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

Schedule E)		PAGE 1 OF 2 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
CONSERVATIVE MAJORITY FUND		
		C C00524454
Check if X 24-hour report 48-hour report New report X Amends report filed on 08 08 2012		
Full Name of Payee INFOCISION MANAGEMENT CORP		Date of Public Distribution/Dissemination
Mailing Address		
Mailing Address 325 SPRINGSIDE DR		Amount
City State	Zip Code	0.00
AKRON OH	44321	Transaction ID : SE.142638 Date of Disbursement or Obligation
Purpose of Expenditure VOTER CONTACT CALLS	Category/ Type 004	08 / 07 / 2012
Name of Federal Candidate	Support Office	ce Sought: House District: 00
OBAMA, BARAK HUSSEIN, , ,	X Oppose X	President Senate State:
Calendar Year-To-Date Per Election for Office Sought	723722.01 Dist 2013	oursement For: Primary ★ General Other (specify) ▶
Full Name of Payee		Date of Public Distribution/Dissemination
		M = M / D = D / Y = Y = Y
Mailing Address		A
		Amount
City State	Zip Code	
		Date of Disbursement or Obligation
Purpose of Expenditure	Category/ Type	M = M / D = D / Y = Y = Y
Name of Federal Candidate	Support Offi	ce Sought: House District:
	Oppose	President Senate State:
Calendar Year-To-Date Per Election for Office Sought	Dis	bursement For: Primary General Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures		0.00
(b) SUBTOTAL of Unitemized Independent Expenditures	·····	1171171171
(c) TOTAL Independent Expenditures	······································	1171171171
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.		
MACKENZIE, SCOTT B, , , [Electro] Signature	nically Filed] Date	12 06 Y 2016
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: 97 'A = G7 9 @ G B9 C I G'H9 L H'F9 @ 5 H98 'HC'5 'F9 DCF HZ'G7 < 98 I @ 'CF' ± H9 A ± N5 H± C B

Form/Schedule: F24A Transaction ID:

THE COMMITTEE OVER-REPORTED IES ON THIS FORM 24 AND IS ZEROING-OUT THIS NOTICE.

Form/Schedule: Transaction ID: