Disbursement this Period

100.25

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

355.02

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

**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)

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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. AMBASSADOR ACCOUNTING INC

Mailing Address 7521 PRESIDENTIAL LN

City MANASSAS State VA Zip Code 20109

Purpose of Disbursement
ESCROW SERVICES

001

Candidate Name
THE CONSERVATIVE STRIKEFORCE

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
09 / 02 / 2014

Transaction ID : SB21B.83317

Amount of Each Disbursement this Period

115.38

Full Name (Last, First, Middle Initial)

B. AMERICAN LIBERTY GROUP LLC

Mailing Address 611 PENNSYLVANIA AVE SE
SUITE 227

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAC TELEMARKETING SERVICES

003

Candidate Name
THE CONSERVATIVE STRIKEFORCE

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
07 / 01 / 2014

Transaction ID : SB21B.83227

Amount of Each Disbursement this Period

5541.30

Full Name (Last, First, Middle Initial)

C. AMERICAN LIBERTY GROUP LLC

Mailing Address 611 PENNSYLVANIA AVE SE
SUITE 227

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAC TELEMARKETING SERVICES

003

Candidate Name
THE CONSERVATIVE STRIKEFORCE

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
07 / 10 / 2014

Transaction ID : SB21B.83226

Amount of Each Disbursement this Period

5655.25

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

11311.93

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

**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)

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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 LIBERTY GROUP LLC

Mailing Address 611 PENNSYLVANIA AVE SE
SUITE 227

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAC TELEMARKETING SERVICES

Category/
Type

Candidate Name
THE CONSERVATIVE STRIKEFORCE

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

/ /

Transaction ID : SB21B.83230

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. AMERICAN LIBERTY GROUP LLC

Mailing Address 611 PENNSYLVANIA AVE SE
SUITE 227

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAC TELEMARKETING SERVICES

Category/
Type

Candidate Name
THE CONSERVATIVE STRIKEFORCE

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

/ /

Transaction ID : SB21B.83231

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. AMERICAN LIBERTY GROUP LLC

Mailing Address 611 PENNSYLVANIA AVE SE
SUITE 227

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAC TELEMARKETING SERVICES

Category/
Type

Candidate Name
THE CONSERVATIVE STRIKEFORCE

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

/ /

Transaction ID : SB21B.83233

Amount of Each Disbursement this Period

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

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

**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)
THE CONSERVATIVE STRIKEFORCE

Full Name (Last, First, Middle Initial)

A. AMERICAN LIBERTY GROUP LLC

Mailing Address 611 PENNSYLVANIA AVE SE
SUITE 227

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAC TELEMARKETING SERVICES

003

Candidate Name
THE CONSERVATIVE STRIKEFORCE

Category/
Type

Office Sought: House Senate President
Disbursement For: Primary General
 Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
08 / 21 / 2014

Transaction ID : **SB21B.83232**

Amount of Each Disbursement this Period

1985.00

Full Name (Last, First, Middle Initial)

B. AMERICAN LIBERTY GROUP LLC

Mailing Address 611 PENNSYLVANIA AVE SE
SUITE 227

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAC TELEMARKETING SERVICES

003

Candidate Name
THE CONSERVATIVE STRIKEFORCE

Category/
Type

Office Sought: House Senate President
Disbursement For: Primary General
 Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
09 / 04 / 2014

Transaction ID : **SB21B.83234**

Amount of Each Disbursement this Period

2827.48

Full Name (Last, First, Middle Initial)

C. AMERICAN LIBERTY GROUP LLC

Mailing Address 611 PENNSYLVANIA AVE SE
SUITE 227

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAC TELEMARKETING SERVICES

003

Candidate Name
THE CONSERVATIVE STRIKEFORCE

Category/
Type

Office Sought: House Senate President
Disbursement For: Primary General
 Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
09 / 11 / 2014

Transaction ID : **SB21B.83228**

Amount of Each Disbursement this Period

4650.00

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

9462.48

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

**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)
THE CONSERVATIVE STRIKEFORCE

Full Name (Last, First, Middle Initial)

A. AMERICAN LIBERTY GROUP LLC

Mailing Address 611 PENNSYLVANIA AVE SE
SUITE 227

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAC TELEMARKETING SERVICES

003

Candidate Name
THE CONSERVATIVE STRIKEFORCE

Category/
Type

Office Sought: House Senate President
Disbursement For: Primary General
 Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
09 / 18 / 2014

Transaction ID : **SB21B.83229**

Amount of Each Disbursement this Period

3550.00

Full Name (Last, First, Middle Initial)

B. AMERICAN LIBERTY GROUP LLC

Mailing Address 611 PENNSYLVANIA AVE SE
SUITE 227

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAC TELEMARKETING SERVICES

003

Candidate Name
THE CONSERVATIVE STRIKEFORCE

Category/
Type

Office Sought: House Senate President
Disbursement For: Primary General
 Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
09 / 22 / 2014

Transaction ID : **SB21B.83225**

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

C. ATLANTIC LIST COMPANY

Mailing Address 2425 WILSON BLVD

City ARLINGTON State VA Zip Code 22201

Purpose of Disbursement
PAC TELEMARKETING LIST RENTAL

003

Candidate Name
THE CONSERVATIVE STRIKEFORCE

Category/
Type

Office Sought: House Senate President
Disbursement For: Primary General
 Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
09 / 11 / 2014

Transaction ID : **SB21B.83235**

Amount of Each Disbursement this Period

3690.60

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

12240.60

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

**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)
THE CONSERVATIVE STRIKEFORCE

Full Name (Last, First, Middle Initial)

A. CAPITOL CAGING CORP

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 08 | | 28 | | 2014 |

Mailing Address 504 SHAW RD

Transaction ID : SB21B.83174

City State Zip Code
STERLING VA 20166

Amount of Each Disbursement this Period

| |
|--------|
| 102.81 |
|--------|

Purpose of Disbursement
CAGING SERVICES

| |
|-------------------|
| 001 |
| Category/ Type |

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: | |

Full Name (Last, First, Middle Initial)

B. CLIENT FIRST CONSULTING GROUP LLC

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 08 | | 04 | | 2014 |

Mailing Address 385 AVERY LN

Transaction ID : SB21B.83320

City State Zip Code
MEDINA OH 44256

Amount of Each Disbursement this Period

| |
|---------|
| 1800.00 |
|---------|

Purpose of Disbursement
PAC TELEMARKETING SERVICES

| |
|-------------------|
| 003 |
| Category/ Type |

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: | |

Full Name (Last, First, Middle Initial)

C. CLIENT FIRST CONSULTING GROUP LLC

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 08 | | 12 | | 2014 |

Mailing Address 385 AVERY LN

Transaction ID : SB21B.83321

City State Zip Code
MEDINA OH 44256

Amount of Each Disbursement this Period

| |
|---------|
| 9000.00 |
|---------|

Purpose of Disbursement
PAC TELEMARKETING SERVICES

| |
|-------------------|
| 003 |
| Category/ Type |

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: | |

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

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

| |
|----------|
| 10902.81 |
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**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)
THE CONSERVATIVE STRIKEFORCE

Full Name (Last, First, Middle Initial)

A. CLIENT FIRST CONSULTING GROUP LLC

Mailing Address 385 AVERY LN

City MEDINA State OH Zip Code 44256

Purpose of Disbursement
PAC TELEMARKETING LIST RENTAL

003

Candidate Name
THE CONSERVATIVE STRIKEFORCE

Category/
Type

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
08 / 19 / 2014

Transaction ID : **SB21B.83199**

Amount of Each Disbursement this Period

4000.00

Full Name (Last, First, Middle Initial)

B. CLIENT FIRST CONSULTING GROUP LLC

Mailing Address 385 AVERY LN

City MEDINA State OH Zip Code 44256

Purpose of Disbursement
PAC TELEMARKETING SERVICES

003

Candidate Name
THE CONSERVATIVE STRIKEFORCE

Category/
Type

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
09 / 05 / 2014

Transaction ID : **SB21B.83322**

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

C. CONSOLIDATED MAILING SERVICES

Mailing Address 504 SHAW ROAD
SUITE 206

City STERLING State VA Zip Code 20166

Purpose of Disbursement
PAC DIRECT MAIL - PRINTING & MAILSHOP

003

Candidate Name
THE CONSERVATIVE STRIKEFORCE

Category/
Type

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
09 / 16 / 2014

Transaction ID : **SB21B.83367**

Amount of Each Disbursement this Period

1296.64

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

7296.64

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

**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)
THE CONSERVATIVE STRIKEFORCE

Full Name (Last, First, Middle Initial)

A. DIRECT CONCEPTS

Mailing Address 10130 MALLARD CREEK RD

City CHARLOTTE State NC Zip Code 28262

Purpose of Disbursement
PAC DIRECT MAIL - PRINTING & MAILSHOP

003

Candidate Name
THE CONSERVATIVE STRIKEFORCE

Category/
Type

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
08 / 08 / 2014

Transaction ID : **SB21B.83369**

Amount of Each Disbursement this Period

600.00

Full Name (Last, First, Middle Initial)

B. DIRECT CONCEPTS

Mailing Address 10130 MALLARD CREEK RD

City CHARLOTTE State NC Zip Code 28262

Purpose of Disbursement
PAC DIRECT MAIL - PRINTING & MAILSHOP

003

Candidate Name
THE CONSERVATIVE STRIKEFORCE

Category/
Type

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
08 / 27 / 2014

Transaction ID : **SB21B.83370**

Amount of Each Disbursement this Period

1025.00

Full Name (Last, First, Middle Initial)

C. DIRECT CONCEPTS

Mailing Address 10130 MALLARD CREEK RD

City CHARLOTTE State NC Zip Code 28262

Purpose of Disbursement
PAC DIRECT MAIL - PRINTING & MAILSHOP

003

Candidate Name
THE CONSERVATIVE STRIKEFORCE

Category/
Type

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
09 / 16 / 2014

Transaction ID : **SB21B.83371**

Amount of Each Disbursement this Period

500.00

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

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

2125.00

**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)
THE CONSERVATIVE STRIKEFORCE

Full Name (Last, First, Middle Initial)

A. DIRECT CONCEPTS

Mailing Address 10130 MALLARD CREEK RD

City CHARLOTTE State NC Zip Code 28262

Purpose of Disbursement
PAC DIRECT MAIL - PRINTING & MAILSHOP

003

Candidate Name
THE CONSERVATIVE STRIKEFORCE

Category/
Type

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
09 / 25 / 2014

Transaction ID : SB21B.83372

Amount of Each Disbursement this Period

475.00

Full Name (Last, First, Middle Initial)

B. FIRST MERIT BANK

Mailing Address 295 FIRSTMERIT CIRCLE

City AKRON State OH Zip Code 44307

Purpose of Disbursement
SERVICE CHARGE

001

Candidate Name
THE CONSERVATIVE STRIKEFORCE

Category/
Type

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
07 / 07 / 2014

Transaction ID : SB21B.83323

Amount of Each Disbursement this Period

152.56

Full Name (Last, First, Middle Initial)

C. FIRST MERIT BANK

Mailing Address 295 FIRSTMERIT CIRCLE

City AKRON State OH Zip Code 44307

Purpose of Disbursement
CREDIT CARD DISCOUNT FEE

001

Candidate Name
THE CONSERVATIVE STRIKEFORCE

Category/
Type

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
07 / 07 / 2014

Transaction ID : SB21B.83326

Amount of Each Disbursement this Period

7.65

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

635.21

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

**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)

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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. FIRST MERIT BANK

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 07 | | 07 | | 2014 |

Mailing Address 295 FIRSTMERIT CIRCLE

Transaction ID : SB21B.83327

City AKRON State OH Zip Code 44307

Amount of Each Disbursement this Period

| |
|------|
| 2.90 |
|------|

Purpose of Disbursement
CREDIT CARD DISCOUNT FEE

| |
|-------------------|
| 001 |
| Category/ Type |

Candidate Name

THE CONSERVATIVE STRIKEFORCE

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

B. FIRST MERIT BANK

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 07 | | 17 | | 2014 |

Mailing Address 295 FIRSTMERIT CIRCLE

Transaction ID : SB21B.83328

City AKRON State OH Zip Code 44307

Amount of Each Disbursement this Period

| |
|------|
| 2.18 |
|------|

Purpose of Disbursement
CREDIT CARD DISCOUNT FEE

| |
|-------------------|
| 001 |
| Category/ Type |

Candidate Name

THE CONSERVATIVE STRIKEFORCE

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

C. FIRST MERIT BANK

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 07 | | 18 | | 2014 |

Mailing Address 295 FIRSTMERIT CIRCLE

Transaction ID : SB21B.83329

City AKRON State OH Zip Code 44307

Amount of Each Disbursement this Period

| |
|------|
| 1.60 |
|------|

Purpose of Disbursement
CREDIT CARD DISCOUNT FEE

| |
|-------------------|
| 001 |
| Category/ Type |

Candidate Name

THE CONSERVATIVE STRIKEFORCE

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

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

| |
|------|
| 6.68 |
|------|

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

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**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)
THE CONSERVATIVE STRIKEFORCE

Full Name (Last, First, Middle Initial)

A. FIRST MERIT BANK

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 07 | | 21 | | 2014 |

Mailing Address 295 FIRSTMERIT CIRCLE

Transaction ID : SB21B.83330

City AKRON State OH Zip Code 44307

Amount of Each Disbursement this Period

| |
|------|
| 8.69 |
|------|

Purpose of Disbursement
CREDIT CARD DISCOUNT FEE

| |
|-------------------|
| 001 |
| Category/ Type |

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: | |

Full Name (Last, First, Middle Initial)

B. FIRST MERIT BANK

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 07 | | 21 | | 2014 |

Mailing Address 295 FIRSTMERIT CIRCLE

Transaction ID : SB21B.83331

City AKRON State OH Zip Code 44307

Amount of Each Disbursement this Period

| |
|------|
| 5.22 |
|------|

Purpose of Disbursement
CREDIT CARD DISCOUNT FEE

| |
|-------------------|
| 001 |
| Category/ Type |

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: | |

Full Name (Last, First, Middle Initial)

C. FIRST MERIT BANK

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 07 | | 21 | | 2014 |

Mailing Address 295 FIRSTMERIT CIRCLE

Transaction ID : SB21B.83332

City AKRON State OH Zip Code 44307

Amount of Each Disbursement this Period

| |
|------|
| 2.03 |
|------|

Purpose of Disbursement
CREDIT CARD DISCOUNT FEE

| |
|-------------------|
| 001 |
| Category/ Type |

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: | |

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

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

| |
|-------|
| 15.94 |
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**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)
THE CONSERVATIVE STRIKEFORCE

Full Name (Last, First, Middle Initial)

A. FIRST MERIT BANK

Mailing Address 295 FIRSTMERIT CIRCLE

City AKRON State OH Zip Code 44307

Purpose of Disbursement
CREDIT CARD DISCOUNT FEE

001

Candidate Name
THE CONSERVATIVE STRIKEFORCE

Category/
Type

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
07 / 24 / 2014

Transaction ID : SB21B.83333

Amount of Each Disbursement this Period

3.19

Full Name (Last, First, Middle Initial)

B. FIRST MERIT BANK

Mailing Address 295 FIRSTMERIT CIRCLE

City AKRON State OH Zip Code 44307

Purpose of Disbursement
CREDIT CARD DISCOUNT FEE

001

Candidate Name
THE CONSERVATIVE STRIKEFORCE

Category/
Type

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
07 / 25 / 2014

Transaction ID : SB21B.83334

Amount of Each Disbursement this Period

1.02

Full Name (Last, First, Middle Initial)

C. FIRST MERIT BANK

Mailing Address 295 FIRSTMERIT CIRCLE

City AKRON State OH Zip Code 44307

Purpose of Disbursement
CREDIT CARD DISCOUNT FEE

001

Candidate Name
THE CONSERVATIVE STRIKEFORCE

Category/
Type

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
07 / 28 / 2014

Transaction ID : SB21B.83335

Amount of Each Disbursement this Period

7.67

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

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

11.88

**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)
THE CONSERVATIVE STRIKEFORCE

Full Name (Last, First, Middle Initial)

A. FIRST MERIT BANK

Date of Disbursement

Mailing Address 295 FIRSTMERIT CIRCLE

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 07 | | 28 | | 2014 |

City AKRON State OH Zip Code 44307

Transaction ID : SB21B.83336

Purpose of Disbursement
CREDIT CARD DISCOUNT FEE

| |
|-------------------|
| 001 |
| Category/ Type |

Amount of Each Disbursement this Period

| |
|------|
| 7.10 |
|------|

Candidate Name

THE CONSERVATIVE STRIKEFORCE

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

B. FIRST MERIT BANK

Date of Disbursement

Mailing Address 295 FIRSTMERIT CIRCLE

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 07 | | 28 | | 2014 |

City AKRON State OH Zip Code 44307

Transaction ID : SB21B.83337

Purpose of Disbursement
CREDIT CARD DISCOUNT FEE

| |
|-------------------|
| 001 |
| Category/ Type |

Amount of Each Disbursement this Period

| |
|------|
| 0.87 |
|------|

Candidate Name

THE CONSERVATIVE STRIKEFORCE

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

C. FIRST MERIT BANK

Date of Disbursement

Mailing Address 295 FIRSTMERIT CIRCLE

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 07 | | 31 | | 2014 |

City AKRON State OH Zip Code 44307

Transaction ID : SB21B.83338

Purpose of Disbursement
CREDIT CARD DISCOUNT FEE

| |
|-------------------|
| 001 |
| Category/ Type |

Amount of Each Disbursement this Period

| |
|------|
| 0.73 |
|------|

Candidate Name

THE CONSERVATIVE STRIKEFORCE

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

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

| |
|------|
| 8.70 |
|------|

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

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**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)
THE CONSERVATIVE STRIKEFORCE

Full Name (Last, First, Middle Initial)

A. FIRST MERIT BANK

Mailing Address 295 FIRSTMERIT CIRCLE

City AKRON State OH Zip Code 44307

Purpose of Disbursement
SERVICE CHARGE

001

Candidate Name

THE CONSERVATIVE STRIKEFORCE

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 04 / 2014

Transaction ID : SB21B.83324

Amount of Each Disbursement this Period

171.26

Full Name (Last, First, Middle Initial)

B. FIRST MERIT BANK

Mailing Address 295 FIRSTMERIT CIRCLE

City AKRON State OH Zip Code 44307

Purpose of Disbursement
CREDIT CARD DISCOUNT FEE

001

Candidate Name

THE CONSERVATIVE STRIKEFORCE

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 04 / 2014

Transaction ID : SB21B.83339

Amount of Each Disbursement this Period

13.25

Full Name (Last, First, Middle Initial)

C. FIRST MERIT BANK

Mailing Address 295 FIRSTMERIT CIRCLE

City AKRON State OH Zip Code 44307

Purpose of Disbursement
CREDIT CARD DISCOUNT FEE

001

Candidate Name

THE CONSERVATIVE STRIKEFORCE

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 04 / 2014

Transaction ID : SB21B.83340

Amount of Each Disbursement this Period

0.73

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

185.24

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

**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)
THE CONSERVATIVE STRIKEFORCE

Full Name (Last, First, Middle Initial)

A. FIRST MERIT BANK

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 08 | | 04 | | 2014 |

Mailing Address 295 FIRSTMERIT CIRCLE

Transaction ID : SB21B.83341

City AKRON State OH Zip Code 44307

Amount of Each Disbursement this Period

| |
|------|
| 0.73 |
|------|

Purpose of Disbursement
CREDIT CARD DISCOUNT FEE

| |
|-------------------|
| 001 |
| Category/ Type |

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: | |

Full Name (Last, First, Middle Initial)

B. FIRST MERIT BANK

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 08 | | 07 | | 2014 |

Mailing Address 295 FIRSTMERIT CIRCLE

Transaction ID : SB21B.83342

City AKRON State OH Zip Code 44307

Amount of Each Disbursement this Period

| |
|------|
| 1.83 |
|------|

Purpose of Disbursement
CREDIT CARD DISCOUNT FEE

| |
|-------------------|
| 001 |
| Category/ Type |

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: | |

Full Name (Last, First, Middle Initial)

C. FIRST MERIT BANK

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 08 | | 14 | | 2014 |

Mailing Address 295 FIRSTMERIT CIRCLE

Transaction ID : SB21B.83343

City AKRON State OH Zip Code 44307

Amount of Each Disbursement this Period

| |
|------|
| 0.87 |
|------|

Purpose of Disbursement
CREDIT CARD DISCOUNT FEE

| |
|-------------------|
| 001 |
| Category/ Type |

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: | |

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

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

| |
|------|
| 3.43 |
|------|

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**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)
THE CONSERVATIVE STRIKEFORCE

Full Name (Last, First, Middle Initial)

A. FIRST MERIT BANK

Mailing Address 295 FIRSTMERIT CIRCLE

City AKRON State OH Zip Code 44307

Purpose of Disbursement
SERVICE CHARGE

001

Candidate Name

THE CONSERVATIVE STRIKEFORCE

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 04 / 2014

Transaction ID : SB21B.83325

Amount of Each Disbursement this Period

215.87

Full Name (Last, First, Middle Initial)

B. FIRST MERIT BANK

Mailing Address 295 FIRSTMERIT CIRCLE

City AKRON State OH Zip Code 44307

Purpose of Disbursement
CREDIT CARD DISCOUNT FEE

001

Candidate Name

THE CONSERVATIVE STRIKEFORCE

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 04 / 2014

Transaction ID : SB21B.83344

Amount of Each Disbursement this Period

1.26

Full Name (Last, First, Middle Initial)

C. FIRST MERIT BANK

Mailing Address 295 FIRSTMERIT CIRCLE

City AKRON State OH Zip Code 44307

Purpose of Disbursement
CREDIT CARD DISCOUNT FEE

001

Candidate Name

THE CONSERVATIVE STRIKEFORCE

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 04 / 2014

Transaction ID : SB21B.83345

Amount of Each Disbursement this Period

0.10

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

217.23

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

**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)
THE CONSERVATIVE STRIKEFORCE

Full Name (Last, First, Middle Initial)

A. FIRST VIRGINIA COMMUNITY BANK

Mailing Address 11325 RANDOM HILLS RD

City State Zip Code
FAIRFAX VA 22030

Purpose of Disbursement
SERVICE CHARGE

001

Candidate Name
THE CONSERVATIVE STRIKEFORCE

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 |
| 07 | | 01 | | 2014 |

Transaction ID : **SB21B.83162**

Amount of Each Disbursement this Period

| |
|-------|
| 16.48 |
|-------|

Full Name (Last, First, Middle Initial)

B. FIRST VIRGINIA COMMUNITY BANK

Mailing Address 11325 RANDOM HILLS RD

City State Zip Code
FAIRFAX VA 22030

Purpose of Disbursement
SERVICE CHARGE

001

Candidate Name
THE CONSERVATIVE STRIKEFORCE

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 |
| 07 | | 01 | | 2014 |

Transaction ID : **SB21B.83238**

Amount of Each Disbursement this Period

| |
|-------|
| 52.13 |
|-------|

Full Name (Last, First, Middle Initial)

C. FIRST VIRGINIA COMMUNITY BANK

Mailing Address 11325 RANDOM HILLS RD

City State Zip Code
FAIRFAX VA 22030

Purpose of Disbursement
GLOBAL SERVICE CHARGE

001

Candidate Name
THE CONSERVATIVE STRIKEFORCE

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 |
| 07 | | 02 | | 2014 |

Transaction ID : **SB21B.83241**

Amount of Each Disbursement this Period

| |
|-------|
| 50.25 |
|-------|

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

| |
|--------|
| 118.86 |
|--------|

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

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**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)
THE CONSERVATIVE STRIKEFORCE

Full Name (Last, First, Middle Initial)

A. FIRST VIRGINIA COMMUNITY BANK

Mailing Address 11325 RANDOM HILLS RD

City State Zip Code
FAIRFAX VA 22030

Purpose of Disbursement
GLOBAL SERVICE CHARGE

001

Candidate Name
THE CONSERVATIVE STRIKEFORCE

Category/
Type

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
07 / 02 / 2014

Transaction ID : **SB21B.83242**

Amount of Each Disbursement this Period

1051.59

Full Name (Last, First, Middle Initial)

B. FIRST VIRGINIA COMMUNITY BANK

Mailing Address 11325 RANDOM HILLS RD

City State Zip Code
FAIRFAX VA 22030

Purpose of Disbursement
AMEX DISCOUNT FEE

001

Candidate Name
THE CONSERVATIVE STRIKEFORCE

Category/
Type

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
07 / 07 / 2014

Transaction ID : **SB21B.83236**

Amount of Each Disbursement this Period

5.66

Full Name (Last, First, Middle Initial)

C. FIRST VIRGINIA COMMUNITY BANK

Mailing Address 11325 RANDOM HILLS RD

City State Zip Code
FAIRFAX VA 22030

Purpose of Disbursement
CUSTOM CREDIT BILLING

001

Candidate Name
THE CONSERVATIVE STRIKEFORCE

Category/
Type

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
07 / 08 / 2014

Transaction ID : **SB21B.83167**

Amount of Each Disbursement this Period

28.00

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

1085.25

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

**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)
THE CONSERVATIVE STRIKEFORCE

Full Name (Last, First, Middle Initial)

A. FIRST VIRGINIA COMMUNITY BANK

Mailing Address 11325 RANDOM HILLS RD

City State Zip Code
FAIRFAX VA 22030

Purpose of Disbursement
MERCHANT SERVICE CHARGE

001

Candidate Name
THE CONSERVATIVE STRIKEFORCE

Category/
Type

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
07 / 08 / 2014

Transaction ID : **SB21B.83170**

Amount of Each Disbursement this Period

88.75

Full Name (Last, First, Middle Initial)

B. FIRST VIRGINIA COMMUNITY BANK

Mailing Address 11325 RANDOM HILLS RD

City State Zip Code
FAIRFAX VA 22030

Purpose of Disbursement
AMEX DISCOUNT FEE

001

Candidate Name
THE CONSERVATIVE STRIKEFORCE

Category/
Type

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
07 / 09 / 2014

Transaction ID : **SB21B.83237**

Amount of Each Disbursement this Period

3.04

Full Name (Last, First, Middle Initial)

C. FIRST VIRGINIA COMMUNITY BANK

Mailing Address 11325 RANDOM HILLS RD

City State Zip Code
FAIRFAX VA 22030

Purpose of Disbursement
SERVICE CHARGE

001

Candidate Name
THE CONSERVATIVE STRIKEFORCE

Category/
Type

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
07 / 14 / 2014

Transaction ID : **SB21B.83346**

Amount of Each Disbursement this Period

10.00

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

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

101.79

**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)
THE CONSERVATIVE STRIKEFORCE

Full Name (Last, First, Middle Initial)

A. FIRST VIRGINIA COMMUNITY BANK

Mailing Address 11325 RANDOM HILLS RD

City State Zip Code
FAIRFAX VA 22030

Purpose of Disbursement
AMEX DISCOUNT FEE

001

Candidate Name

THE CONSERVATIVE STRIKEFORCE

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
07 / 31 / 2014

Transaction ID : **SB21B.83165**

Amount of Each Disbursement this Period

0.70

Full Name (Last, First, Middle Initial)

B. FIRST VIRGINIA COMMUNITY BANK

Mailing Address 11325 RANDOM HILLS RD

City State Zip Code
FAIRFAX VA 22030

Purpose of Disbursement
SERVICE CHARGE

001

Candidate Name

THE CONSERVATIVE STRIKEFORCE

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 01 / 2014

Transaction ID : **SB21B.83163**

Amount of Each Disbursement this Period

12.09

Full Name (Last, First, Middle Initial)

C. FIRST VIRGINIA COMMUNITY BANK

Mailing Address 11325 RANDOM HILLS RD

City State Zip Code
FAIRFAX VA 22030

Purpose of Disbursement
SERVICE CHARGE

001

Candidate Name

THE CONSERVATIVE STRIKEFORCE

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 01 / 2014

Transaction ID : **SB21B.83239**

Amount of Each Disbursement this Period

137.48

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

150.27

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

**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)

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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. FIRST VIRGINIA COMMUNITY BANK

Mailing Address 11325 RANDOM HILLS RD

City State Zip Code
FAIRFAX VA 22030

Purpose of Disbursement
SERVICE CHARGE

001

Candidate Name

THE CONSERVATIVE STRIKEFORCE

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 01 / 2014

Transaction ID : **SB21B.83347**

Amount of Each Disbursement this Period

72.56

Full Name (Last, First, Middle Initial)

B. FIRST VIRGINIA COMMUNITY BANK

Mailing Address 11325 RANDOM HILLS RD

City State Zip Code
FAIRFAX VA 22030

Purpose of Disbursement
GLOBAL SERVICE CHARGE

001

Candidate Name

THE CONSERVATIVE STRIKEFORCE

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 04 / 2014

Transaction ID : **SB21B.83243**

Amount of Each Disbursement this Period

67.50

Full Name (Last, First, Middle Initial)

C. FIRST VIRGINIA COMMUNITY BANK

Mailing Address 11325 RANDOM HILLS RD

City State Zip Code
FAIRFAX VA 22030

Purpose of Disbursement
GLOBAL SERVICE CHARGE

001

Candidate Name

THE CONSERVATIVE STRIKEFORCE

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 04 / 2014

Transaction ID : **SB21B.83244**

Amount of Each Disbursement this Period

1113.99

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

1254.05

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

**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)
THE CONSERVATIVE STRIKEFORCE

Full Name (Last, First, Middle Initial)

A. FIRST VIRGINIA COMMUNITY BANK

Mailing Address 11325 RANDOM HILLS RD

City State Zip Code
FAIRFAX VA 22030

Purpose of Disbursement
GLOBAL SERVICE CHARGE

001

Candidate Name

THE CONSERVATIVE STRIKEFORCE

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 04 / 2014

Transaction ID : **SB21B.83385**

Amount of Each Disbursement this Period

141.38

Full Name (Last, First, Middle Initial)

B. FIRST VIRGINIA COMMUNITY BANK

Mailing Address 11325 RANDOM HILLS RD

City State Zip Code
FAIRFAX VA 22030

Purpose of Disbursement
CUSTOM CREDIT BILLING

001

Candidate Name

THE CONSERVATIVE STRIKEFORCE

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 06 / 2014

Transaction ID : **SB21B.83168**

Amount of Each Disbursement this Period

26.75

Full Name (Last, First, Middle Initial)

C. FIRST VIRGINIA COMMUNITY BANK

Mailing Address 11325 RANDOM HILLS RD

City State Zip Code
FAIRFAX VA 22030

Purpose of Disbursement
MERCHANT SERVICE CHARGE

001

Candidate Name

THE CONSERVATIVE STRIKEFORCE

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 06 / 2014

Transaction ID : **SB21B.83171**

Amount of Each Disbursement this Period

70.70

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

238.83

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

**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)
THE CONSERVATIVE STRIKEFORCE

Full Name (Last, First, Middle Initial)

A. FIRST VIRGINIA COMMUNITY BANK

Mailing Address 11325 RANDOM HILLS RD

City State Zip Code
FAIRFAX VA 22030

Purpose of Disbursement
CHECK ORDER CHARGE

001

Candidate Name
THE CONSERVATIVE STRIKEFORCE

Category/
Type

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
08 / 08 / 2014

Transaction ID : **SB21B.83349**

Amount of Each Disbursement this Period

33.05

Full Name (Last, First, Middle Initial)

B. FIRST VIRGINIA COMMUNITY BANK

Mailing Address 11325 RANDOM HILLS RD

City State Zip Code
FAIRFAX VA 22030

Purpose of Disbursement
MERCHANT SETTLEMENT CHARGE

001

Candidate Name
THE CONSERVATIVE STRIKEFORCE

Category/
Type

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
08 / 15 / 2014

Transaction ID : **SB21B.83173**

Amount of Each Disbursement this Period

159.00

Full Name (Last, First, Middle Initial)

C. FIRST VIRGINIA COMMUNITY BANK

Mailing Address 11325 RANDOM HILLS RD

City State Zip Code
FAIRFAX VA 22030

Purpose of Disbursement
AMEX COLLECTION FEE

001

Candidate Name
THE CONSERVATIVE STRIKEFORCE

Category/
Type

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
08 / 27 / 2014

Transaction ID : **SB21B.83166**

Amount of Each Disbursement this Period

7.95

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

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

200.00

**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)
THE CONSERVATIVE STRIKEFORCE

Full Name (Last, First, Middle Initial)

A. FIRST VIRGINIA COMMUNITY BANK

Mailing Address 11325 RANDOM HILLS RD

City State Zip Code
FAIRFAX VA 22030

Purpose of Disbursement
SERVICE CHARGE

001

Candidate Name

THE CONSERVATIVE STRIKEFORCE

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 01 / 2014

Transaction ID : **SB21B.83348**

Amount of Each Disbursement this Period

45.40

Full Name (Last, First, Middle Initial)

B. FIRST VIRGINIA COMMUNITY BANK

Mailing Address 11325 RANDOM HILLS RD

City State Zip Code
FAIRFAX VA 22030

Purpose of Disbursement
SERVICE CHARGE

001

Candidate Name

THE CONSERVATIVE STRIKEFORCE

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 02 / 2014

Transaction ID : **SB21B.83164**

Amount of Each Disbursement this Period

12.46

Full Name (Last, First, Middle Initial)

C. FIRST VIRGINIA COMMUNITY BANK

Mailing Address 11325 RANDOM HILLS RD

City State Zip Code
FAIRFAX VA 22030

Purpose of Disbursement
SERVICE CHARGE

001

Candidate Name

THE CONSERVATIVE STRIKEFORCE

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 02 / 2014

Transaction ID : **SB21B.83240**

Amount of Each Disbursement this Period

36.91

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

94.77

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

**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)
THE CONSERVATIVE STRIKEFORCE

Full Name (Last, First, Middle Initial)

A. FIRST VIRGINIA COMMUNITY BANK

Mailing Address 11325 RANDOM HILLS RD

City State Zip Code
FAIRFAX VA 22030

Purpose of Disbursement
GLOBAL SERVICE CHARGE

001

Candidate Name

THE CONSERVATIVE STRIKEFORCE

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 03 / 2014

Transaction ID : **SB21B.83245**

Amount of Each Disbursement this Period

53.32

Full Name (Last, First, Middle Initial)

B. FIRST VIRGINIA COMMUNITY BANK

Mailing Address 11325 RANDOM HILLS RD

City State Zip Code
FAIRFAX VA 22030

Purpose of Disbursement
GLOBAL SERVICE CHARGE

001

Candidate Name

THE CONSERVATIVE STRIKEFORCE

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 03 / 2014

Transaction ID : **SB21B.83246**

Amount of Each Disbursement this Period

197.29

Full Name (Last, First, Middle Initial)

C. FIRST VIRGINIA COMMUNITY BANK

Mailing Address 11325 RANDOM HILLS RD

City State Zip Code
FAIRFAX VA 22030

Purpose of Disbursement
GLOBAL SERVICE CHARGE

001

Candidate Name

THE CONSERVATIVE STRIKEFORCE

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 03 / 2014

Transaction ID : **SB21B.83350**

Amount of Each Disbursement this Period

261.95

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

512.56

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

**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)

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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. FIRST VIRGINIA COMMUNITY BANK

Mailing Address 11325 RANDOM HILLS RD

City State Zip Code
FAIRFAX VA 22030

Purpose of Disbursement
CUSTOM CREDIT BILLING

001

Candidate Name

THE CONSERVATIVE STRIKEFORCE

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 05 / 2014

Transaction ID : **SB21B.83169**

Amount of Each Disbursement this Period

26.25

Full Name (Last, First, Middle Initial)

B. FIRST VIRGINIA COMMUNITY BANK

Mailing Address 11325 RANDOM HILLS RD

City State Zip Code
FAIRFAX VA 22030

Purpose of Disbursement
MERCHANT SERVICE CHARGE

001

Candidate Name

THE CONSERVATIVE STRIKEFORCE

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 08 / 2014

Transaction ID : **SB21B.83172**

Amount of Each Disbursement this Period

68.69

Full Name (Last, First, Middle Initial)

C. INTEGRAM

Mailing Address 8421 HILLTOP ROAD

City State Zip Code
FAIRFAX VA 22031

Purpose of Disbursement
PAC DIRECT MAIL - PRINTING & MAILSHOP

003

Candidate Name

THE CONSERVATIVE STRIKEFORCE

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 08 / 2014

Transaction ID : **SB21B.83373**

Amount of Each Disbursement this Period

2932.25

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

3027.19

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

**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)

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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. INTEGRAM

Mailing Address 8421 HILLTOP ROAD

City State Zip Code
FAIRFAX VA 22031

Purpose of Disbursement
PAC DIRECT MAIL - PRINTING & MAILSHOP

003

Candidate Name
THE CONSERVATIVE STRIKEFORCE

Category/
Type

Office Sought: House Senate President
Disbursement For: Primary General
 Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
08 / 27 / 2014

Transaction ID : SB21B.83374

Amount of Each Disbursement this Period

3308.68

Full Name (Last, First, Middle Initial)

B. INTEGRAM

Mailing Address 8421 HILLTOP ROAD

City State Zip Code
FAIRFAX VA 22031

Purpose of Disbursement
PAC DIRECT MAIL - POSTAGE

003

Candidate Name
THE CONSERVATIVE STRIKEFORCE

Category/
Type

Office Sought: House Senate President
Disbursement For: Primary General
 Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
09 / 04 / 2014

Transaction ID : SB21B.83375

Amount of Each Disbursement this Period

14105.75

Full Name (Last, First, Middle Initial)

C. INTEGRAM

Mailing Address 8421 HILLTOP ROAD

City State Zip Code
FAIRFAX VA 22031

Purpose of Disbursement
PAC DIRECT MAIL - PRINTING & MAILSHOP

003

Candidate Name
THE CONSERVATIVE STRIKEFORCE

Category/
Type

Office Sought: House Senate President
Disbursement For: Primary General
 Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
09 / 16 / 2014

Transaction ID : SB21B.83376

Amount of Each Disbursement this Period

4554.80

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

21969.23

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

**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)

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| <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. INTEGRAM

Mailing Address 8421 HILLTOP ROAD

City State Zip Code
FAIRFAX VA 22031

Purpose of Disbursement
PAC DIRECT MAIL - PRINTING & MAILSHOP

003

Candidate Name
THE CONSERVATIVE STRIKEFORCE

Category/
Type

Office Sought: House Senate President
Disbursement For: Primary General
 Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
09 / 30 / 2014

Transaction ID : SB21B.83377

Amount of Each Disbursement this Period

4962.23

Full Name (Last, First, Middle Initial)

B. MACKENZIE & COMPANY

Mailing Address 2776 S ARLINGTON MILL DR #806

City State Zip Code
ARLINGTON VA 22206

Purpose of Disbursement
CONSULTING - COMPLIANCE

001

Candidate Name
THE CONSERVATIVE STRIKEFORCE

Category/
Type

Office Sought: House Senate President
Disbursement For: Primary General
 Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
08 / 01 / 2014

Transaction ID : SB21B.83201

Amount of Each Disbursement this Period

3500.00

Full Name (Last, First, Middle Initial)

C. MACKENZIE & COMPANY

Mailing Address 2776 S ARLINGTON MILL DR #806

City State Zip Code
ARLINGTON VA 22206

Purpose of Disbursement
CONSULTING - COMPLIANCE

001

Candidate Name
THE CONSERVATIVE STRIKEFORCE

Category/
Type

Office Sought: House Senate President
Disbursement For: Primary General
 Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
09 / 25 / 2014

Transaction ID : SB21B.83202

Amount of Each Disbursement this Period

1500.00

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

9962.23

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

**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)

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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. MACKENZIE & COMPANY

Mailing Address 2776 S ARLINGTON MILL DR #806

City ARLINGTON State VA Zip Code 22206

Purpose of Disbursement
CONSULTING - COMPLIANCE

001

Candidate Name

THE CONSERVATIVE STRIKEFORCE

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 | | 2 | 6 | | 2 | 0 | 1 | 4 |

Transaction ID : **SB21B.83203**

Amount of Each Disbursement this Period

| | | | | | | |
|---|---|---|---|---|---|---|
| 2 | 0 | 0 | 0 | . | 0 | 0 |
|---|---|---|---|---|---|---|

Full Name (Last, First, Middle Initial)

B. MDI IMAGING & MAIL

Mailing Address 21721-A FILIGREE CT

City ASHBURN State VA Zip Code 20147

Purpose of Disbursement
PAC DIRECT MAIL - POSTAGE

003

Candidate Name

THE CONSERVATIVE STRIKEFORCE

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 8 | | 0 | 4 | | 2 | 0 | 1 | 4 |

Transaction ID : **SB21B.83200**

Amount of Each Disbursement this Period

| | | | | | | |
|---|---|---|---|---|---|---|
| 3 | 0 | 0 | 8 | . | 4 | 6 |
|---|---|---|---|---|---|---|

Full Name (Last, First, Middle Initial)

C. MDI IMAGING & MAIL

Mailing Address 21721-A FILIGREE CT

City ASHBURN State VA Zip Code 20147

Purpose of Disbursement
PAC DIRECT MAIL - POSTAGE

003

Candidate Name

THE CONSERVATIVE STRIKEFORCE

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 8 | | 2 | 7 | | 2 | 0 | 1 | 4 |

Transaction ID : **SB21B.83351**

Amount of Each Disbursement this Period

| | | | | | | |
|---|---|---|---|---|---|---|
| 2 | 8 | 1 | 6 | . | 3 | 8 |
|---|---|---|---|---|---|---|

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

| | | | | | | |
|---|---|---|---|---|---|---|
| 7 | 8 | 2 | 4 | . | 8 | 4 |
|---|---|---|---|---|---|---|

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

| | | | | | | |
|---|---|---|---|---|---|---|
| 7 | 8 | 2 | 4 | . | 8 | 4 |
|---|---|---|---|---|---|---|

**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)
THE CONSERVATIVE STRIKEFORCE

Full Name (Last, First, Middle Initial)

A. MDI IMAGING & MAIL

Mailing Address 21721-A FILIGREE CT

City ASHBURN State VA Zip Code 20147

Purpose of Disbursement
PAC DIRECT MAIL - PRINTING & MAILSHOP

003

Candidate Name
THE CONSERVATIVE STRIKEFORCE

Category/
Type

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
08 / 27 / 2014

Transaction ID : **SB21B.83352**

Amount of Each Disbursement this Period

3580.28

Full Name (Last, First, Middle Initial)

B. MDI IMAGING & MAIL

Mailing Address 21721-A FILIGREE CT

City ASHBURN State VA Zip Code 20147

Purpose of Disbursement
PAC DIRECT MAIL - PRINTING & MAILSHOP

003

Candidate Name
THE CONSERVATIVE STRIKEFORCE

Category/
Type

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
09 / 25 / 2014

Transaction ID : **SB21B.83353**

Amount of Each Disbursement this Period

4514.77

Full Name (Last, First, Middle Initial)

C. PATRIOT DATA SERVICES

Mailing Address 11951 FREEDOM DR

City RESTON State VA Zip Code 20190

Purpose of Disbursement
DATA PROCESSING

001

Candidate Name
THE CONSERVATIVE STRIKEFORCE

Category/
Type

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
08 / 08 / 2014

Transaction ID : **SB21B.83360**

Amount of Each Disbursement this Period

228.65

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

8323.70

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

**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)

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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. PATRIOT DATA SERVICES

Mailing Address 11951 FREEDOM DR

City RESTON State VA Zip Code 20190

Purpose of Disbursement
DATA PROCESSING

001

Candidate Name

THE CONSERVATIVE STRIKEFORCE

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 27 / 2014

Transaction ID : **SB21B.83361**

Amount of Each Disbursement this Period

460.94

Full Name (Last, First, Middle Initial)

B. PATRIOT DATA SERVICES

Mailing Address 11951 FREEDOM DR

City RESTON State VA Zip Code 20190

Purpose of Disbursement
DATA PROCESSING

001

Candidate Name

THE CONSERVATIVE STRIKEFORCE

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 16 / 2014

Transaction ID : **SB21B.83362**

Amount of Each Disbursement this Period

257.55

Full Name (Last, First, Middle Initial)

C. PATRIOT DATA SERVICES

Mailing Address 11951 FREEDOM DR

City RESTON State VA Zip Code 20190

Purpose of Disbursement
DATA PROCESSING

001

Candidate Name

THE CONSERVATIVE STRIKEFORCE

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 25 / 2014

Transaction ID : **SB21B.83363**

Amount of Each Disbursement this Period

256.02

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

974.51

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

**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)

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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. RHA MARKETING LLC

Mailing Address 1124 RUTLANDVIEW DR

City State Zip Code
DAVIDSONVILLE MD 21035

Purpose of Disbursement
PAC DIRECT MAIL - PRINTING & MAILSHOP

003

Candidate Name
THE CONSERVATIVE STRIKEFORCE

Category/
Type

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
09 / 16 / 2014

Transaction ID : **SB21B.83380**

Amount of Each Disbursement this Period

4084.15

Full Name (Last, First, Middle Initial)

B. RICHARD NORMAN COMPANY

Mailing Address 44084 RIVERSIDE PKWY

City State Zip Code
LEESBURG VA 20176

Purpose of Disbursement
PAC DIRECT MAIL - CREATIVE

003

Candidate Name
THE CONSERVATIVE STRIKEFORCE

Category/
Type

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
08 / 08 / 2014

Transaction ID : **SB21B.83381**

Amount of Each Disbursement this Period

3500.00

Full Name (Last, First, Middle Initial)

C. RICHARD NORMAN COMPANY

Mailing Address 44084 RIVERSIDE PKWY

City State Zip Code
LEESBURG VA 20176

Purpose of Disbursement
PAC DIRECT MAIL - CREATIVE

003

Candidate Name
THE CONSERVATIVE STRIKEFORCE

Category/
Type

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
08 / 27 / 2014

Transaction ID : **SB21B.83382**

Amount of Each Disbursement this Period

3500.00

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

11084.15

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

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

Use separate schedule(s)
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Detailed Summary Page

FOR 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. RICHARD NORMAN COMPANY

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 09 | | 16 | | 2014 |

Mailing Address 44084 RIVERSIDE PKWY

Transaction ID : SB21B.83383

City LEESBURG State VA Zip Code 20176

Amount of Each Disbursement this Period

| |
|---------|
| 3500.00 |
|---------|

Purpose of Disbursement
PAC DIRECT MAIL - CREATIVE

| |
|-------------------|
| 003 |
| Category/ Type |

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: | |

Full Name (Last, First, Middle Initial)

B. RICHARD NORMAN COMPANY

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 09 | | 25 | | 2014 |

Mailing Address 44084 RIVERSIDE PKWY

Transaction ID : SB21B.83384

City LEESBURG State VA Zip Code 20176

Amount of Each Disbursement this Period

| |
|---------|
| 3500.00 |
|---------|

Purpose of Disbursement
PAC DIRECT MAIL - CREATIVE

| |
|-------------------|
| 003 |
| Category/ Type |

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: | |

Full Name (Last, First, Middle Initial)

C. SIMPKINS ESCROW

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 08 | | 28 | | 2014 |

Mailing Address 29243 ST JUST DR

Transaction ID : SB21B.83175

City UNIONVILLE State VA Zip Code 22567

Amount of Each Disbursement this Period

| |
|--------|
| 191.40 |
|--------|

Purpose of Disbursement
ESCROW SERVICES

| |
|-------------------|
| 001 |
| Category/ Type |

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: | |

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

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

| |
|---------|
| 7191.40 |
|---------|

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**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)
THE CONSERVATIVE STRIKEFORCE

Full Name (Last, First, Middle Initial)

A. SOUTHWEST PUBLISHING & MAILING

Mailing Address 2600 NW TOPEKA BLVD

City TOPEKA State KS Zip Code 66617

Purpose of Disbursement
PAC DIRECT MAIL - PRINTING & MAILSHOP

003

Candidate Name
THE CONSERVATIVE STRIKEFORCE

Category/
Type

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
08 / 27 / 2014

Transaction ID : **SB21B.83364**

Amount of Each Disbursement this Period

5793.27

Full Name (Last, First, Middle Initial)

B. STRATEGIC CAMPAIGN GROUP INC

Mailing Address 4600 N FAIRFAX DRIVE
SUITE 802

City ARLINGTON State VA Zip Code 22203

Purpose of Disbursement
CONSULTING - MANAGEMENT

001

Candidate Name
THE CONSERVATIVE STRIKEFORCE

Category/
Type

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
07 / 01 / 2014

Transaction ID : **SB21B.83204**

Amount of Each Disbursement this Period

4000.00

Full Name (Last, First, Middle Initial)

C. STRATEGIC CAMPAIGN GROUP INC

Mailing Address 4600 N FAIRFAX DRIVE
SUITE 802

City ARLINGTON State VA Zip Code 22203

Purpose of Disbursement
CONSULTING - MANAGEMENT

001

Candidate Name
THE CONSERVATIVE STRIKEFORCE

Category/
Type

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
08 / 01 / 2014

Transaction ID : **SB21B.83205**

Amount of Each Disbursement this Period

4000.00

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

13793.27

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

**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)
THE CONSERVATIVE STRIKEFORCE

Full Name (Last, First, Middle Initial)

A. TARGET OUTREACH INC

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 07 | | 07 | | 2014 |

Mailing Address 700 W VIRGINIA ST
SUITE 700

Transaction ID : SB21B.83193

City MILWAUKEE State WI Zip Code 53204

Amount of Each Disbursement this Period

| |
|---------|
| 4240.00 |
|---------|

Purpose of Disbursement
PAC TELEMARKETING SERVICES

| |
|-------------------|
| 003 |
| Category/ Type |

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: | |

Full Name (Last, First, Middle Initial)

B. TARGET OUTREACH INC

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 07 | | 19 | | 2014 |

Mailing Address 700 W VIRGINIA ST
SUITE 700

Transaction ID : SB21B.83194

City MILWAUKEE State WI Zip Code 53204

Amount of Each Disbursement this Period

| |
|---------|
| 2285.00 |
|---------|

Purpose of Disbursement
PAC TELEMARKETING SERVICES

| |
|-------------------|
| 003 |
| Category/ Type |

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: | |

Full Name (Last, First, Middle Initial)

C. TARGET OUTREACH INC

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 08 | | 19 | | 2014 |

Mailing Address 700 W VIRGINIA ST
SUITE 700

Transaction ID : SB21B.83195

City MILWAUKEE State WI Zip Code 53204

Amount of Each Disbursement this Period

| |
|---------|
| 3680.00 |
|---------|

Purpose of Disbursement
PAC TELEMARKETING SERVICES

| |
|-------------------|
| 003 |
| Category/ Type |

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: | |

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

| |
|----------|
| 10205.00 |
|----------|

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

| |
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**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)
THE CONSERVATIVE STRIKEFORCE

Full Name (Last, First, Middle Initial)

A. TARGET OUTREACH INC

Mailing Address 700 W VIRGINIA ST
SUITE 700

City MILWAUKEE State WI Zip Code 53204

Purpose of Disbursement
PAC TELEMARKETING SERVICES

003

Candidate Name
THE CONSERVATIVE STRIKEFORCE

Category/
Type

Office Sought: House Senate President
Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 31 / 2014

Transaction ID : **SB21B.83196**

Amount of Each Disbursement this Period

6375.00

Full Name (Last, First, Middle Initial)

B. TARGET OUTREACH INC

Mailing Address 700 W VIRGINIA ST
SUITE 700

City MILWAUKEE State WI Zip Code 53204

Purpose of Disbursement
PAC TELEMARKETING SERVICES

003

Candidate Name
THE CONSERVATIVE STRIKEFORCE

Category/
Type

Office Sought: House Senate President
Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 11 / 2014

Transaction ID : **SB21B.83197**

Amount of Each Disbursement this Period

7599.40

Full Name (Last, First, Middle Initial)

C. TARGET OUTREACH INC

Mailing Address 700 W VIRGINIA ST
SUITE 700

City MILWAUKEE State WI Zip Code 53204

Purpose of Disbursement
PAC TELEMARKETING SERVICES

003

Candidate Name
THE CONSERVATIVE STRIKEFORCE

Category/
Type

Office Sought: House Senate President
Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 23 / 2014

Transaction ID : **SB21B.83198**

Amount of Each Disbursement this Period

2990.00

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

16964.40

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

**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)
THE CONSERVATIVE STRIKEFORCE

Full Name (Last, First, Middle Initial)

A. US POSTMASTER

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 07 | | 31 | | 2014 |

Mailing Address MAIN POST OFFICE

Transaction ID : SB21B.83247

City WASHINGTON State DC Zip Code 20001

Amount of Each Disbursement this Period

| |
|--------|
| 620.00 |
|--------|

Purpose of Disbursement
PO BOX RENEWAL

| |
|-------------------|
| 001 |
| Category/ Type |

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: | |

Full Name (Last, First, Middle Initial)

B. WASHINGTON INTELLIGENCE BUREAU

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 08 | | 27 | | 2014 |

Mailing Address 4128 PEPSI PLACE

Transaction ID : SB21B.83365

City CHANTILLY State VA Zip Code 20151

Amount of Each Disbursement this Period

| |
|---------|
| 1396.77 |
|---------|

Purpose of Disbursement
CAGING & ESCROW SERVICES

| |
|-------------------|
| 001 |
| Category/ Type |

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: | |

Full Name (Last, First, Middle Initial)

C. WASHINGTON INTELLIGENCE BUREAU

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 09 | | 16 | | 2014 |

Mailing Address 4128 PEPSI PLACE

Transaction ID : SB21B.83366

City CHANTILLY State VA Zip Code 20151

Amount of Each Disbursement this Period

| |
|---------|
| 1148.66 |
|---------|

Purpose of Disbursement
CAGING & ESCROW SERVICES

| |
|-------------------|
| 001 |
| Category/ Type |

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: | |

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

| |
|---------|
| 3165.43 |
|---------|

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

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| |
|--|

**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)
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 BILLING

001

Candidate Name
THE CONSERVATIVE STRIKEFORCE

Category/
Type

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
07 / 02 / 2014

Transaction ID : SB21B.83206

Amount of Each Disbursement this Period

30.00

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
MONERIS DISCOUNT FEE

001

Candidate Name
THE CONSERVATIVE STRIKEFORCE

Category/
Type

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
07 / 03 / 2014

Transaction ID : SB21B.83209

Amount of Each Disbursement this Period

223.58

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
MTOT DISCOUNT FEE

001

Candidate Name
THE CONSERVATIVE STRIKEFORCE

Category/
Type

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
07 / 03 / 2014

Transaction ID : SB21B.83214

Amount of Each Disbursement this Period

12.95

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

266.53

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

**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)
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
ONLINE DEPOSIT DETAIL & IMAGES

001

Candidate Name
THE CONSERVATIVE STRIKEFORCE

Category/
Type

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
07 / 09 / 2014

Transaction ID : **SB21B.83188**

Amount of Each Disbursement this Period

3.00

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
ONLINE DEPOSIT DETAIL & IMAGES

001

Candidate Name
THE CONSERVATIVE STRIKEFORCE

Category/
Type

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
07 / 09 / 2014

Transaction ID : **SB21B.83216**

Amount of Each Disbursement this Period

3.00

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
BANK FEE

001

Candidate Name
THE CONSERVATIVE STRIKEFORCE

Category/
Type

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
07 / 14 / 2014

Transaction ID : **SB21B.83187**

Amount of Each Disbursement this Period

12.00

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

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

18.00

**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)
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
SERVICE CHARGE

001

Candidate Name
THE CONSERVATIVE STRIKEFORCE

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
07 / 17 / 2014

Transaction ID : **SB21B.83190**

Amount of Each Disbursement this Period

14.00

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 STRIKEFORCE

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
07 / 17 / 2014

Transaction ID : **SB21B.83221**

Amount of Each Disbursement this Period

15.00

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
WIRE TRANSFER FEE

001

Candidate Name
THE CONSERVATIVE STRIKEFORCE

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
07 / 24 / 2014

Transaction ID : **SB21B.83220**

Amount of Each Disbursement this Period

15.00

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

44.00

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

**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)
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 BILLING

001

Candidate Name
THE CONSERVATIVE STRIKEFORCE

Category/
Type

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
08 / 04 / 2014

Transaction ID : **SB21B.83208**

Amount of Each Disbursement this Period

30.00

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
MONERIS DISCOUNT FEE

001

Candidate Name
THE CONSERVATIVE STRIKEFORCE

Category/
Type

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
08 / 04 / 2014

Transaction ID : **SB21B.83210**

Amount of Each Disbursement this Period

128.23

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
MTOT DISCOUNT FEE

001

Candidate Name
THE CONSERVATIVE STRIKEFORCE

Category/
Type

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
08 / 04 / 2014

Transaction ID : **SB21B.83212**

Amount of Each Disbursement this Period

12.95

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

171.18

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

**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 |

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. WELLS FARGO BANK

Mailing Address 1711 FERN ST

City ALEXANDRIA State VA Zip Code 22302

Purpose of Disbursement
ONLINE DEPOSIT DETAIL & IMAGES

001

Candidate Name
THE CONSERVATIVE STRIKEFORCE

Category/
Type

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
08 / 08 / 2014

Transaction ID : **SB21B.83189**

Amount of Each Disbursement this Period

3.00

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 STRIKEFORCE

Category/
Type

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
08 / 18 / 2014

Transaction ID : **SB21B.83191**

Amount of Each Disbursement this Period

14.00

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 BILLING

001

Candidate Name
THE CONSERVATIVE STRIKEFORCE

Category/
Type

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
09 / 03 / 2014

Transaction ID : **SB21B.83207**

Amount of Each Disbursement this Period

30.00

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

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

47.00

**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)
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
MONERIS DISCOUNT FEE

001

Candidate Name
THE CONSERVATIVE STRIKEFORCE

Category/
Type

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
09 / 03 / 2014

Transaction ID : **SB21B.83211**

Amount of Each Disbursement this Period

219.43

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
MTOT DISCOUNT FEE

001

Candidate Name
THE CONSERVATIVE STRIKEFORCE

Category/
Type

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
09 / 03 / 2014

Transaction ID : **SB21B.83213**

Amount of Each Disbursement this Period

12.95

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
ONLINE DEPOSIT DETAIL & IMAGES

001

Candidate Name
THE CONSERVATIVE STRIKEFORCE

Category/
Type

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
09 / 09 / 2014

Transaction ID : **SB21B.83218**

Amount of Each Disbursement this Period

3.00

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

235.38

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

**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 |

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. 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 STRIKEFORCE

Category/
Type

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
09 / 17 / 2014

Transaction ID : **SB21B.83192**

Amount of Each Disbursement this Period

14.00

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
BANK FEE

001

Candidate Name
THE CONSERVATIVE STRIKEFORCE

Category/
Type

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
09 / 26 / 2014

Transaction ID : **SB21B.83215**

Amount of Each Disbursement this Period

12.00

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
TRANSACTION FEE

001

Candidate Name
THE CONSERVATIVE STRIKEFORCE

Category/
Type

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
09 / 30 / 2014

Transaction ID : **SB21B.83219**

Amount of Each Disbursement this Period

18.50

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

44.50

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

205656.81

**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 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 |

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. JONI ERNST FOR US SENATE INC

Mailing Address PO BOX 93441

City DES MOINES State IA Zip Code 50393

Purpose of Disbursement
POLITICAL CONTRIBUTION

011

Category/
Type

Candidate Name

JONI K ERNST

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: IA District: 00

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09 | / | 23 | / | 2014 |

Transaction ID : SB23.83224

Amount of Each Disbursement this Period

| |
|---------|
| 5000.00 |
|---------|

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

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

| |
|--|
| |
|--|

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

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

| |
|--|
| |
|--|

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

| |
|---------|
| 5000.00 |
|---------|

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

| |
|---------|
| 5000.00 |
|---------|

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

| | |
|---|---|
| (Use separate schedule(s) for each numbered line) | PAGE 177 OF 190 |
| | FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10 |

NAME OF COMMITTEE (In Full)
THE CONSERVATIVE STRIKEFORCE

| | |
|---|---|
| A. Full Name (Last, First, Middle Initial) of Debtor or Creditor BASE CONNECT INC | Nature of Debt (Purpose): DIRECT MAIL - CREATIVE |
| Mailing Address 1155 - 15TH STREET, NW SUITE 410 | |
| City State Zip Code WASHINGTON DC 20005 | |

| | | |
|--|--|--|
| Outstanding Balance Beginning This Period <input type="text" value="49350.93"/> | Transaction ID : SD10.4244 | |
| Amount Incurred This Period <input type="text" value="0.00"/> | Payment This Period <input type="text" value="0.00"/> | Outstanding Balance at Close of This Period <input type="text" value="49350.93"/> |

| | |
|--|--|
| B. Full Name (Last, First, Middle Initial) of Debtor or Creditor CENTURY DATA SYSTEMS CORP | Nature of Debt (Purpose): DATA PROCESSING |
| Mailing Address 1155 - 15TH STREET, NW SUITE 410 | |
| City State Zip Code WASHINGTON DC 20005 | |

| | | |
|--|--|--|
| Outstanding Balance Beginning This Period <input type="text" value="12262.02"/> | Transaction ID : SD10.4245 | |
| Amount Incurred This Period <input type="text" value="0.00"/> | Payment This Period <input type="text" value="0.00"/> | Outstanding Balance at Close of This Period <input type="text" value="12262.02"/> |

| | |
|--|--|
| C. Full Name (Last, First, Middle Initial) of Debtor or Creditor CONSOLIDATED MAILING SERVICES | Nature of Debt (Purpose): DIRECT MAIL - PRINTING & MAILSHOP |
| Mailing Address 504 SHAW ROAD SUITE 206 | |
| City State Zip Code STERLING VA 20166 | |

| | | |
|--|---|--|
| Outstanding Balance Beginning This Period <input type="text" value="68140.11"/> | Transaction ID : SD10.4247 | |
| Amount Incurred This Period <input type="text" value="0.00"/> | Payment This Period <input type="text" value="1296.64"/> | Outstanding Balance at Close of This Period <input type="text" value="66843.47"/> |

| | |
|--|--|
| 1) SUBTOTALS This Period This Page (optional)..... ▶ | <input type="text" value="128456.42"/> |
| 2) TOTALS This Period (last page this line number only)..... ▶ | <input type="text"/> |
| 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶ | <input type="text"/> |
| 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶ | <input type="text"/> |

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

| | |
|---|---|
| (Use separate schedule(s) for each numbered line) | PAGE 178 OF 190 |
| | FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10 |

NAME OF COMMITTEE (In Full)
THE CONSERVATIVE STRIKEFORCE

| | |
|--|--|
| A. Full Name (Last, First, Middle Initial) of Debtor or Creditor DIRECT CONCEPTS | Nature of Debt (Purpose): PAC DIRECT MAIL - PRINTING & MAILSHOP |
| Mailing Address 10130 MALLARD CREEK RD | |
| City State Zip Code CHARLOTTE NC 28262 | |

| | | |
|---|------------------------------------|--|
| Outstanding Balance Beginning This Period 0.00 | Transaction ID : SD10.83368 | |
| Amount Incurred This Period 3750.00 | Payment This Period 2600.00 | Outstanding Balance at Close of This Period 1150.00 |

| | |
|---|---|
| B. Full Name (Last, First, Middle Initial) of Debtor or Creditor DONOR BUREAU | Nature of Debt (Purpose): LIST ENHANCEMENT |
| Mailing Address 1900 N CULPEPPER ST | |
| City State Zip Code ARLINGTON VA 22207 | |

| | | |
|--|------------------------------------|--|
| Outstanding Balance Beginning This Period 4796.43 | Transaction ID : SD10.26386 | |
| Amount Incurred This Period 0.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 4796.43 |

| | |
|---|--|
| C. Full Name (Last, First, Middle Initial) of Debtor or Creditor INTEGRAM | Nature of Debt (Purpose): DIRECT MAIL - PRINTING & MAILSHOP |
| Mailing Address 8421 HILLTOP ROAD | |
| City State Zip Code FAIRFAX VA 22031 | |

| | | |
|--|-----------------------------------|--|
| Outstanding Balance Beginning This Period 9564.38 | Transaction ID : SD10.4248 | |
| Amount Incurred This Period 26540.26 | Payment This Period 29863.71 | Outstanding Balance at Close of This Period 6240.93 |

| | |
|--|----------|
| 1) SUBTOTALS This Period This Page (optional)..... ▶ | 12187.36 |
| 2) TOTALS This Period (last page this line number only)..... ▶ | |
| 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶ | |
| 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶ | |

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

| | |
|---|---|
| (Use separate schedule(s) for each numbered line) | PAGE 179 OF 190 |
| | FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10 |

NAME OF COMMITTEE (In Full)
THE CONSERVATIVE STRIKEFORCE

| | |
|---|---|
| A. Full Name (Last, First, Middle Initial) of Debtor or Creditor LEGACY LIST MANAGEMENT INC | Nature of Debt (Purpose): LIST RENTALS |
| Mailing Address 1155 - 15TH STREET, NW SUITE 410 | |
| City State Zip Code WASHINGTON DC 20005 | |

| | | |
|---|-----------------------------------|---|
| Outstanding Balance Beginning This Period 15238.40 | Transaction ID : SD10.4249 | |
| Amount Incurred This Period 0.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 15238.40 |

| | |
|--|--|
| B. Full Name (Last, First, Middle Initial) of Debtor or Creditor RHA MARKETING LLC | Nature of Debt (Purpose): DIRECT MAIL - PRINTING & MAILSHOP |
| Mailing Address 1124 RUTLANDVIEW DR | |
| City State Zip Code DAVIDSONVILLE MD 21035 | |

| | | |
|--|------------------------------------|---|
| Outstanding Balance Beginning This Period 4084.15 | Transaction ID : SD10.26401 | |
| Amount Incurred This Period 0.00 | Payment This Period 4084.15 | Outstanding Balance at Close of This Period 0.00 |

| | |
|---|---|
| C. Full Name (Last, First, Middle Initial) of Debtor or Creditor RICHARD NORMAN COMPANY | Nature of Debt (Purpose): PAC DIRECT MAIL - CREATIVE |
| Mailing Address 44084 RIVERSIDE PKWY | |
| City State Zip Code LEESBURG VA 20176 | |

| | | |
|---|------------------------------------|--|
| Outstanding Balance Beginning This Period 0.00 | Transaction ID : SD10.83379 | |
| Amount Incurred This Period 21000.00 | Payment This Period 14000.00 | Outstanding Balance at Close of This Period 7000.00 |

| | |
|--|-----------|
| 1) SUBTOTALS This Period This Page (optional)..... ▶ | 22238.40 |
| 2) TOTALS This Period (last page this line number only)..... ▶ | 162882.18 |
| 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶ | 0.00 |
| 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶ | 162882.18 |

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

| | |
|---|---|
| Full Name of Payee ACTIVE ENGAGEMENT LLC [MEMO ITEM] | Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 07 / 01 / 2014 |
| Mailing Address 44084 RIVERSIDE PKWY SUITE 350 | Amount 1000.00 |
| City State Zip Code LANSDOWNE VA 20176 | Transaction ID : SE.82034 Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 07 / 01 / 2014 |
| Purpose of Expenditure VOTER CONTACT eMAILS OVER SEVERAL WEEKS | Category/Type 004 |
| Name of Federal Candidate THOM R TILLIS | <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: <u>00</u> State: <u>NC</u> |
| Calendar Year-To-Date Per Election for Office Sought 12677.99 | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ |

| | |
|--|---|
| Full Name of Payee ACTIVE ENGAGEMENT LLC | Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 04 / 02 / 2014 |
| Mailing Address 44084 RIVERSIDE PKWY SUITE 350 | Amount 1327.80 |
| City State Zip Code LANSDOWNE VA 20176 | Transaction ID : SE.83307 Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 07 / 08 / 2014 |
| Purpose of Expenditure VOTER CONTACT eMAILS | Category/Type 004 |
| Name of Federal Candidate MARK J WARNER | <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: <u>00</u> State: <u>VA</u> |
| Calendar Year-To-Date Per Election for Office Sought 9127.36 | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ |

| | |
|--|---|
| (a) SUBTOTAL of Itemized Independent Expenditures..... ▶ | 1327.80 |
| (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

Signature _____ [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y
10 / 15 / 2014

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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

Full Name of Payee ACTIVE ENGAGEMENT LLC
Mailing Address 44084 RIVERSIDE PKWY SUITE 350
City LANSDOWNE State VA Zip Code 20176
Purpose of Expenditure VOTER CONTACT eMAILS Category/Type 004

Date of Public Distribution/Dissemination 07 / 01 / 2014
Amount 1000.00
Transaction ID : SE.83308
Date of Disbursement or Obligation 07 / 15 / 2014

Name of Federal Candidate THOM R TILLIS
Support [X] Oppose []
Office Sought: House [] Senate [X]
District: 00 State: NC
Calendar Year-To-Date Per Election for Office Sought 13677.99

Disbursement For: Primary [] General [X] Other (specify)
2014

Full Name of Payee ACTIVE ENGAGEMENT LLC [MEMO ITEM]
Mailing Address 44084 RIVERSIDE PKWY SUITE 350
City LANSDOWNE State VA Zip Code 20176
Purpose of Expenditure VOTER CONTACT Category/Type 004

Date of Public Distribution/Dissemination 08 / 19 / 2014
Amount 1425.00
Transaction ID : SE.83121
Date of Disbursement or Obligation 08 / 19 / 2014

Name of Federal Candidate JONI K ERNST
Support [X] Oppose []
Office Sought: House [] Senate [X]
District: 00 State: IA
Calendar Year-To-Date Per Election for Office Sought 1425.00

Disbursement For: Primary [] General [X] Other (specify)
2014

Table with 2 columns: Description and Amount. (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 10 / 15 / 2014

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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

Full Name of Payee ACTIVE ENGAGEMENT LLC
Mailing Address 44084 RIVERSIDE PKWY SUITE 350
City LANSDOWNE State VA Zip Code 20176
Purpose of Expenditure VOTER CONTACT eMAILS Category/Type 004
Name of Federal Candidate JONI K ERNST Support
Calendar Year-To-Date Per Election for Office Sought 2850.00

Date of Public Distribution/Dissemination 08 / 19 / 2014
Amount 1425.00
Transaction ID : SE.83309
Date of Disbursement or Obligation 08 / 26 / 2014
Office Sought: House District: 00
Senate State: IA
Disbursement For: Primary General 2014

Full Name of Payee ACTIVE ENGAGEMENT LLC [MEMO ITEM]
Mailing Address 44084 RIVERSIDE PKWY SUITE 350
City LANSDOWNE State VA Zip Code 20176
Purpose of Expenditure VOTER CONTACT eMAILS Category/Type 004
Name of Federal Candidate JONI K ERNST Support
Calendar Year-To-Date Per Election for Office Sought 3850.00

Date of Public Distribution/Dissemination 08 / 27 / 2014
Amount 1000.00
Transaction ID : SE.83129
Date of Disbursement or Obligation 08 / 27 / 2014
Office Sought: House District: 00
Senate State: IA
Disbursement For: Primary General 2014

(a) SUBTOTAL of Itemized Independent Expenditures 1425.00
(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 10 / 15 / 2014
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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

Full Name of Payee ACTIVE ENGAGEMENT LLC [MEMO ITEM]
Mailing Address 44084 RIVERSIDE PKWY SUITE 350
City LANSDOWNE State VA Zip Code 20176
Purpose of Expenditure VOTER CONTACT eMAILS Category/Type 004
Name of Federal Candidate JONI K ERNST Support
Calendar Year-To-Date Per Election for Office Sought 4850.00

Date of Public Distribution/Dissemination 09 / 02 / 2014
Amount 1000.00
Transaction ID : SE.83134
Date of Disbursement or Obligation 09 / 02 / 2014
Office Sought: House District: 00
President Senate State: IA
Disbursement For: Primary General 2014 Other (specify)

Full Name of Payee ACTIVE ENGAGEMENT LLC
Mailing Address 44084 RIVERSIDE PKWY SUITE 350
City LANSDOWNE State VA Zip Code 20176
Purpose of Expenditure VOTER CONTACT eMAILS Category/Type 004
Name of Federal Candidate JONI K ERNST Support
Calendar Year-To-Date Per Election for Office Sought 5850.00

Date of Public Distribution/Dissemination 08 / 27 / 2014
Amount 1000.00
Transaction ID : SE.83311
Date of Disbursement or Obligation 09 / 02 / 2014
Office Sought: House District: 00
President Senate State: IA
Disbursement For: Primary General 2014 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.
SCOTT B MACKENZIE [Electronically Filed] Date 10 / 15 / 2014
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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

Full Name of Payee ACTIVE ENGAGEMENT LLC
Mailing Address 44084 RIVERSIDE PKWY SUITE 350
City LANSDOWNE State VA Zip Code 20176
Purpose of Expenditure VOTER CONTACT eMAILS Category/Type 004

Date of Public Distribution/Dissemination 09 / 02 / 2014
Amount 1000.00
Transaction ID : SE.83312
Date of Disbursement or Obligation 09 / 02 / 2014

Name of Federal Candidate JONI K ERNST
Support [X] Oppose []
Office Sought: House [] Senate [X]
District: 00 State: IA

Disbursement For: Primary [] General [X]
2014 Other (specify)

Full Name of Payee ACTIVE ENGAGEMENT LLC
Mailing Address 44084 RIVERSIDE PKWY SUITE 350
City LANSDOWNE State VA Zip Code 20176
Purpose of Expenditure GRASS ROOTS SUPPORT eMAILS Category/Type 004

Date of Public Distribution/Dissemination 09 / 25 / 2014
Amount 10212.00
Transaction ID : SE.83313
Date of Disbursement or Obligation 09 / 16 / 2014

Name of Federal Candidate JONI K ERNST
Support [X] Oppose []
Office Sought: House [] Senate [X]
District: 00 State: IA

Disbursement For: Primary [] General [X]
2014 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 11212.00
(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 10 / 15 / 2014

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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

Full Name of Payee ACTIVE ENGAGEMENT LLC
Mailing Address 44084 RIVERSIDE PKWY SUITE 350
City LANSDOWNE State VA Zip Code 20176
Purpose of Expenditure GRASS ROOTS SUPPORT eMAILS Category/Type 004
Name of Federal Candidate JONI K ERNST Support
Calendar Year-To-Date Per Election for Office Sought 20462.00

Date of Public Distribution/Dissemination 09 / 24 / 2014
Amount 3400.00
Transaction ID : SE.83314
Date of Disbursement or Obligation 09 / 23 / 2014
Office Sought: House District: 00
Senate State: IA
Disbursement For: Primary General 2014

Full Name of Payee ACTIVE ENGAGEMENT LLC [MEMO ITEM]
Mailing Address 44084 RIVERSIDE PKWY SUITE 350
City LANSDOWNE State VA Zip Code 20176
Purpose of Expenditure VOTER CONTACT eMAILS Category/Type 004
Name of Federal Candidate JONI K ERNST Support
Calendar Year-To-Date Per Election for Office Sought 20462.00

Date of Public Distribution/Dissemination 09 / 24 / 2014
Amount 3400.00
Transaction ID : SE.83139
Date of Disbursement or Obligation 09 / 24 / 2014
Office Sought: House District: 00
Senate State: IA
Disbursement For: Primary General 2014

(a) SUBTOTAL of Itemized Independent Expenditures 3400.00
(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 10 / 15 / 2014
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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

Full Name of Payee ACTIVE ENGAGEMENT LLC [MEMO ITEM]
Mailing Address 44084 RIVERSIDE PKWY SUITE 350
City LANSDOWNE State VA Zip Code 20176
Purpose of Expenditure VOTER CONTACT eMAILS Category/Type 004
Name of Federal Candidate JONI K ERNST Support
Calendar Year-To-Date Per Election for Office Sought 31924.00

Date of Public Distribution/Dissemination 09/25/2014
Amount 10212.00
Transaction ID : SE.83147
Date of Disbursement or Obligation 09/25/2014
Office Sought: House District: 00
Senate State: IA
Disbursement For: Primary General 2014

Full Name of Payee ACTIVE ENGAGEMENT LLC [MEMO ITEM]
Mailing Address 44084 RIVERSIDE PKWY SUITE 350
City LANSDOWNE State VA Zip Code 20176
Purpose of Expenditure GRASSROOTS SUPPORT eMAILS Category/Type 004
Name of Federal Candidate JONI K ERNST Support
Calendar Year-To-Date Per Election for Office Sought 44124.00

Date of Public Distribution/Dissemination 09/29/2014
Amount 1000.00
Transaction ID : SE.83151
Date of Disbursement or Obligation 09/29/2014
Office Sought: House District: 00
Senate State: IA
Disbursement For: Primary General 2014

(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 10/15/2014
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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

Full Name of Payee ACTIVE ENGAGEMENT LLC [MEMO ITEM]
Mailing Address 44084 RIVERSIDE PKWY SUITE 350
City LANSDOWNE State VA Zip Code 20176
Purpose of Expenditure GRASSROOTS SUPPORT eMAILS Category/Type 004
Name of Federal Candidate JONI K ERNST Support
Calendar Year-To-Date Per Election for Office Sought 59124.00

Date of Public Distribution/Dissemination 09/30/2014
Amount 13000.00
Transaction ID : SE.83157
Date of Disbursement or Obligation 09/30/2014
Office Sought: House District: 00
Senate State: IA
Disbursement For: Primary General 2014

Full Name of Payee ACTIVE ENGAGEMENT LLC [MEMO ITEM]
Mailing Address 44084 RIVERSIDE PKWY SUITE 350
City LANSDOWNE State VA Zip Code 20176
Purpose of Expenditure GRASSROOTS SUPPORT eMAILS Category/Type 004
Name of Federal Candidate JONI K ERNST Support
Calendar Year-To-Date Per Election for Office Sought 63800.00

Date of Public Distribution/Dissemination 10/01/2014
Amount 4676.00
Transaction ID : SE.83160
Date of Disbursement or Obligation 10/01/2014
Office Sought: House District: 00
Senate State: IA
Disbursement For: Primary General 2014

(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] Date 10/15/2014
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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

Full Name of Payee STRATEGIC CAMPAIGN GROUP INC [MEMO ITEM]
Mailing Address 4600 N FAIRFAX DRIVE SUITE 802
City ARLINGTON State VA Zip Code 22203
Purpose of Expenditure VOTER CONTACT eMAILS - CREATIVE Category/Type 004
Name of Federal Candidate JONI K ERNST Support
Calendar Year-To-Date Per Election for Office Sought 21712.00

Date of Public Distribution/Dissemination 09 / 24 / 2014
Amount 1250.00
Transaction ID : SE.83141
Date of Disbursement or Obligation 09 / 24 / 2014
Office Sought: House District: 00
Senate State: IA
Disbursement For: Primary General 2014

Full Name of Payee STRATEGIC CAMPAIGN GROUP INC [MEMO ITEM]
Mailing Address 4600 N FAIRFAX DRIVE SUITE 802
City ARLINGTON State VA Zip Code 22203
Purpose of Expenditure VOTER CONTACT eMAILS - LISTS Category/Type 004
Name of Federal Candidate JONI K ERNST Support
Calendar Year-To-Date Per Election for Office Sought 21712.00

Date of Public Distribution/Dissemination 09 / 24 / 2014
Amount 4000.00
Transaction ID : SE.83142
Date of Disbursement or Obligation 09 / 24 / 2014
Office Sought: House District: 00
Senate State: IA
Disbursement For: Primary General 2014

(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 10 / 15 / 2014

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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

Full Name of Payee STRATEGIC CAMPAIGN GROUP INC [MEMO ITEM]
Mailing Address 4600 N FAIRFAX DRIVE SUITE 802
City ARLINGTON State VA Zip Code 22203
Purpose of Expenditure VOTER CONTACT eMAILS - LISTS Category/Type 004
Name of Federal Candidate JONI K ERNST Support
Calendar Year-To-Date Per Election for Office Sought 43124.00

Date of Public Distribution/Dissemination 09/25/2014
Amount 11200.00
Transaction ID : SE.83148
Date of Disbursement or Obligation 09/25/2014
Office Sought: House District: 00
Senate State: IA
Disbursement For: Primary General 2014

Full Name of Payee STRATEGIC CAMPAIGN GROUP INC [MEMO ITEM]
Mailing Address 4600 N FAIRFAX DRIVE SUITE 802
City ARLINGTON State VA Zip Code 22203
Purpose of Expenditure GRASSROOTS SUPPORT eMAILS - LISTS & CREATIVE Category/Type 004
Name of Federal Candidate JONI K ERNST Support
Calendar Year-To-Date Per Election for Office Sought 46124.00

Date of Public Distribution/Dissemination 09/29/2014
Amount 2000.00
Transaction ID : SE.83152
Date of Disbursement or Obligation 09/29/2014
Office Sought: House District: 00
Senate State: IA
Disbursement For: Primary General 2014

(a) SUBTOTAL of Itemized Independent Expenditures 0.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures 27564.80

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 10/15/2014
Signature